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## **Newborn Care in the Hospital**

After your baby is born, a doctor or nurse will perform a series of tests to determine your baby's physical condition. A routine evaluation, called the Apgar test, is used to identify whether your baby needs urgent medical care. After delivery, your baby will also be given a vitamin K shot, eye drops, and newborn screening tests. Your baby may also receive a hearing test and a hepatitis B vaccine.

### **What happens during an Apgar score?**

During an Apgar score, your baby's heart rate, breathing, reflex response, muscle tone, and skin coloration are measured. These five signs are evaluated at one minute after birth and at five minutes after birth. Each test is given a score between zero and two, and the five scores are added together to make up the Apgar score.

### **What does the Apgar score mean?**

If your baby has an Apgar score of seven or more, he or she is probably in good physical condition. A baby rarely scores a perfect 10, because his or her skin color may be slightly blue until he or she warms up. A low Apgar score may indicate problems with your baby's heart or lungs. It may also be the result of a difficult labor. Your baby may be in good physical condition, but have a low score immediately after birth. Premature babies may score low because of immature development in the womb. Keep in mind that your baby's Apgar score does not predict his or her future health.

### **Why does my baby need a vitamin K shot?**

Your baby will typically have low levels of vitamin K when he or she is born. Vitamin K is needed for blood clotting, so your baby will usually receive a vitamin K shot immediately after birth. This will help prevent a rare but serious bleeding problem known as hemorrhagic disease of the newborn.

### **Why does my baby need eye drops?**

Your baby will receive antibiotic eye ointment or eye drops to prevent bacterial infections that he or she may pick up at birth.

### **What are newborn screening tests?**

All newborns are screened for certain conditions. With early detection, these conditions can be prevented or treated. Your baby's heel will be pricked and a sample of blood taken to test for many different conditions.

See the handout, “Why Must My Baby be Screened?” by the Ohio Newborn Screening Program at <https://www.odh.ohio.gov/odhprograms/phl/newbrn/nbresrc.aspx>

### **Why does a newborn need a hearing test?**

Hearing screen of all newborns is the gold standard of care across the United States. Early treatment of hearing loss can prevent future speech and language problems. A small earphone or microphone will be placed in your baby's ears to see how your baby's brain responds to sounds. Your baby needs to be asleep for this test to be accurate. If your baby does not pass, it does not mean he or she has hearing loss, but the test will be repeated.

### **What is newborn screening for Critical Congenital Heart Disease (CCHD)?**

Critical Congenital Heart Disease (CCHD) is a group of heart or vascular problems present at birth. Approximately 11 out of 10,000 babies are born with CCHD. CCHD may be life threatening and may require intervention in infancy. It is not always detected prenatally or upon exam in the nursery. To improve the early detection of

CCHD, it is recommended the screening be added to the newborn screening before discharge to home. A pulse oximeter designed for newborns is used to screen for CCHD. A sensor is wrapped around the hand and another sensor is placed on either foot. Pulse oximetry newborn screening can identify some infants with CCHD before they show signs of the condition.

### **Why does a newborn need a hepatitis B vaccine?**

The hepatitis B vaccine protects against the hepatitis B virus, which causes liver damage. The hepatitis B vaccine is a series of three shots. Your baby will usually receive the first shot after delivery, and the next two shots by 18 months of age.

### **Why is it important to lay my baby on his or her back to sleep?**

Prevention of sudden infant death syndrome (SIDS) begins in the newborn nursery. Placing infants on their backs to sleep has reduced the rate of SIDS almost 50% in the last 12 years.

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## Newborn Appearance

Talk with your health care provider about some of the things you should expect about the appearance of your new baby. This list might help set your mind at ease, especially after the birth of your first child.

### You can expect:

- The umbilical cord stump to remain for the first 10 to 14 days, but it might not fall off until the third week.
- Baby's skin to appear dry and peeling.
- Fine hair on baby's body. Some fine hair might cover certain parts of baby's body, such as the shoulders, back, temples, or ears. This hair protects your baby in the uterus and is usually shed within the first week after baby's birth.
- Your baby's breasts to be swollen for two to four weeks. This happens in boys and girls and is caused by estrogen in the mother's placenta.
- Your baby's head to be swollen, either on top or as a smaller lump in different places on the skull. This is caused either from fluid forced into the scalp at birth or from the baby rubbing up against the mother's pelvic bones. Swelling at the top of the head should go down within a few days, while swelling from friction will go down within two to three months. Call your doctor if swelling increases or lasts longer than normal.
- Your baby's legs to be bowed or feet turned up. This is caused by being held tightly in the womb. Your baby's legs will straighten out within six to 12 months.
- Swollen genitals in both boys and girls. Boys might have swollen scrotums, lasting six to 12 months, or the hymen in girls might be swollen, disappearing within two to four weeks.
- An undescended testicle. A small percentage of boys might have an undescended testicle. They will more than likely need surgery later to correct this.

## Notes

- A shiny and red penis. If your son was circumcised (the foreskin on the penis was removed), the glans of his penis will appear shiny, and red, and might ooze some yellowish fluid. The glans should heal within seven to 10 days.
- Vaginal discharge. Baby girls might have a vaginal discharge that is clear, white, or pink and lasting for three to 10 days. This is normal and is caused by the estrogen passed to the baby from your womb.
- Eye appearance. Sometimes a blood vessel in the white of the eye will break during birth. This is not uncommon and should heal within two to three weeks. A baby's tear duct can become blocked, making the eye continuously water. This will usually clear up within the first year of life, but be sure to ask your child's doctor at the next visit, or call the doctor immediately if the eye looks infected or has pus or a yellow drainage.

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## Newborn Behavior

Many new parents might not know what is considered "normal" newborn behavior. Babies develop at different rates, but they still display many of the same behaviors. Don't be alarmed if your baby seems a little behind. It is important to know what kind of behaviors to expect from your newborn so that you can tell if there is a problem.

If your baby was born prematurely, don't compare his or her development to that of full-term newborns. Premature babies are often developmentally behind full-term babies. If your baby was born two months early, then he or she might be two months behind a full-term baby. Your doctor will follow the developmental progress of your premature baby. Contact your doctor if you think your baby is developing at an unusually delayed rate.

### Sleeping

Newborn babies usually sleep 20 minutes to four hours at a time, up to 20 hours a day. Their stomachs are too small to keep them full for long, so they need to be fed every few hours. Babies have different sleeping habits, but at three months most babies sleep six to eight hours a night.

### Crying

Newborns might cry for several hours a day. It is their way of telling you they need something or that something is wrong. Newborns cry when they:

- Are hungry
- Are tired
- Are too cold or too hot
- Need their diaper changed
- Need to be comforted
- Have gas
- Are over-stimulated
- Are sick



It is also common for newborns to hiccup, sneeze, yawn, spit up, burp, and gurgle. Sometimes newborns cry for no reason at all. If this happens, try comforting your baby by rocking, singing, talking softly, or wrapping him or her in a blanket. Soon you will be able to tell what your baby needs by how he or she cries.

You might not always be able to comfort your newborn. This is not your fault. Try to be patient and remain calm when your newborn does not stop crying. If necessary, have someone else stay with your baby while you take a break. Never shake your baby under any circumstance. Shaking your baby can cause serious brain damage, known as Shaken Baby Syndrome, resulting in lifelong disabilities.

Contact your doctor if your newborn cries more than usual, cries at a different time of day than usual, or if the crying sounds different than usual. These might be signs that your newborn is sick.

## Reflexes

During their first few weeks, newborns maintain the position they had in the womb (fetal position): clenched fists; bent elbows, hips, and knees; arms and legs close to the front of the body. This will change when your baby develops more control over his or her movements.

Newborns have several natural reflexes. Understanding these reflexes will help you understand the cause of some of your newborn's behaviors.

Newborn reflexes include the following:

- **The rooting reflex** —The newborn turns in the direction of food and is ready to suck. Stroking a newborn's cheek will cause this response.
- **The sucking reflex** —If you place an object in a baby's mouth, the baby naturally begins to suck.
- **The startle response** —The baby throws out his or her arms and legs and then curls them in when startled. This response often includes crying.
- **The tonic neck reflex** —The baby turns his or her head to one side and holds out the arm on the same side.
- **The grasp reflex** —The baby's fingers close tightly around an object placed in his or her palm.
- **The stepping reflex** —The baby's feet imitate a stepping action when he or she is held upright with the feet touching a hard surface. A baby's arms, legs, and chin might tremble, especially when crying. This occurs because newborns' nervous systems are not fully developed.







## Your Baby: When to Call the Doctor

During your baby's first year, you will make many trips to the pediatrician's office. Most of these visits are routine, but there may be times when your baby needs immediate medical attention. Questions about minor problems such as a small cough, occasional diarrhea, and fussiness can usually wait until normal office hours. However, if your baby is acting unusually, do not hesitate to call your doctor immediately. Trust your instincts, because they are usually right.

It is very important to get medical advice from your doctor because something as simple as diarrhea may turn into a dangerous condition. Before your baby is born, be sure to find out your doctor's office hours, on-call hours, and how to deal with an after hours emergency. This will make it easier to deal with any problems that may come up.



Before calling your doctor, make sure to have a pen and paper to write down any instructions he or she might give. When you call, have the following information on hand:

- Your baby's immunization records
- The names and doses of any medications, prescriptions, and over-the-counter products your baby takes
- Any medical problems your baby may have
- His or her temperature

### Call your doctor immediately if your baby:

- Is limp
- Has blood in his or her vomit or stool
- Has difficulty breathing

- Has a seizure
- Has any type of poisoning
- Has bleeding that you cannot stop
- Is not able to move
- Has a rectal temperature of 100.4 degrees Fahrenheit or higher
- Has yellow skin or eyes
- Sleeps more than usual or will not wake up
- Has signs of dehydration (decreased number of wet diapers – should have six to eight per day, does not shed tears when crying, has sunken eyes, or the soft spot on the top of his or her head has sunken)
- Has ear drainage
- Will not stop crying

If you are extremely concerned about your baby, call your doctor or 911 and/or take your baby to the emergency room.

### **When should I call the doctor?**

Call your doctor's office if your baby:

- Refuses to feed for multiple feedings in a row
- Has diarrhea and vomits more than usual
- Has a cold that does not improve, or that gets worse
- Has a rash

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# Umbilical Cord Appearance and Care

## What is the umbilical cord?

The umbilical cord is the baby's lifeline to the mother during pregnancy. The cord transports nutrients to the baby and also carries away the baby's waste products. It is made up of two arteries and one vein.

## What does the umbilical cord look like?

The umbilical cord is a flexible, tube-like structure that has a spongy appearance. The cord is surrounded in a jelly-like substance. After birth, the cord is clamped and then cut, leaving a stump behind. In about a week, the stump withers and falls off. The stump changes in color from yellowish-green to brown to black before falling off.

## How do I take care of my newborn's umbilical cord?

It is important to keep the cord clean in order to prevent infection. Bathing the cord in water does not increase the rate of infection or make the stump take longer to fall off. Allow the cord to dry naturally. There is no need to apply topical substances such as alcohol.

## Some additional tips

When diapering the baby, make sure to fold the edge of the diaper down so that the cord can dry. Some newborn diapers have a special cut-out cord area.

Allow the stump to fall off on its own. Never try to pull off the stump, even if it seems to be dangling or hanging. Pulling off the stump may result in unnecessary bleeding and harm to your baby.

Watch for signs of infection, which may include redness and inflammation. In some cases, there may be colored discharge or bleeding. Call your baby's doctor right away if you suspect an infection.

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# Circumcision

## **What is circumcision?**

Circumcision is the surgical removal of the foreskin, the sheath of tissue covering the head of the penis. It is an ancient practice that has its origin in religious rites. Today, many parents have their sons circumcised for religious or other reasons.

## **How is circumcision done?**

During a circumcision, the foreskin is freed from the head of the penis (glans), and the excess foreskin is clipped off. If performed on a newborn, the procedure takes about five to 10 minutes. Adult circumcision takes about one hour. The circumcision generally heals in five to seven days.

## **When is circumcision done?**

If circumcision is chosen to be done in the hospital, it is usually is performed on the first or second day after birth.

## **Is circumcision necessary?**

The use of circumcision for medical or health reasons is an issue that continues to be debated. The American Academy of Pediatrics (AAP) believes that circumcision has potential medical benefits and advantages, as well as risks. The procedure is not essential to a child's current well-being. APP recommends that the decision to circumcise is one best made by parents in consultation with their pediatrician, taking into account what is in the best interests of the child, including medical, religious, cultural, and ethnic traditions. Parents should talk with their doctors about the benefits and risks of the procedure before making a decision regarding circumcision of their sons.

## **What are the benefits of circumcision?**

There is some evidence that circumcision has medical benefits, including:

- A slightly decreased risk of urinary tract infections
- A slightly reduced risk of sexually transmitted diseases (STDs) in men
- Possible protection against penile cancer and a reduced risk of cervical cancer in female sex partners
- Prevention of balanoposthitis (inflammation of the glans and foreskin)

- Prevention of phimosis (the inability to retract the foreskin) and paraphimosis (the inability to return the retracted foreskin to its original location)

- Circumcision also makes it easier to keep the end of the penis clean

**What are the risks of circumcision?**

- Bleeding
- Infection
- Injury to head of penis

Note: Some studies show that good hygiene can help prevent certain problems with the penis, including infections and swelling, even if the penis is not circumcised.

In addition, practicing safe sex is an important factor in reducing the risk of STDs and other infections.



# Childhood Immunizations

## What is immunization?

Immunization is a way to protect your child from getting a number of illnesses. Many of these illnesses are easily spread from child to child and can cause serious health problems. They can even cause death.

During their first two years of life, children should be given vaccines (medicines) to protect them from:

Diphtheria	Pneumococcal disease
Haemophilus influenzae type B (Hib disease)	Polio
Hepatitis A	Rotavirus
Hepatitis B	Rubella (German measles)
Influenza (flu)	Rubeola (measles)
Mumps	Tetanus (lockjaw)
Pertussis (whooping cough)	Varicella (Chickenpox)

These vaccines are very safe and have saved thousands of children from getting sick. For more information and a parent's guide to Childhood Immunization, visit the Centers for Disease Control and Prevention (CDC), at [www.cdc.gov/vaccines/pubs/parents-guide/downloads/parents-guide-part1.pdf](http://www.cdc.gov/vaccines/pubs/parents-guide/downloads/parents-guide-part1.pdf).

## When should my child get immunized?

Children should get immunized during their first two years of life. Your child must get several doses of the vaccines to be fully protected. For example, health care providers recommend that children receive their first dose of MMR (measles, mumps, rubella) vaccination at 12 months of age or older and a second dose prior to elementary school entry (around four to six years of age). Children can get the vaccines at regularly scheduled well visits.

## How are the vaccines given?

Most vaccines are given as shots.

## Are the vaccines safe?

Yes. Vaccines for childhood diseases are very safe. Sometimes, a vaccine will cause mild side effects such as a sore arm or leg, or low fever.

A bad side effect is not likely to happen. Childhood diseases are a greater health risk to children than the vaccines. Ask your health care provider to tell you about risks and side effects.

### **When should a child not be vaccinated?**

In a few cases, it's better to wait to get a vaccine. Some children who are very sick should not get a vaccine at all. Reasons that you should wait or not get a vaccine might include:

- Being sick with something more-serious than a cold
- Having a bad reaction after the first dose of a vaccine
- Having a convulsion (sudden jerky body movements) that is thought to be caused by a vaccine

### **If my child is over two years old, can my child still be vaccinated?**

Yes. Vaccines can be given to older children and adults. Children are vaccinated early in life so they have less chance of getting sick. The types of vaccines might be different for older children. Talk to your health care provider about how you and your child can be vaccinated.

### **Should I get vaccinated if I plan to get pregnant?**

If you don't know if you have ever had German measles or if you were not vaccinated for German measles, talk to your health care provider about getting the vaccine. If a pregnant woman gets German measles (rubella), her baby can be born with birth defects. You should not get the vaccine if you plan to get pregnant within the next month.

### **Why should I bother with vaccines?**

Thanks to vaccines, childhood diseases are less common. But these diseases can still be caught, and they can be deadly. Children still suffer from choking, brain damage, paralysis (being unable to move parts the body), heart problems, blindness, and other health problems because of childhood diseases.

In most states, children must be immunized from childhood diseases before they can enter school. It is very important to keep a record of your child's immunizations. This record is an important part of his or her health history.

### **Where can I get more information?**

National Immunization Program  
Centers for Disease Control and Prevention  
1.800.CDC.INFO 1.800.232.4636 or go to:  
[www.cdc.gov/vaccines/pubs/parents-guide/downloads/parents-guide-part1.pdf](http://www.cdc.gov/vaccines/pubs/parents-guide/downloads/parents-guide-part1.pdf).

Or, call your local public health department.

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## Car Seat Safety

Soon you will be taking your baby home from the hospital. The best way to ensure that your baby arrives home safely is to use a safe and properly installed car seat. Every state has laws that require infants to ride in car safety seats. For the best possible protection, keep your infant in a rear-facing child safety seat in a back seat for as long as possible, rear-facing occupants are safest. Frequently check with the National Highway Traffic Safety Administration for the most up to date car seat laws and information, at [www.nhtsa.gov/Safety/CPS](http://www.nhtsa.gov/Safety/CPS).

### **What you need to know about car seat safety - general points:**

- Read the car seat instruction manual carefully.
- Practice putting the car seat in and out of the car before bringing it to the hospital.
- Always use a car seat. Never hold your baby on your lap.
- A rear-facing car seat must not be placed in the front passenger seat of any vehicle equipped with a passenger side air bag. If your vehicle has side impact air bags, make sure the car seat is secured in the middle seat. The middle back seat is the safest location.
- Never leave your baby unattended in the car. Cars can heat up fast in the sun, and a baby can overheat quickly.
- Never buy a used car seat if you do not know the full history. Never use a car seat that has been in a crash.
- All car seats have an expiration date. Generally, it is six years, but you should contact the manufacturer of the seat to find out what the expiration date is for your specific seat.
- Do not use any products in the car seat that did not come from the manufacturer. Car seat fabrics meet strict fire safety codes. Add-on toys can injure your child in a crash.
- Make sure the car seat is buckled securely in the car. If you can move the car seat more than an inch side to side or toward the front of the car, it is not tight enough.

- If you need help installing your car seat, contact a certified Child Passenger Safety Technician at 1.866.SEAT-CHECK (1.866.732.8243).
- For the most up-to-date car seat laws and information please visit : <http://www.nhtsa.gov/Safety/CPS>
- For LATCH information visit: <http://www.nhtsa.gov/Safety/LATCH>

**Car seat safety for premature infants**

If your child was born prematurely, you may need to take special precautions to ensure safe transportation. It is hard for some premature babies to breathe when they are sitting up. For this reason, babies born prematurely will be given a "car seat test" before they are discharged. The nurse will monitor your baby in his or her car seat for a minimum of 90 minutes. The doctor will evaluate the data from the test and let you know if it is safe for your baby to travel in a car seat. In some instances, babies are unable to breathe properly in a regular car seat and need to travel in a car bed, which allows the baby to lie flat while still secured safely. If you have any questions, talk to your baby's nurse or doctor.