

Well Child Checks.....how many shots today?

Well child checks are very important! They allow your doctor to keep a close eye on your child's growth and development and make sure immunizations are up to date. There are several immunizations your child will receive the first few years of life so in the beginning it is very easy to get behind if appointments are not kept. Please be sure and reschedule as soon as possible if you miss one. Here is a quick run down of the basics of all your well child checks...

2 weeks.....Appointment with your physician. We will check weight and measurements, there will be no shots at this appointment! (Your child should have received their first Hepatitis B shot before you left the hospital.) Your child will return to the hospital for his 2nd newborn screen (PKU) after this visit.

2 months.....Appointment with your physician. Check weight, measurements and shots. Your child will receive a Pediarix(which includes DTaP, Hepatitis B, and Polio) Hib, Prevnar and Rotateq—this immunization only is by mouth.

4 months.....Appointment with the nurse practitioner, check weight and measurements and repeat same shots and oral Rotateq.

6 months.....Appointment with your physician, check weight and measurements and repeat same shots and oral Rotateq.

9 months.....Appointment with either NP or physician. Check weight and measurements.

12 months....Appointment with your physician. Check weight, measurements, and receive Varicella, MMR (measles, mumps and rubella) Prevnar and Hepatitis A.

15 months.....Appointment with your physician. Check weight and measurements and receive DTaP and Hib.

18 months.....Appointment with NP. Check weight and measurements and receive Hepatitis A.

2 year.....Appointment with your physician. Check weight and measurements. Receive no shots if this schedule has been followed (may vary according to physician) and is current on all immunizations.

3 year.....Appointment with NP. Check weight, measurements and blood pressure. Receive no shots if current on all immunizations.

4 year.....Appointment with your physician. Check weight, measurements and blood pressure. Receive last round of shots! DTaP, MMR, Varicella and Polio. They will not need any more shots until age 11. (unless there is an injury, in which case please call your physician to verify the last dose of tetanus vaccine.) After 6 months of age your child may receive the Influenza vaccine. Please call the office in October to see when we will be getting these in. At 9 years of age females may start the Gardasil series. You may discuss this with the physician or nurse practitioner at that time.

After your 4 year well child check appointments are every other year and are with the NP. At the end of all these immunizations your child will have received 5 DTaP's, 4 Hib's, 4 Prevnars, 4 Polio, 3 Hepatitis B's, 3 Rotateq's, 2 Hepatitis A's, 2 MMR's and

2 Varicella's. Please bring your shot record with you to your visits to up-date it. You may get a copy at anytime. If you need a copy at one of your visits, please ask the nurse. If you call for a copy give us 24-48 hours to pull the chart and make a copy. Remember you can give your child a dose of Tylenol before your appointment!

Poop.....what's normal?

Every baby's poop is going to be different! If your baby is breastfed he will usually poop with every feeding and it will be a thin, yellow, seedy consistency. If your baby is bottle fed it will be a little less often and be a thicker consistency. Some babies may not poop everyday. As long as when they do go and it is soft, it's nothing to be too concerned about. If your baby has not gone in 2-3 days AND appears uncomfortable there are a few things we can do to try to facilitate a bowel movement. The first is to simply take their temperature rectally. Sometimes this alone will stimulate them to go to the bathroom. Another simple thing is to put their bottom in some luke warm water....make sure it's not too hot or too cold! They may poop in the water with this method. If you continue to have problems after trying this please call us!

Congestion.....when is it a problem?

Most newborns will have a little stuffy nose after birth. Remember to keep that bulb suction they give you at the hospital...keep it with you at all times! If your baby has a little stuffy nose you can use your bulb suction to keep their nose clear. If you have a difficult time getting anything out of their nose go get some nasal saline from the grocery store or pharmacy. Put a couple of drops in each nostril and then suck it back out. If it's very thick you can put a couple of drops in and let it sit for about 30 minutes, after 30 minutes put 2 more drops in each nostril and suck it all out. This allows the saline a chance to run through the nostril into the sinuses and loosen up some of that gunk so you can suck it out. A cool mist humidifier is always a good idea to help with congestion....make sure your baby is clothed appropriately because the room will get a little cool if it's a small room. Things to watch for include fast breathing, difficulty breathing, nasal flaring, or retractions. If any of these are happening please call for an appointment so we can take a look at the baby.

Fever.....how do I check it?

ALWAYS check your baby's temperature rectally (under 12m of age) if you think they have a fever. If your baby is 3 months or less and has a rectal temperature of 100.4 or greater he needs to be seen. If it is after office hours please call the on-call nurse or physician and let them know, you most likely will be instructed to go to the ER. After 3 months of age it is still a good idea to take temperatures rectally to get the most accurate

temp. A fever can be scary, but it is good to know that it is not always a bad thing. A fever simply means that your body is working properly to fight an infection. If your child is sick and has a fever you may call and get an appointment or call and speak to the nurse about it. After 6 months of age you may try Motrin every 6-8 hours. If you have difficulty breaking the fever you may alternate Tylenol with Motrin every 3-4 hours as needed you may also do a luke-warm bath and then put the child in less clothing afterwards.

Matted eyes.....are they infected?

Most newborns will have some eye drainage. Usually this is related to having small tear ducts or clogged tear ducts. If your child has some eye drainage start with a warm wash rag to the eye 3 -4 times a day and massage the tear duct with your finger. If the drainage is getting worse or becomes thick green or yellow call the office. If you child has red matted eyes with yellow or green drainage call the office for eye drops.

Circumcision.....is this normal?

Our doctors use a Plastibell for circumcisions. It consists of a clear plastic ring and a string. Because this string is present you may at times see a yellow stringy discharge...this is normal. Do not put any vasoline on your child's penis or give him a bath until the bell falls off. If the bell starts to fall off or you see the string coming loose, do not pull or tug at it. Let it fall off on its own! It should fall off with in 7-14 days. If it has not fallen off by your 2 week well child check the physician will either cut it off or tell you how much longer to wait. Please call the office for an appointment if there is severe bleeding (some spotting is o.k.), excessive swelling of the penis, or the bell has not fallen off in the appropriate time frame.

Sunscreen.....when can I use it?

The American Academy of Pediatrics recommends to not use sunscreen until 6 months of age. If it is absolutely necessary you can use it at 4 months of age, but remember to use it sparingly and wash it off as soon as you get inside. Make sure your child is appropriately clothed and has plenty of shade. You may use bug repellent at 2 months of age apply sparingly with your hands and bathe your child afterward.

Rashes.....what do I do?

Rashes are difficult! For the most part rashes are not dangerous and are usually viral in nature. If your child develops a rash just call us and describe it to us to the best of your ability. Make sure you are with your child so we can get the most information possible!

Diarrhea and Vomiting.....what helps?

First lets cover newborn spit-up versus vomiting. If your baby has projectile, like across the room vomiting, you need to call the office. Some baby's are spitters and are perfectly fine, but if you're concerned just call us. If your child is vomiting you may start our vomiting protocol. If your child develops diarrhea you need to do the BRAT diet (bananas, rice, applesauce, toast...anything bland and dry) and do clear liquids. If your child is on whole milk try soy, if your baby is on formula do pedialyte alternating with ½ strength formula. That is 1 scoop to 4 ounces instead of 2 scoops to 4 ounces. If you are breastfeeding continue to do so, you may supplement with pedialyte if needed. Typically we do not recommend giving immodium. Most diarrhea is caused by a virus and needs to run its course. If your child is on antibiotics and develops diarrhea you can either give yogurt or get acidophilus at the store and sprinkle it in cereal or food. If your child has bloody diarrhea stools, please call and bring in a stool sample. (Please note if your child is on Omnicef, the antibiotic, your child may have stool that is stained red. This is from the dye in the medicine and is not blood.)

Eating.....when do we start baby food?

We recommend you start rice cereal with a spoon at 4 months of age. Your newborn has a natural tongue-thrust reflex which they loose around 4 months of age. Don't give up if your first few attempts end up every where except their mouth! At 6 months of age you may start with vegetables light to dark. Remember to introduce a new food every 4-5 days so you can look for a reaction. After veggies you may move on to fruits. You may also introduce a sippie cup around 4-6 months. Never put juice in a

bottle. Your physician will discuss this all in great detail at the appropriate well child check.

Ingestion.....who should I call?

If your child ingests anything or if you think your child has ingested anything please call poison control FIRST! The number is **1-800-222-1222**. If you call us it may take up to an hour to call you back depending on how busy we are, so please call poison control and get an answer immediately.

Jaundice.....when is it ok?

Jaundice is very common in newborns and can cause yellow skin and eyes. It is more so pronounced usually in breastfeed babies and will last longer in breastfeed babies. Your doctor will possibly check a billirubin level while the baby is still in the hospital, and on occasion will order home phototherapy to help break down the billirubin. IF your baby is yellow and is not waking to eat or having good urine or stool output call us immediately. If you baby is yellow and is eating well, having good urine output and good stool then the baby is fine. If at any point the baby stops doing any of these things call the office.

Head Lice.....how do I treat it?

Head lice usually can be treated with over the counter medication. Make sure you clean all the linens and any stuffed animals etc when you treat your child. Throw away brushes and make sure they aren't shared. After you treat your child initially you may find nits in the hair. These are not alive and will not be moving but are sticky and difficult to remove from the hair. You may use Olive Oil to the hair and wrap with a towel for several hours to help comb out the nits. (this also will help kill any that may be left alive). If you continue to have a problem call the office for prescription medication.

Ring worm.....when will it go away?

Ring worm takes a while to go away. Treat the area with over the counter antifungal (like Lotrimin or Tinactin) for several weeks. Apply the antifungal cream twice a day to the area extending the cream one inch beyond the border of the ring worm and continue to treat for a full week after you think it is gone. If there are ring worm on the scalp you child needs to be seen so oral medication can be prescribed. Ring worm is contagious and requires direct skin-to-skin contact. After 48 hours on treatment your

child is no longer contagious. If the rash is not cleared within 4 weeks please call the office for an appointment.

When should I call for an appointment?

- ~Any respiratory distress, as already discussed
- ~Fever of 100.4 in a newborn 3 months old or younger
- ~No wet diaper in 8-12 hours
- ~Earache
- ~You want your child seen

What is an Emergency?

- ~Allergic reaction resulting in respiratory distress
 - ~Any broken bones or suspected broken bones
 - ~Stitches
 - ~Trauma
 - ~Seizure
 - ~Severe respiratory distress
- ALL of these need to go to the ER or call 911.

Refills

If you need a refill, please call your pharmacy first and they will call us or fax the request to us. We are very prompt and usually get the fax back the same day. Call and check with your pharmacy before you go to pick it up. If your prescription is expired or has no refills left just ask them to fax the request to us...if you ask they will do it!

Please feel free to call with your questions to the nurse. If you know you want your child seen just call for an appointment, we would rather see you and nothing be wrong than to not see you and something be missed. We look forward to being your healthcare providers!