



Complete Care Pediatrics

Weight: _____ Length: _____ Head Circumference: _____

2 Month

Your little babe is now looking at you (really looking at you) and many are starting to respond with a smile. Little bits of personality are starting to present themselves and baby is beginning to interact with the world around them.

Development

Social/Emotional

- Begins to smile at people
- Can briefly calm himself (may bring hands to mouth and suck on hand)
- Tries to look at parent

Language/Communication

- Coos, makes gurgling sounds
- Turns head toward sounds and recognizes familiar voices

Cognitive (learning, thinking, problem-solving)

- Pays attention to faces
- Begins to follow things with eyes and recognize people at a distance. Your baby can see up to 3-4 feet.
- Begins to act bored (cries, fussy) if they need an activity change
- high contrast pictures are still a favorite, so is looking at themselves in a mirror

Movement/Physical Development

- Can hold head up and turn head from one side to the other when lying on tummy
- Makes smoother movements with arms and legs. Body movements should be symmetrical
- Brings hands to midline

Fever and medication

- FEVER = 100.4 F or higher rectally
- No Advil or Motrin (ibuprofen) until 6 months
- No Aspirin until 18 years
- Tylenol (Acetaminophen) may now be given for fever, teething, or pain relief. Tylenol may be given as often as every 4 hours but we suggest using it as sparingly as possible. Tylenol dosing is based on weight; please see chart below for your child's dose.

Infant's Weight	Infant or Children's Suspension (160mg/5ml)
6 – 11 lbs.	1.25 ml (40mg)
12 – 17 lbs.	2.5 ml, ½ teaspoon (80mg)
18 – 23 lbs.	3.75ml, ¾ teaspoon (120mg)



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- Minimize your infant's exposure to infections by washing hands often, avoiding public areas and reducing the number of people who hold your infant.
- **NO COUGH OR COLD MEDICINES.** If your infant gets a cold, try humidified air and nasal saline drops with the bulb syringe. Please call our office if your infant seems to be having difficulty breathing or is not feeding well due to congestion.

Sleep

Hopefully, baby is starting to sleep longer stretches at night. This may be anywhere from 3-5 hours before their first wake up. Know that it is still normal for some babies to wake 3-4 times a night at this age. Baby may still be feeding, rocking or being held to sleep especially at night. This is a great time to start practicing putting baby down in their crib or bassinet when they are sleepy, but not asleep. This is a step toward helping baby learn to self soothe. If baby has trouble settling to sleep, pat or gently rock baby while they are in their crib/bassinet. Try to avoid picking them up. If they lose it and are really worked up, then by all means pick them up and help them settle. Try again in a few days or a week.

A lot of baby's reflexes are starting to mellow out, like the startle reflex (Moro reflex). Developmentally they are getting more comfortable in their new environment. It's a great time to explore how they can learn to self soothe a bit. But no pressure, you will not be rocking your 15 year old to sleep if your baby still needs help at this age, I promise!

- Infants at this age may be able to consolidate longer sleep cycles. The frequency and duration of feedings, regular nap times, and active playtimes may help to encourage longer sleep duration overnight.
- You may notice more predictability in when baby wakes up to start their day and when the first morning nap occurs.
- Infants should sleep on their back to reduce risk of Sudden Infant Death Syndrome (SIDS).
- Putting your infant to sleep with a pacifier may also help to reduce the risk of SIDS.
- Cribs slats should be no more than 2 ¼ inches apart so your infant's head cannot become trapped between them. Keep the side rails up whenever your infant is in the crib to prevent falls. The crib mattress should be firm and snug-fitting.
- Avoid loose, soft bedding such as pillows, blankets, and comforters as well as soft toys in your baby's crib.
- Infants should have tummy time every day while supervised but not while sleeping



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Routine baby care

- If your baby has fussy periods in the afternoon or evening, try to calm him/her by talking, patting, stroking, rocking, or bundling. It is okay to put your infant down in another room if you need a break. Never shake a baby.
- A fussy baby can be challenging. If you feel as though your infant is fussier than normal and you need support, the Fussy Baby Network is a great resource <http://www.fussybabynetworkcolorado.org>, through the first year of life.
- Infants stool in varying patterns. Some babies are still stooling several times a day, some go days between bowel movements. If your baby is stooling 5 or more times a day, discuss this with your pediatric provider.
- Most babies only need baths 1-2 times per week to avoid drying out the skin, and encourage a healthy skin microbiome. Minimize soap exposure to avoid excessive drying. To check the toxicity of your newborn skin care products, visit <https://www.ewg.org/skindeep/>

Parenting Tips

Normal babies hiccup, sneeze, startle and have an occasional throw-up of a single feed. Hold, cuddle, sing and talk to your baby. Attend to all their needs. They cannot be spoiled at this age. When awake, the baby should be part of the action of the family. An unbreakable mirror attached to the inside of the crib shows babies the most amazing miracle they will ever see: themselves! Place the object about 12 inches from the baby and change frequently. Babies soothe themselves by sucking. Your baby's thumb, finger or a pacifier can help to satisfy this need. Select a pacifier constructed in one piece. Never tie the pacifier to the face or neck. To encourage your baby to sleep more at night, keep the nighttime interactions brief and dull. Play with your baby and have a great time, but try to remember playing with him/her (bouncing on knee, tickling, etc.) late in the evening will stimulate your baby. While your baby can sleep during the day, most adults cannot. Stop wild play well before bedtime and help your baby to calm down by singing, cuddling and other quiet play. Try to schedule a routine bedtime for your baby. Remember to take time for yourself. Arrange to spend some time alone with your other loved ones. Each parent should spend some time alone with the baby each day. Accept others' help with the baby. This will allow you to spend some special time alone with your partner, older siblings and friends. Be careful when leaving your baby alone around young siblings. If you smoke, please try (again) to quit. It isn't easy, but you now have a brand new reason to stay healthy. Becoming a parent for the first time or adding a new member to your family is a challenge and huge change in your life. If you find yourself depressed or sad or overwhelmed, please let your doctor or your baby's doctor know. We can help. For individual counseling, call your mental health provider.



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Returning to Work

While maternity (and paternity leave for that matter) is not a guarantee in the United States, if you have had time off to bond with your baby and get used to a new “normal” for your family, you are often thinking about the return to work around the 2-3 month mark. For some, this is a relief and for others it is too soon, too scary, too...everything. All of these feelings are normal. They do not mean you’re a bad parent or a poor co-worker, they are completely legitimate and normal responses. If the feelings are overwhelming, please reach out to us or a licensed therapist to start working through why these feelings are troubling you. There is a lot of identity confusion for working moms. We wear many different hats and it is hard to balance our care, our baby’s care, the rest of the family and work. It’s A LOT to process and wrap your head around. Remember our mantra: “The first part of taking care of baby, is taking care of you!” For breastfeeding moms returning to the workforce, it is time to think about what the feeding schedule and volume needs of baby will be. You do not need a freezer full of breast milk to be able to return to work. You need 1-2 days worth and that’s it. If you have not done a lot of bottle feeding, you may want to introduce it fairly regularly (once daily) to get baby familiar with the process and get a good idea of what volume baby will take per feeding. Now babies never eat exactly 3 or 4 or whatever oz at every feed if they are breastfed. But you should be able to gauge within ½-1 oz what baby’s need will be.

You can refer to the 2 week packet on pumping if you need a refresher on the best times and ways to pump for storage.

Regardless of whether you have a nanny, baby is going to a family member’s house, a home daycare or is in a formal daycare setting; the transition is hard for everyone. If it is at all possible, I recommend starting baby in daycare BEFORE you go back to work. Maybe just a week or 2, to give you both some time to adjust. Maybe even ease into it with half days before baby has to go full time. It gives you a chance to see how both you and baby adjust and the added stress of being back at work is not in the equation yet. If baby is in a setting outside of the home, it offers you a chance to see how things are run at various times of the day and what staffing looks like. It’s a win-win.

Now whether or not this option is available to you, please know that the first week or two back to work, with baby in childcare, is going to be rough for everyone. Some babies eat to soothe and will blow through the milk sent with them to daycare before they’re half way through the day. Some babies refuse to eat because you are not there and they are not happy with the new situation. Then there’s mom’s work schedule and accommodations that need to be made so she can pump appropriately. Some moms



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produce beautifully with a pump. Some do not respond well to this type of stimulation and production can be less than stellar. Be sure you have your schedule tailored to accommodate when you will need to pump. Plan on 40-45 minutes each session the first week and maybe 30 minutes per session after that. Just give yourself enough time to settle in, relax and think of baby, so you can produce as much as possible. If it does not take you this long to pump, great. But set the time aside before you return so that it is already built into your schedule.

DO NOT let the first few days to weeks define the story of breastfeeding after your return to work. This is why you have a few days of milk in storage. Dive into that stash if needed, talk to a lactation consultant or other moms about what worked for them. But relax, the body is really good at adapting to change and use your resources if you are in a tough spot.

If you are planning to stay home with baby, congratulations you are the hardest working women we know. Be sure to plan something with other moms/care givers or friends a few times a week to get some adult interaction in. Continue to practice using a bottle a few times a week so baby does not lose the skill.

Development from 2 months to 4 months:

- Gross Motor skills: holds head upright; raises body using arms when on stomach; may roll front to back and back to front; may support weight on legs.
- Fine Motor skills: reaches for and grabs objects; puts hands together; plays with hands; grabs rattle; releases objects voluntarily
- Sensory skills: tracks and follows objects visually to 180°; responds to sounds by becoming quiet and alert
- Communication skills: coos reciprocally; expresses needs through differentiated crying; blows bubbles; may make “raspberry” sounds
- Social skills: smiles readily in social settings; may laugh or squeal; differentiates individuals (mother, father, siblings, other caregivers, and strangers)

If your infant received vaccinations today, he/she may not experience any side effects of these vaccines. However, the most commonly reported side effects include: an increase in sleeping, possibly fever (low-grade, 99-100°) and mild fussiness within 24-48 hours.

Your infant's next well check should be at 4 months of age.