



Complete Care Pediatrics

Weight: \_\_\_\_\_ Length: \_\_\_\_\_ Head Circumference: \_\_\_\_\_

## 4 month olds

Some serious gab sessions going on around this time. Lots of back and forth banter (call and response) and if you're lucky, some chuckles! Baby really responds and lights up when they hear and see you. Such fun!

Check your car seat and make sure straps do not need to be adjusted up for your baby. There is a big linear growth spurt between the 2-4 month mark and if you cannot see where the shoulder straps on baby's car seat are coming from (ie baby is laying against where the shoulder straps exit ) it's time to move them up.

## Development

### Social/Emotional

- Your baby is actively smiling and socially interacting with the people around them. They enjoy playing with people and may cry or whine if play stops. They may start to copy or mirror some facial expressions - smiling when you do, frowning if you do.

### Language/Communication

- Many babies are starting to babble at this age and will often carry on a "conversation" with you, responding to your questions and responses. Baby may copy some tones or inflections that they hear.
- Cries often become differentiated. You can tell a hungry cry from a tired cry.

### Cognitive

- Let's you know when they are happy (or not!)
- Baby is able to reach and bat at toys, may grip tight around a finger or rattle if placed in their palm. Watches their hands with interest
- Recognizes familiar faces and voices from a greater distance

### Movement/Physical Development

- Is able to hold head steady when upright and is now pushing up onto elbows or hands when in tummy time. Some babies may be rolling from tummy to back.
- Brings hands to mouth and may show some signs of teething.

## Nutrition

For proper growth and development, breast milk or formula is all your baby needs for the first 4 - 6 months of life. Breast milk is the preferred form of nutrition for infants. However, not all moms are comfortable with this method of feeding or are able to breastfeed. For these babies, iron fortified formula is an excellent source of nutrition.

Introduction to solids often happens between the 4-6 month mark, there is more information about this later in the packet.



## Complete Care Pediatrics

### Fever and medication

- FEVER = 100.4 F or higher rectally or under the arm. Fevers are normal, natural responses and do not always need to be treated. If baby has a fever but is not uncomfortable, having difficulty sleeping or eating - they are fine to ride this fever out. Generally, any fever over 102-103 makes for a fussy baby and it is ok to manage these fevers with medication.
- Note that fever reducing medication will likely only drop the fever by 1-2 degrees.
- Tylenol (Acetaminophen) may 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)

- No Advil or Motrin (ibuprofen) until 6 months
- No Aspirin until 18 years
- 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 and sleep regression

Sleep, glorious sleep, where have you gone? It is very common for babies this age to have a bit of a sleep regression. Babies that were once waking 1-2 times a night are now up every 2-3 hours again. The reason for this is often multifold. There is a lot of crazy development going on and your baby's sleep pattern is starting to mature. Babies start to sleep in more stages and cycles at this age. As baby's sleep cycle changes there is a new period of wakefulness between the light and deep sleep cycles. Many babies commit to this wake up and need help getting back to sleep because they are in a different spot than where they fell asleep and they are awake enough now to realize it. We introduced the idea of putting baby down sleepy, but not asleep in the 2month packet. If your baby took to this easily, you may not have much of a sleep regression. But many babies are still needing to be nursed, rocked or cuddled until they fall asleep. When they fall asleep in this environment and wake up in their crib or bassinet they often need help (ie nursing, rocking, cuddling) to get back to sleep. Continue to work on putting baby down sleepy, but not asleep, especially at night. If baby does fall asleep



## Complete Care Pediatrics

while nursing, give baby a gentle rock or pat to get those eyelids to flutter so baby knows where they are when they fall asleep. You may need to pat or gently rock baby when they are in their crib or bassinet to get them to sleep, but at least they are in the same space when they fall asleep as they will be when they wake up.

It is also very helpful to pay attention to wake windows. This is the time your baby is up between naps or sleep cycles. Overtired babies are notoriously difficult to get to sleep. Now with all things baby, wake windows change as baby changes so watch for cues. Does your baby yawn, rub eyes or whine when they are getting sleepy. Some babies' skin around their eyebrows get a little red when it's nap time. Watch your baby for cues and keep track of how they sleep when you respond to cues timely. Some great resources for information on sleep and wake windows are [huckleberrycare.com](http://huckleberrycare.com) and [takingcarababies.com](http://takingcarababies.com)

### **Solid foods**

It may seem a little crazy, but we're talking about solid food introduction already. Not because your baby is ready to start them right now, but because like all things baby, it's a process. Solid food introduction is not based on age but development. This is particularly important if your baby was premature or is slower in the motor skills area. Baby is ready to explore solid foods when they are sitting upright without (much) support. This means, with little or no assistance, baby can remain upright for 20-30 seconds before the weight of their head pulls them over. They need core strength for this, and that comes with practice. Start by playing with baby sitting between your legs and supported by your thighs and trunk. Give them a soft place to land, but challenge them and build their strength. Use a boppy or pillows to help prop them up and get the feel of being upright. All this builds a strong core and stamina. It's really hard to feed a baby who can't maintain an upright position in a high chair!

Babies also need to have interest in what's happening at meal times. They should be following food from your plate to your mouth. They often open and close their mouths as those around them eating are doing. You know they are ready to be introduced to solids when they are yelling at you for eating in front of them and are grabbing food from your plate and trying to shove it in their face!

Now, how to begin? There are a lot of opinions on what is the best way to introduce solids. Like most things baby, it really depends on the babe. Baby led weaning is a very popular method that introduces true solid foods to baby in pieces baby is able to grasp in their hand. The baby is in charge of getting the food to their mouth. While this is the fastest way to get babies onto true table food (what you and I call "food") it isn't always best.

Some babies have a very sensitive gag reflex and baby led weaning can become an exercise in frustration for baby. Imagine if every time you tried to eat you gagged and vomited. Not a fun way to start your relationship with food. For babies with a sensitive



## Complete Care Pediatrics

gag reflex, I recommend trying baby led weaning - focusing on soft and slippery. Think bananas, avocado, baked sweet potato, mango. Something soft and slippery will not hurt if baby gags and may actually slip right on down when baby is exploring the food in their mouth. If despite these soft and slippery foods, baby still gags, try purees. Mash that avocado, banana, or baked sweet potato up. If this texture is still too much, mix the food with breastmilk or formula to reach a consistency baby can tolerate. Continue to try foods with greater texture, but after one or two gags, transition to solids. If baby is still gagging regularly with solids after 8 months of age, talk with your provider. Solids start with plain single ingredient foods to allow baby to adjust to taste, texture and make sure they digest it well. Introduce a new single ingredient food every 2-3 days. We introduce solids slowly because if baby has vomiting, rash, diarrhea or constipation with a food we really like to be able to pinpoint exactly what caused it and talk about how to approach this together. Inevitably, solid foods are going to change the consistency and smell of baby's stools. It is important to introduce water with solid foods. It can help in the breakdown of foods, digestion and lead to less constipation. Now, that being said, they don't need nearly as much as we do. Babies can have as many ounces per day as they are months old. We use this recommendation until about 12 months of age. You can try to offer water in a small open cup that they can hold or a sippy cup. They will spend a majority of their time with water spitting it out, but it's all about the learning curve. Again, we introduce food and water when they are developmental ready because it helps them develop the skill to get nutrition and energy in a way they will need in the future. If your baby has zero interest in solids at age 6 months, that's okay. If your baby is stealing food off your plate at 5 months, that's okay too. Meet your baby where they are at and the experience will be much more enjoyable for everyone.

- Baby will start to **Development from 4-6 months** recognize other babies and enjoy mirror play.
- You may start to hear some sounds strung together, vowel and consonant combos like, "ba", "ga", "da".
- May start to know their name and respond
- Baby will start to pass objects from one hand to the other and tries to get things that are out of reach
- Rolls tummy to back and back to tummy and sits with support.