caring for yourself and your baby
. . . . a Guide
welcome

Congratulations on the birth of your new baby and welcome. We are glad that you have chosen NC Women’s Hospital. Our goal is to provide a positive experience for you and your family by supporting you in this transition in your life.

This booklet will provide you with helpful information for taking care of yourself and your new baby in the hospital and for the next two weeks after you and your baby are home. Using this booklet will help to answer many of your questions. Our caring staff is also prepared and happy to assist you with any questions you may have. Please read through the book. At the end, there is a quick reference guide that will provide guidance on when to get emergency care and when to call your health care provider.

We hope that you and your baby have a wonderful stay with us at our hospital and you leave ready to care for yourself and your new baby.

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Approved by: Women’s Hospital Patient Education Steering Committee
# Caring for Yourself

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When to Get Emergency Care

**MOTHER**
- Bright red vaginal bleeding that soaks more than one pad per hour
- Leg, groin or chest pain
- Shortness of breath

**BABY**
- Skin becomes dusky or blue
- Excessive sleepiness or difficult to wake up
- Chest sinks in during breathing or problems breathing

When to Call Your Health Care Provider

**MOTHER**
- Temperature of 100.4°F (38.0°C) or higher
- Chills or flu-like symptoms
- Foul smelling vaginal discharge
- Passage of large clots (size of your fist or larger)
- Redness, swelling, separation, or drainage from the incision
- Any increase in pain
- Any painful, tender, swollen or reddened areas noted on legs or breasts
- Postpartum blues lasting more than 3 days, or thoughts of hurting yourself or your baby
- Burning, painful or frequent urination

**BABY**
- Breathing faster than 60 times per minute for 3 minutes in a row
- Abnormal temperature
  - NOTE: A baby’s normal rectal temperature is 97.7°F to 100.4°F (36.5°C to 38.0°C)
- Vomiting or diarrhea
- Thrush (white patches resembling curds of milk on tongue, roof of mouth, lips or throat)
- Irritable, high pitched cry that can not be calmed
- Jaundice (yellowish discoloration of skin)
- Baby is not eating at least 6 times in 24 hours
- Less than 3 bowel movements in a 24 hour period in early weeks
- Less than 6 wet diapers in a 24 hour period after 4 days of age
- No wet diapers in 12 hours
- Bleeding circumcision
Caring for Yourself

Your body has gone through many amazing changes while you were pregnant. Now that you have had your baby, your body is going through even more changes. After giving birth you will need time to rebuild your strength. It may take time to find a balance of resting and caring for yourself and your new baby.

Here are some tips that may help you during this special time:

- Try to rest when your baby naps, at least once a day
- Eat when you are hungry
- Drink plenty of fluids - 8 glasses (2 quarts) of fluid, mostly water, a day
- Ask for help from family and friends
- Look for a support group with other mothers and new babies
- Be gentle with yourself; don’t expect too much
- Enjoy yourself and your new baby
- Go out and breathe some fresh air every day
- Find ways to include your other children in welcoming the new baby

Physical Changes

Cramping
Cramping is normal as your uterus begins to shrink.
You may feel more cramping if you’ve been pregnant before. You may feel extra cramping when you breastfeed. You can get relief from cramping by using a heating pad, emptying your bladder often and taking pain medication such as ibuprofen (Motrin®, Advil®) or acetaminophen (Tylenol®). The cramping should go away during the first week.

Vaginal Bleeding
Vaginal bleeding is also normal and usually lasts three to four weeks. It begins as bright red, gradually becomes pinkish, then brownish and finally white or clear. If your discharge returns to bright red or becomes heavier, you should slow down and rest. If you are soaking more than one pad per hour, call your health care provider.

Vaginal Birth

After the birth of your baby, the area around your vagina and anus can be very uncomfortable and swollen. It is normal to urinate frequently as your body gets rid of extra fluids in the first weeks after you have a baby.

Taking Care of the Vaginal Area
To help keep the vaginal area clean, you will be given a squirt bottle (peri bottle) to use.
Fill your peri bottle with warm water and spray your bottom from front to back each time you go to the bathroom until vaginal discharge is gone, usually about three to four weeks.
A sitz bath is a container filled with warm water that fits on the toilet. This may be recommended to you to help with the healing process. Your nurse can give you instructions on how to use a sitz bath.
Warm tub baths at home are another safe comfort measure. Only use ointments or sprays suggested by your healthcare provider.
If you give birth vaginally and have stitches, they will not need to be removed. They will usually disappear a few weeks after you go home.
Cesarean Birth

If your baby's birth was by cesarean, you have an incision that is closed with stitches and/or staples. Keep your incision clean and dry. Shower with your back to the water and gently pat dry the area if it becomes wet. If you have staples, they will be removed before you go home or you will be given an appointment to have them removed at the clinic. After the staples are removed, steri-strips will be put on. The steri-strips support your incision and will eventually become loose and peel off on their own. It is better not to pull them off within the first two weeks.

Look at your incision every day and call your health care provider for any swelling, redness, or discharge.

When riding in a car after a cesarean, sit with the seat belt on as usual. Do not drive for 2 weeks.

Normally your incision is painful for several days and you have been given pain medicine. Do not be afraid to use it.

Wear loose fitting clothing until you are healed. Tight clothing can press or rub against your incision and cause irritation. When you laugh or cough, you can press a pillow or folded towel across your incision so it will not hurt. As your incision heals it will itch. Itching is a normal sign of healing. Scratching could irritate and cause an infection. Applying a cool washcloth may help with the itching.

Personal Care

Hemorrhoids

Sometimes the blood vessels around your rectum swell during pregnancy and after birth. The swollen blood vessels are called hemorrhoids. They can be painful, especially when you have a bowel movement. Your first bowel movement may be delayed several days because of the physical stress of birth.

To decrease discomfort when you move your bowels:

- Drink at least 8 glasses of liquid each day.
- Eat plenty of fruits, bran cereal and vegetables.
- Stool softeners may be helpful.
- Soaking in a warm tub or using a sitz bath can make you feel more comfortable.
- Only use topical ointments or sprays recommended by pharmacists or health care providers.
- Call your health care provider if you have questions or concerns.

Prenatal Vitamins or Iron

You may have taken prenatal vitamins and iron during your pregnancy. Continue taking these until you have finished the ones you have and then switch to a multivitamin with folic acid for the rest of your life, unless your healthcare provider tells you otherwise.

Your Nutrition

There is no special diet for breastfeeding mothers; just include the same kinds of nutritious foods you ate when you were pregnant. The milk you make is always good for your baby. Drink when you are thirsty, and eat when you are hungry. If your urine is dark or you get constipated, drink more fluids, especially water.

Most babies are not affected by what their mothers eat, so do not avoid any foods unless your baby is fussy. Occasionally, some foods you eat may cause your baby to have gas. Think back 4 – 24 hours to see if you might have eaten something that may cause gas. Foods such as cabbage, broccoli, oranges, tomatoes, spices, and nuts bother some babies. Sometimes babies are bothered by vitamins their mothers take. Few babies are bothered by more than one or two foods, so eliminate the suspected food for 48 hours and then try it again before concluding that you must not eat it. Babies who are sensitive to foods their mothers eat usually outgrow the sensitivity by three months of age.

Alcohol, Caffeine, Nicotine and Medications

Alcohol, caffeine, nicotine from tobacco and all other drugs go into your milk in varying amounts. A small amount of alcohol is usually not a problem, but consult with your baby's care provider before you drink any alcohol. If your baby seems irritable toward evening, cut back on caffeine-containing drinks during the day. This includes coffee, tea, colas and some other sodas.

If you smoke and your baby develops colic, diarrhea or gas, try to decrease the number of cigarettes per day. The healthiest choice for you and your baby is to quit smoking. Nicotine may slow your milk let-down, so, if you do smoke, avoid smoking just before or during feedings.

Any medication that you could take while you were pregnant is safe while you are breastfeeding. Be sure that any doctor prescribing medicine for you knows that you are breastfeeding. Talk to a lactation consultant if you are worried about the medication.

Good Signs

You will know that your baby is breastfeeding well when:

- At least one breast is softer or lighter at the end of every feeding.
- You feel tugging, not pain, as your baby sucks.
- Your nipples are not sore after feedings.
- Your baby’s arms and hands are relaxed during the feeding.
- At the beginning of the feeding your baby sucks and swallows 10 or more times before pausing.
- As your breast softens, your baby slows down to 2-3 sucks and a pause.
- Your nipple is pulled out, but not pinched as it comes out of your baby’s mouth.
- Your baby is content at the end of the feeding.
- By the fourth day, your baby’s stools are changing from the dark, sticky meconium to watery, yellow stools with little curds.
- Your baby has at least three bowel movements and six wet diapers every 24 hours in the early weeks. Many babies have more.

If You Have Questions

Breastfeeding can and should be an enjoyable experience for you and your baby. But even the most experienced breastfeeding mothers have questions. Our staff of experts is available to help you while you are in the hospital and after you go home.

If you have questions about breastfeeding or need help working with your baby, call the Breastfeeding Warmline at 919-966-4148 or toll free at (866) 428-5608 and leave a message. If you need to be seen or talk to someone right away, a lactation consultant is in the hospital on pager 347-0880 every day from 8:30am to 4:30pm, or call the lactation consultant or breastfeeding educator at your baby's clinic or WIC office.
• **Mastitis**
  If one of your breasts suddenly becomes tender, hot, hard, or swollen and you feel as though you have the flu, you may have mastitis, a breast infection. Continue breastfeeding and contact your health care provider. You will probably need antibiotics. Breastfeed every 2-3 hours and put warm compresses on the swollen part of the breast just before feedings. The milk is not harmful to the baby since the infection is not in the milk. Keeping the milk moving out of the breast is the best way to heal the infection. Check with your health care provider about taking an anti-inflammatory such as ibuprofen to help with the fever, pain and swelling. Mastitis is a systemic infection so you need to rest as much as possible for a few days until you are feeling better.

**Expressing Milk**

Many women pump while they are at work or school every day. Expressing some milk will also help to soften your breasts if you are engorged or have mastitis.

• **Hand Expression**
  To hand express, put your thumb and forefinger in the shape of a C at the back of the areola (the dark area around the nipple). As you press straight back to the chest wall, bring your thumb and finger together. Continue this back and together motion, moving your hand around the breast to reach all of the milk glands. It may take a while to get the milk flowing the first few times you express.

• **Pumps**
  There are many different types of breast pumps available. Talk with a lactation consultant if you have questions. The pumps made by breast pump companies usually work best. The type of pump you need will depend on your reason for pumping.
  - The hand pump you are given in the hospital (or a small electric or battery operated pump) will work for occasional pumping once your milk supply is established.
  - The mid-sized electric pumps you purchase work well for pumping quickly and easily at work.
  - The hospital grade electric pumps you rent are best when your baby cannot breastfeed.

**Nutrition**

While you were pregnant you may have started eating a healthy diet. Do not stop now. You will need energy to take care of yourself and your baby. Try to drink 8 glasses of liquid a day, mostly water. Eat a balanced diet, including lean meats, dairy products, fruits, vegetables, and whole grain cereals and breads.

**WIC Program**

The Women, Infants and Children (WIC) program is a government program to help pregnant women, new mothers, infants and their children purchase healthy foods and learn how to make healthy food choices. It is open to open to pregnant women, new mothers, infants, and children under five who have a nutritional need and meet income requirements. WIC is funded by the United States Department of Agriculture. To find the closest WIC office, call 1-800-FOR-BABY (1-800-367-2229). To apply you need to be seen at your local WIC site.

**Activity**

Gradually return to your normal activities. You may go up and down the stairs if necessary, but try to limit this to a few times a day. Rest is also important to help you feel well and to keep a positive attitude about all the changes in your life. Concentrate on yourself and caring for your baby. Let friends and family help you with meals and housework. Try to rest when your baby is sleeping. Do not lift anything heavier than your baby, or do heavy pulling or pushing for 2 weeks.

Listen to your body. It will tell you when you are doing too much. Ask for help from others when you are tired.

**Exercise**

- Walking- start with short walks and gradually increase the distance as your strength increases.
- Kegel exercises- the muscles used to control urination are often weakened in pregnancy and during childbirth. Now that you have had your baby, it is important to strengthen these muscles by doing Kegel exercises. To do this exercise, you will tighten the muscles around your vagina. This is the same muscle action you would use to stop the flow of urine in mid-stream. Tighten these muscles for the count of 5 and then relax. Do this 10 times in a row at least twice a day. You can do Kegels while walking with the baby, talking on the phone, or any time you think about it. Slowly you will notice your muscles getting stronger.

**Sexual Adjustment after Childbirth**

How you feel about yourself and other changes after birth make a difference in when you start feeling sexual again. Hormone changes and caring for your baby all day may make you less interested in sex. You may be tired. Your bottom (or incision) may still be sore. It is normal that your body needs some time to adjust before you have sex. It is suggested you wait to have sexual intercourse until after your bleeding has stopped, which shows that the uterus has healed. You may need more time than this to feel fully ready for intercourse, especially if you had an episiotomy or a cesarean birth. The amount of time is different for every woman. Gently resume this aspect of your relationship.

Your vagina may feel dry at first. You can use a water-based lubricant such as KY Jelly® or Replens® to make intercourse more comfortable. Oil based lubricants such as Vaseline® are not recommended.

**Birth Control**

Remember that you can get pregnant right away, even before your first period if you do not use birth control. Birth control is not a reliable form of birth control. If you are breastfeeding, a barrier method of birth control (such as condoms, a diaphragm with a spermicidal gel or an IUD) works best. Birth control pills can usually be used after six weeks. If you notice that your milk supply decreases when you start taking them, you can change to a different method.
form of birth control and your supply will usually increase again. Depo Provera® also should not be used until the milk supply is well established, usually after 6 weeks. For some women Depo Provera® decreases milk supply whenever it is used and because it is an injection the effects of it cannot be reversed.

If you are not breastfeeding, you can use a barrier method of birth control, get a Depo Provera® injection right away, or start birth control pills 2-3 weeks post partum.

Your care provider will give you directions on how to use your chosen form of birth control.

### Mood Changes After Giving Birth

Many mothers notice they are more moody during pregnancy and after the birth of a baby. Pregnancy, labor and taking care of a new baby are all hard work. It is common to feel happy and excited one minute and then feel worried, sad or overwhelmed the next.

Almost 80% of all new mothers experience what is called the "baby blues" at some point during the first few weeks after their baby is born. Symptoms of the baby blues include feeling sad, and crying more easily and more often than usual. You may feel that you have no energy, even to eat or take care of your baby. You may have trouble sleeping. It may be hard to make decisions. You may feel very anxious or worried, especially about caring for your new baby. Usually these feelings go away after a few days, but if you continue to feel depressed or anxious, or if the feelings get worse, you may be suffering from postpartum mood disorder. This is an illness, just like heart disease. It changes the way you act and feel and can happen at anytime during the first year after the birth of your baby. It is important that you talk with someone about your feelings and symptoms. They won't just go away on their own, but they can be treated.

Some things that may help you to feel your best include:

- Try to get extra sleep by resting when your baby naps.
- Ask for help with household chores and baby care when you can.
- Talk to your husband or partner, family and friends about how you are feeling.
- Get dressed every day and leave the house, even if it's just to run an errand or take a walk.
- Spend some time with other people every day.
- Talk with other mothers about their experiences.
- Join a new mother support group.

### Engorgement

Engorgement is swelling and fullness of the breasts. This usually lasts about 24 hours. To relieve the fullness, feed your baby every 2-3 hours, even at night. Wake the baby, if necessary. It is important to keep the baby feeding until at least one breast softens at each feeding. You may need to pump out the extra milk to feel comfortable for a few days. If your breasts stay too full, you will stop making milk. Pumping will not make you stay engorged, but will help you establish a good milk supply. The milk you pump can be frozen to use later. Your milk supply will begin to match your baby's appetite in a few days.

To reduce the early swelling:

- Place fresh, washed cabbage leaves or cold compresses (frozen peas and corn work well), on your breasts for about 15 minutes before each feeding. Then remove them for at least 45 minutes. Otherwise, you may have more swelling from too much cold. Also, the cabbage leaves could start to dry up your milk.
- If the breast is too swollen for your baby to latch on easily, even after using the cabbage leaves or cold compresses, pump or hand express a little milk before trying to feed. Usually, getting out as little as a teaspoon of milk will soften the nipple area enough to get the baby started.

### Yeast Infections

You might have a yeast infection on your nipples if your nipples hurt during the whole feeding. With a yeast infection the nipples can be very painful even between feedings, but the skin does not look broken or raw. If you think you may have a yeast infection, call the Breastfeeding Warmline or your clinic for help. Nipple creams that contain lanolin can make a yeast infection worse. If you have a yeast infection, your baby may have developed one in his mouth (thrush). Your baby's health care provider will need to prescribe medication for the baby's mouth.

### Sore Nipples

Many women develop some nipple tenderness during the first few days of breastfeeding. If your nipples continue to hurt after the first few sucks, try repositioning your baby to latch on again.

After the feeding, rub a little expressed milk on the nipples. Putting hydrogels (Comfort Gels®) over your nipples when you are wearing a bra will feel good and help your nipples to heal quickly. If your nipples are not feeling better by the time your baby is about a week old, you may need additional help teaching your baby to latch on and suck correctly.

### Plugged Ducts

Sometimes a mother will have a small curd of milk blocking one milk duct. This will cause the milk to back up into the breast causing local pain and swelling and you may see a small pearl-like blister on your nipple. To heal it, soak the nipple in a cup of warm (not hot) water for a few minutes before each feeding. Then, massage the full area as the baby nurses. You may also find that taking a warm bath to soak the breasts will help.
There is no one thing that will increase your chances of having mood or anxiety problems but women who have had depression in the past, whose babies have health problems, or who do not have the support they need from friends or family have a higher risk of postpartum mood disorders. The rapid change in hormones after delivery may also contribute to these problems. Postpartum mood disorders can start with little warning. They can affect any woman, even if she has the support of family and friends, help at home, a healthy newborn, and no history of depression. Experiencing these symptoms and feelings can make a woman feel guilty and sad during a time when she expects to be happy. If this happens to you, remember that none of it is your fault and you can get help. Common symptoms of postpartum mood disorders:

- Feeling restless or irritable
- Feeling sad or depressed, and/or crying a lot or feeling worthless or guilty
- Strong feelings of anxiety, tension, and/or fear that may include fast breathing, fast heart rate, hot or cold flashes, chest pain, shaking, or dizziness
- Having little energy and having trouble getting things done, remembering things, or making decisions
- Having headaches
- Having problems sleeping, such as not being able to sleep, feeling very tired, or sleeping much more than usual
- Losing your appetite or wanting to eat all the time
- Not enjoying your usual activities
- Not having any interest in sex after several weeks
- Feeling like you don’t have enough interest in your baby or that you are worrying too much about your baby
- Checking on your baby over and over to see, for example, if the baby is still breathing

If you have any of these symptoms for more than a few days, you may have a postpartum mood disorder. Call a health care or mental health care provider or clinic to talk about your concerns. Women can experience any one of these or a combination of several. The symptoms usually start within three months after giving birth, but can happen at any time during the first year.

There is also a very rare condition known as postpartum psychosis. If you are fearful of hurting your baby or yourself, are hearing voices or don’t feel that you are in touch with the real world:

- call 911 to get immediate help
- call someone to come to be with you right away
- contact your care provider or clinic at once

If you have a postpartum mood disorder, there is no reason to hide it or to suffer alone. Support, counseling and/or medicines can help. Many of these medicines have been found safe to take during pregnancy and during breastfeeding.

Where to get help:

- UNC Women’s Mental Health Clinic for Perinatal Mood and Anxiety Disorders at (919) 966-5217; you can ask your health care provider to refer you or call to schedule an appointment yourself.
- North Carolina Family Health Resource Line at 1-800-367-2229; the resource line can help you find services in your community.
- Depression after Delivery National Hotline at 1-800-944-4773; this resource can help you find other local resources.

With each appetite spurt, your baby will want to feed very often for a couple of days. If you breastfeed whenever your baby is fussy, your milk supply will increase in about 48 hours. Then you will be making more at each feeding and your baby will go longer between feedings.

Pacifiers and Bottles

Until your baby is breastfeeding easily (3-4 weeks), it is best not to offer a pacifier or bottle. At first babies need to get milk every time they suck to associate hunger and feeding with feeling good after eating. Once your baby is feeding well and gaining weight, but becomes fussy in less than two hours, try offering a clean finger (nail side on the tongue) or a pacifier to suck. If your baby continues to fuss, it may be time to feed again. Just like grown-ups, babies do not always get hungry by the clock. After your baby has learned to breastfeed easily, and your milk supply is well established, bottles are not a problem if you wish to use them. The American Academy of Pediatrics states that after breastfeeding is easy (about 4 weeks), sleeping with a pacifier may decrease a baby’s risk of SIDS.

Breast Care

- Leaking

Some mothers never leak milk between feedings, but if you do, you can use breast pads to absorb the milk. Change the breast pads when they are wet to avoid nipple irritation. If you feel your milk starting to leak, you can press straight back on the nipple for a few seconds to stop it. Most women stop leaking after a few weeks of breastfeeding.

- Bathing

Wash your breasts with clear water when you bathe. The small bumps on your areola (Montgomery glands) release an oil which cleans and lubricates the skin. Most mothers find that this natural oil keeps their nipples soft and supple.
During the Feeding

Most newborns nurse with their eyes closed. At the beginning your baby should suck and swallow at least 10 times, pause, and then start sucking again. Talking to him, tickling the back or feet, or lifting your breast a little will usually start a new burst of sucking. If he loses interest in less than five minutes or before one breast is soft, try pushing the breast further back in his mouth, massaging the breast to increase milk flow or taking him off to play for a few minutes before latching on again.

Milk Supply

Each time your milk glands are emptied, they start making more milk. Your supply will meet your baby’s need as long as each breast is well emptied several times a day. You will feel thirsty and drowsy when your milk lets down each time your baby breastfeeds. During the first few days after birth, your uterus contracts as your milk lets down so you feel cramping or heavier bleeding. You may feel a tingling in your breasts or a warm rush toward your nipple during let down. After a few weeks of breastfeeding some women do not feel this, but they know their milk is letting down by the baby’s rapid sucking and swallowing.

By the time your baby is about a week old, you will be making 24 to 32 ounces of milk every 24 hours. Most babies, if offered a chance to feed every two to three hours and encouraged to feed until the breast is soft, will quickly learn that it feels good to be full. Continue to wake your baby for feedings at least every 3 hours and feed long enough to soften at least one breast every time until you know your baby is back to birth weight and gaining weight steadily.

When the baby is about 14 days old, your breasts will soften and decrease in size a little. This is your body’s adjustment to producing milk and does not mean your milk supply has decreased. Babies have fairly predictable appetite spurts. The first one usually happens at about this time.
Caring for Your Baby

Congratulations! Enjoy your baby. In the first year of his or her life, your baby will grow, learn, and change faster than at any other time. Although it’s hard work, this is a fun and exciting time. You will soon learn that common sense and your own feelings will help you to become good parents. If you already have children, you may know a lot of what is in this booklet. Books and advice from friends and family are helpful, but each baby is special and different. Trust your baby and trust yourself. Ask for help when you need it.

SAFETY

Safe Sleeping

There are some things you can do to reduce the risk of sudden infant death syndrome (SIDS).

• ALWAYS place your baby on his or her back to sleep, even for naps.
• Do not cover your baby’s face or head while sleeping.
• Do not put bumper pads, pillows, stuffed toys, or soft, fluffy blankets in your baby’s crib.

Other things you can do to decrease your baby’s risk of SIDS include avoiding second-hand smoke (no smoking in the house or car), breastfeeding, and keeping the temperature in the room comfortable for you when your baby is sleeping. Do not overheat the room.

Crib:

Infants need to be placed on a firm mattress to sleep. Pillows, extra blankets and toys should not be in the crib or on beds. Crib rails should stay up whenever your baby is in the crib. The slats on the crib should be no greater than 2 3/8 inches apart. All surfaces of the crib should be smooth. The crib mattress should fit snugly in the crib with no more than two fingers width between the mattress and crib.

Lying Down to Breastfeed:

The American Academy of Pediatrics recommends that all babies sleep in their own bassinet or crib in the same room with you. If you are lying down in bed to breastfeed, the recommendation is to move your baby back to his or her own bed after the feeding. There are some important things to do to make your bed safe for lying down to breastfeed.

• Lay on a firm, flat surface.
• Keep pillows and fluffy blankets away from your baby.

Crib:

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If your baby continues to cry and he cannot be calmed, call his health care provider. A baby’s head and neck are very fragile and no one should ever shake or jerk your baby while he is crying or even while he is playing. Shaking a baby is very dangerous to your baby’s health and can cause permanent brain damage.

*Editorial Note: The word “he” throughout the chapter refers to your child, whether boy or girl.
Eating
Your baby does not need water. Babies are growing very fast and need milk when they are hungry or thirsty.

Checking Your Baby’s Diaper

Bladder:
It may take almost a day for your newborn to wet his first diaper. For the first day or two, your baby’s urine may be orange or rust colored. Don’t worry about this since your newborn is making only a small amount of urine. By the time your baby is four days old, the urine should be pale yellow and he should have at least six wet diapers a day.

Bowel:
Your newborn’s first stools are called meconium. They are sticky, thick and black or brown. By the fourth day, the stool will change. The breastfed baby will pass loose yellow to greenish-yellow stools with small curds. The formula fed baby will have a stool that is loose yellow and seedy at first but as he gets older, it will change to firm, dark yellow and have an odor.

All newborns should have at least three bowel movements in 24 hours. If you are concerned that your baby may be constipated, look at the stool. If it is hard and dry, the baby may be constipated. Call the baby’s health care provider. Constipation in an infant is rare and should never be treated without medical advice.

Diapering:
Change your baby’s diaper frequently, as soon as it is wet or soiled. Before beginning to diaper, have all the items you will need within easy reach. Gently and thoroughly clean the diaper area with plain warm water or baby wipes which are unscented and alcohol free.

For girls: gently wipe from front to back. For the first few days, it is not unusual for girls to have a white milky discharge which may be tinged with blood.

For boys: gently clean behind the penis and testicles. To care for the penis, see the next page.

Diaper Rash:
Diaper rash is a reddened rash that appears on the area covered by the diaper. Diaper rash can be caused by many things including disposable diapers, how often the diaper is changed, diarrhea, diet changes, or certain soaps and baby wipes.

The best way to avoid diaper rash is to change your baby’s diaper frequently and thoroughly clean the baby with each diaper change. Doing

Breastfeeding

Breastfeeding is natural and can create a special bond between you and your baby. It provides the ideal food and can help protect your baby from illness. However, it may take both you and your baby some time before it is easy. Before birth babies do not experience feelings of hunger. For the first two to three days after birth, babies eat because they enjoy the comfort of sucking. They then begin to associate sucking with the taste of milk and feeling full.

Beginning Breastfeeding

Many babies breastfeed well in the first hour or two after birth. Some babies are then sleepy for the next 48 hours. Because these first few days are an important learning period for your baby, you need to wake your baby about every three hours for feeding. Some signs that your baby is ready to wake up are sucking motions, bringing hand to mouth, cooing or sighing sounds, and moving around restlessly. Pick up your baby when you notice these signs of waking. Changing the diaper, massaging the baby’s chest, back, legs and feet and moving around while talking will help your baby wake up. Within a few days most babies wake up easily when they are hungry.

Colostrum
Colostrum is the milk in your breasts when your baby is first born. In the first few days after birth, a baby’s small stomach cannot hold a lot of milk at one time. Colostrum is very concentrated so it is perfect for the newborn’s first feedings. It also protects the baby from infections and is a natural laxative to stimulate the baby’s bowels.

You will begin producing mature milk in larger amounts within two to three days after you give birth. Your breasts will feel fuller or heavier. This is often referred to as milk “coming in,” but does not mean that the breasts have been empty until that time.

How Often and How Long to Feed

Breastfeed your newborn about eight times in 24 hours, or every two to three hours (timed from the beginning of one feeding to the beginning of the next). Nurse on the first side until the breast feels softer or lighter, usually 15 to 20 minutes. Then, after giving your baby a chance to burp, offer the second breast. Most babies will nurse 10-15 minutes on the second breast, but that breast may not empty as much as the first side. Some babies are content with only one breast at each feeding. At the next feeding, start feeding on the side that feels fuller or heavier.

Emptying the first breast before going to the second side will help your baby gain weight well and go longer between feedings because the richer milk comes as your breast empties. During each feeding, your milk changes from skim milk to whole milk, and then to cream, so breastfeeding on the first breast until it is softer or lighter, assures your baby gets the richer milk.

Your baby’s only language is crying. You will soon learn to recognize the different cries. If you have fed within the last two hours and your baby is gaining weight well, try other forms of comfort before offering to feed again. Your baby may be bored, have gas or simply need some cuddling. If nothing seems to help, try nursing. Your baby may be hungry a little early.

As your baby gets a little older and bigger, the feedings will go faster, and your baby will also begin to sleep longer at night.
Care of the Uncircumcised Penis

The uncircumcised penis is easy to clean by gently washing the genital area with mild soap and water. The foreskin covers the head of the penis. It should never be forced away from the tip. It will usually separate by the time the child is a teenager. When your son is old enough, he can learn to clean his penis just as he will learn to care for the rest of his body.

Care of the Circumcised Penis

The tip of the penis needs special care after a circumcision. The skin may be red or yellowish. Put Vaseline gauze on it for the first 24 hours to keep the diaper from sticking. Change the gauze with each diaper change for the first day following the circumcision. A yellowish discharge or coating around the top of the penis is normal, and should go away within a week after the circumcision. After the first 24 hours use Vaseline on any raw areas to keep the penis from sticking to the diaper. It takes about 7 to 10 days for the penis to heal.

Call your baby’s health care provider right away if:

• Your baby does not urinate within 8 hours after the circumcision
• His penis continues to bleed
• There is redness around the tip of the penis that gets worse after 3 days

Umbilical Cord Care

It is important to keep your baby’s umbilical cord (“belly button”) clean and dry. To prevent infection give the baby a sponge bath, avoiding the belly button area until the cord has fallen off and the area is healed. The umbilical cord will fall off in one to two weeks.

Until the cord falls off, keep the area exposed to air, or loosely covered with clean clothes.

On the day the umbilical cord falls off, there might be a very small amount of blood or clear fluid. Just clean the area daily with soap and water. It may take a couple of days to heal completely.

Call your baby’s health care provider if:

• There is thick, yellow drainage (pus) or blood from the umbilical cord
• The umbilical cord smells badly
• The skin around the cord becomes red
• There is bleeding that will not stop after the cord falls off
• The cord has not fallen off in 2 weeks

Skin Care

During the first few weeks of life, the baby’s skin may look dry and flaky. This is normal. Mild soap and water is all that is needed. Avoid baby oils, lotions, and powders unless recommended by your baby’s health care provider, because they can cause skin problems for your baby. Avoid sunscreen until your baby is 6 months old. Wash clothes in a mild detergent before putting them on your baby. Do not use fabric softener.

Your baby’s nails are soft and you may peel or file them. The best time to do this is when your baby is asleep. Nail clippers or scissors are not recommended until your baby is older and the nails are harder.

Body Temperature and Clothing

Dressing your baby depends on the weather. In general, babies need one more layer of clothing than you do. During the summer, do not put too many layers on the baby. This could cause the baby to get too warm and become sick. Remember, direct sunlight can burn baby’s skin quickly. In winter, baby blankets can be used to protect the baby from cold and wind. In cold weather, hats are helpful because babies lose a lot of heat from their heads.

this keeps the skin clean and dry. If the baby does get a diaper rash, leave the diaper off whenever possible. Fresh air helps rashes clear up quickly. Talk to your baby’s health care provider before treating diaper rash with an ointment.
Developing Strong Bones

Everyone's body needs regular exposure to sunlight for the body to make Vitamin D. Vitamin D is an important element in developing and maintaining strong bones. The sunlight needed can be obtained in several ways, such as going for a walk or sitting by an open window. Infants only need about 20 minutes of sunlight a day or 2 hours total in a week fully clothed (only hands and feet exposed). In warm weather, only 5 minutes a day is needed. 30 minutes a week in just a diaper when the weather is warm. Too much sun exposure is not healthy and it is important to avoid sunburn. Ask your baby’s health care provider if your baby needs extra Vitamin D.

Jaundice (Yellow Skin)

Jaundice or yellow skin is common in newborns. After birth, babies have extra blood in their bodies. Because this blood is not needed, the body begins to break down some of the blood cells creating a substance called bilirubin. The bilirubin can cause the baby’s skin to turn yellow. Your baby’s health care provider may order a blood test for the baby to check the bilirubin level. Many times, the jaundice will go away without needing any treatment. Sometimes, babies will need light therapy to help break down the bilirubin. Although it is rare, jaundice can cause serious health problems. If you notice your baby’s skin is becoming yellow after you get home (for darker skinned babies, the eye may look yellow), call your baby’s health care provider right away.

Car Seat Safety

North Carolina laws require that every child under one year of age, who weighs less than twenty pounds, ride in a car seat that’s specially made for infants. The infant car seat must be securely installed so that the baby’s face is looking at the back of the car. The law also says the car seat you use must meet federal safety standards and must be appropriate to the child’s weight and height. These laws exist because motor vehicle crashes are a major cause of preventable death and injury for children in our state and nation.

In general, the best protection for your baby is to install the car seat in the middle position of the back seat. Never install a rear facing car seat in front of an airbag because, should the airbag activate, the force can cause serious injury. If you are uncertain how to use your car seat, please be sure to ask for help.

Head Shape

There are 3 things you can do to help make sure your baby’s head develops with a normal round shape:

- By 2 weeks old, put your baby on his tummy each day when he is awake and you are in the same room with him. This is sometimes called “tummy time” and also gives babies a chance to develop their neck and shoulder muscles.
- Unless your baby is riding in a car, the baby should not be laying in a car seat or infant carrier.
- When you put your baby on his back to sleep, sometimes turn his head to the right and sometimes to the left.

Safe Surrender

Some women who have given birth realize they cannot or will not be able to take care of a baby. North Carolina has a Safe Surrender law that allows a mother to anonymously (without giving any information about herself or the baby) release her unharmed baby to a responsible adult, up to 7 days after birth.

A responsible adult can be:
- A health care provider at a clinic or hospital
- A law enforcement officer on duty at a police station or a sheriff’s office
- A social services worker on duty at a county department of social services
- An emergency medical worker on duty at a fire station

The responsible adult will call 911 or the county social services department. The birth mother or responsible adult is not required by law to give any information although any information about the health and birth of the baby would be helpful in providing care for the baby.

You can go to www.safesurrender.net to learn more about this North Carolina law.

If your baby is more than 7 days old and you realize you cannot care for the baby, you should contact your local department of social services for help.

If you are interested in releasing your baby for adoption, there are agencies that can help you arrange for the adoption of your baby to a safe and loving home. Contact your county department of social services or a licensed adoption agency.

Advice for pregnant and new mothers is available at 1-800-FOR-BABY.