

The logo for Kids Plus Pediatrics features the letters 'k', 'i', 'd', 's', and a '+' sign, each inside a colored square: 'k' is green, 'i' is red, 'd' is purple, 's' is yellow, and '+' is blue. Below this graphic, the word 'pediatrics' is written in a lowercase, sans-serif font.

**k i d s +**  
pediatrics  
**2-Month Handout**

## **2-MONTH DEVELOPMENT QUESTIONS**

1. Does your baby lift and turn her head when lying on her belly?
2. Is your baby becoming more vocal (starting to “coo”)?
3. Does your baby respond to sound, and watch your face briefly?
4. Does your baby smile in response to you?
5. Will your baby hold an object in his hand, and then let go of it?

## **FEEDING**

Your baby still only needs breast milk or infant formula with iron. (We usually give breastfed babies a vitamin D supplement, as well.) It’s not time to start cereal or baby foods yet. Cereal starts at 4-6 months of age.

At this age, most babies take about 4 ounces of formula (some may take more) every 3 to 4 hours during the day, sometimes going longer between feeds at night. Most breastfed babies are still feeding an average of 8 times per day. Some may feed more, and some may feed less.

As long as your baby is gaining weight, there’s nothing to be concerned about!

## **DEVELOPMENT**

Babies start to lift their heads briefly. They reach for things with their hands. They enjoy smiling faces and sometimes smile in return. Cooing sounds may be made in response to people speaking gentle, soothing words. Cuddling, playing, and talking to your baby is a great way to help her development.

## **SLEEP**

By this age, some children are down to just one to two feedings per night. We still recommend feeding your baby on demand. If you notice she is not nursing for long at night or doesn’t take much formula before falling back to sleep, it’s okay to try to briefly hold your baby to comfort her back to sleep without feeding. Never awaken the baby for night time feeding except at your bedtime.

## **COLIC & CRYING**

Crying may increase during the first six to eight weeks. Sometimes it may be a sign of hunger or the need to change a diaper, but often there may be no reason for the crying. As you get to know your baby better, you'll become more comfortable knowing when to pick up and console the baby, and when to feel confident that the crying will stop in a few minutes if left alone. Remember: fussing is usually related to the baby's temperament, not to bad parenting!

## **HOT WATER**

To minimize the risk of scalding, we recommend your hot water heater be set no higher than 120°F.

By 3 to 5 months, babies will wave their fists and grab things. NEVER carry your baby and hot liquids or hot foods at the same time. You can't handle both safely, and your baby could get burned.

If your baby does get a burn, immediately put the burned area in cold water. Keep the area in cold water until she stops crying, then cover the burn loosely with a bandage or clean cloth and call us right away.

## **SMOKE & CARBON MONOXIDE DETECTORS**

Houses should have at least one smoke detector on each level. Many safety experts recommend one in each bedroom, as well as a carbon monoxide (CO) detector for the house. Be sure to check the batteries at least twice a year to be sure they are still functioning properly. Your family should have an escape plan in case of fire, including multiple exit sites, and a safe place to meet outside so you can be sure everyone is out safely.

We also caution against passive smoke exposure of any kind. Our recommendation for the health of your baby is no smoking. The more smoke your child is exposed to, the higher her chance of developing more colds, lung infections, ear infections, allergies, asthma problems, and cancer. The best thing for your child's health is for you not to smoke at all. Even if you don't smoke near your child, chemicals from smoking stay with you on your clothes and on your body. If you must smoke, smoke outside the house, never inside or in the car. Even if your child is in another room or not in the car at the moment, she will still be exposed to lingering, harmful chemicals later.

## **CAR SAFETY**

Make certain that your baby's car seat is installed correctly. Read and follow the instructions that come with the car seat and the car's owner's manual. Use the car seat EVERY time your child is in a car.

All babies should be restrained in a rear-facing car seat, in the rear seat of the car. The American Academy of Pediatrics recommends that all infants and toddlers should ride in a rear-facing safety seat

until age 2, or until they reach the highest weight and height allowed by their car seat's manufacturer. For more information, see Dr. Hartung's Doctor's Note on Car Seat Safety: <http://bit.ly/KPCarSeat>

Finally, never leave your child alone in a car.

## FALLS

Babies wiggle and move and push against things with their feet soon after they're born. Even these very first movements can result in a fall. As your baby grows and is able to roll over, he'll fall off everything unless protected. Don't leave your baby alone on changing tables, beds, sofas, chairs, etc. Always put your baby in a safe place, such as a crib or playpen, when you cannot hold her.

Your baby may be able to crawl as early as 6 months. Use gates on stairways, and close doors to keep your baby out of rooms where she might get hurt. Install window guards on all windows above the first floor.

We recommend you do NOT use a baby walker. A baby walker lets your child get to places where he can fall, pull heavy objects or hot food onto himself, or gain access to dangerous or poisonous substances. Your baby may tip the walker over, fall out of it, or fall down the stairs. Walker injuries frequently include skull fractures, bleeding inside the head, broken legs and arms, and burns. Each year, more than 29,000 children are treated in hospital emergency rooms for walker-related injuries.

Here are some notable facts about baby walkers:

1. Baby walkers do not help your baby to walk earlier. In fact, they often delay walking.
2. A baby in a walker can move 3 feet per second -- much faster than on his own.
3. Gates do not prevent babies from tumbling down stairs in walkers. Children can take the gate down, or the walker can knock the gate loose.
4. Most baby walker injuries happen while at least one parent is home watching the child.
5. Non-mobile supports such as exercise saucers are much safer.

If your baby does fall and hit his head, call us for advice. Call 911 if your baby does not respond to your voice or touch, or if he cannot move his arms or legs.

## CHOKING & POISONING

Babies explore their environment by putting anything and everything into their mouths. Never leave small objects in your baby’s reach, even for a moment. Never feed your baby hard pieces of food such as chunks of raw carrots, apples, hot dogs, grapes, and so on, until they are much older and ready to handle them. Many local hospitals, as well as the Red Cross, offer infant/child CPR and choking classes that will help prepare you in case your child ever starts to choke.

If your child does ingest anything he should not, call the **Poison Control Center** immediately at **412-681-6669**. They will instruct you how to handle the situation based on how old your child is, what he ate, and how much he ingested.

## QUESTIONS & CONCERNS

If you feel you need additional advice between regular check-ups, you can post questions to our Facebook page or telephone us during office hours. Facebook, where we answer questions sometimes as quickly as in a few minutes, is a great place to ask about general, non-pressing issues. For more detailed and pressing health questions, it’s best to call. Either way, we’re always happy to provide counseling and guidance. (It’s both our job and our pleasure!)

When calling after office hours, your call will be answered by an answering machine. If you have a concern that can’t wait for regular office hours, please leave your name, your child’s name (with spelling), and your phone number, and we’ll return your call within an hour or less.

If you have an emergency that requires an ambulance or paramedics, call 911 *first*. If you have an emergency that can’t wait for a call back and need to have the doctor urgently paged (such as seizures, respiratory illness with labored breathing, suspected dehydration, or similar conditions), the recorded message will give you the answering service’s phone number, and they can reach the doctor on call for the emergency.

## AND REMEMBER...

We have a wonderful, 24/7/365 resource for parents at our **Kids Plus Facebook Page**. Like us on Facebook, and follow along with our great Kids Plus Social Media Community!

*We look forward to seeing you at your 4-Month Well Visit!*

