

PEDIATRIC ASSOCIATES OF ORLANDO, P.A.

TWO-WEEK CHECK UP

DATE _____

WEIGHT _____% HEIGHT _____% HEAD CIRC _____%

WELL VISIT IMMUNIZATION SCHEDULE

2 Month	4 Month	6 Month	9 Month	12 Month	15 Month	18 – 24 Months	5 Year	11+ Years
DTaP	DTaP	DTaP			DTaP	Vaccine Review	DTaP	Tdap (tetanus)
IPV	IPV		IPV				IPV	
Prevnar	Prevnar	Prevnar			Prevnar			
Comvax (Hepatitis B & Hib)	Hib	Hib			Hib			Gardasil (for girls)
		Hepatitis B		Hepatitis B	MMR		MMR	Menactra
RotaTeq (oral)	RotaTeq (oral)	RotaTeq (oral)		Chickenpox (Varivax)			Chickenpox (Varivax)	
				Hepatitis A		Hepatitis A		
		Flu (Seasonal)						Catch Up Vaccines

** Please verify your vaccinations with your physician at the time of your visit **

NEWBORN SCREEN

In Florida, Infant Metabolic screening (Blood Draw) includes PKU (Phenylketonuria), Galactosemia, Hypothyroidism, Sickle Cell Disease, and other Blood Disorders, and Congenital Adrenal Hypoplasia. These are several disorders if not detected early can be harmful to your baby. The State Laboratory or our office will contact you should there be any problems with your baby's tests. (Your child should have had one Infant Metabolic Screen after you baby was 48 Hours old.) A hearing screen may have been done while your baby was in the hospital and should be repeated if the initial screening was abnormal.

NUTRITION

Nearly all newborns lose 5-10% of their birth weight in the first week secondary to normal post-delivery fluid loss. Most Babies have stopped losing weight by the fifth day of life and have regained or surpassed their birth weight by 10-14 days.

Feed your baby breast milk or iron fortified formula only. No other liquids (i.e. water juice) are need at this time.

A. Breastfeeding

Colostrum is the clear-yellow milk that appears in the first few days. Regular breast milk should come in the first 3-7 days. Be sure your baby has as much of the areola (dark pigmented area around the breast) as possible when sucking, Sucking on only the nipple will prevent the milk glands from being compressed to secrete milk, and may also make your nipples sore. Once your baby has latched on properly nurse for 10 minutes on the first breast, burp your baby and switch to the second breast as long as baby continues to want to nurse. Start each feeding with alternate breasts. Your baby may nurse every 2-4 hours, which may vary based on their needs. If your baby is sleeping more than four hours, wake them to feed during the day. Do not awaken your baby for feedings after midnight unless instructed by your physician. Consult your physician or lactation specialist if you need assistance or have questions. Your baby may have approximately 6-8 yellow seedy stools per day, and 6-8 wet diapers per day

B. Bottle feeding

We recommend iron-fortified formula. If you are mixing formulas be sure to follow the appropriate formula preparation directions on the label whether formula needs to be diluted. Diluting a formula that should NOT be diluted or not diluting one that should be, can be harmful to your baby. Routinely burp you baby halfway through the battle, or if your baby wants to stop prematurely as it may be air, not formula, filling the stomach. Hold your baby in a semi-sitting position while feeding. DO NOT PROP or put your baby to bed with a bottle in the crib. NEVER warm bottle in the microwave. There may be uneven heat distribution, and you could burn your baby's mouth and throat. Heat up the bottle by placing it in a glass full of hot tap water until the bottle is warn, or use a bottle warmer.

Change your baby's diaper as soon as possible after bowel movements or urination. Gently wipe the diaper area with a clean soft cloth or wipe. Use ointment (A and D, Balmex, and Desitin) for diaper rashes or redness in the diaper area, and discontinue wipes until the rash is gone.

ANTICIPATORY GUIDANCE

Schedule next appointment for two months of age. Your child will again receive a complete physical exam and the first set of immunizations at this time. Hold, talk, ding, cuddle, and rock your baby. Balance your time, allow each parent alone time, time together as a family unit, and arrange babysitting to go out as a couple. Establish routines and accept support from friends and family.

Care for yourself: getting plenty of rest, eating well, eating healthy foods and drinking plenty of fluids. Wash your hands frequently, especially after diaper changes and before feeding your baby. Our hands transmit many germs and viruses. Have all visitors and family members wash hands thoroughly prior to handling baby. Your baby is especially vulnerable to viral and bacterial infection; therefore avoid contact with people who are ill. Avoid crowds, crowded spaces (busy shopping malls, theaters, theme parks) where your child is susceptible to pick up germs.

Do go out on walks weather permitting, and trade off taking care of your baby to enable you to get out and take time for yourself. Rest while your baby is sleeping: realize there may be times when you feel tired, overwhelmed or sad.

SAFETY

- A. Always use properly installed backward facing infant car seat while traveling in any car. Call the Department of Transportation 1-800-424-9393 for car seat standards set by federal regulations since 1981. Never place your baby's car seat in the front of a vehicle with a passenger air bag. The middle of the back of the seat is the safest place for children of any age to ride.
- B. Never leave baby unattended on changing table, couch, or bed, or on a surface above the floor.
- C. Crib standards: Slats no more than 2 3/8 inches apart with snug fitting mattress to avoid suffocation. The mattress on your crib or bassinet should be firm and flat. Protect the mattress with a tight fitting waterproof cover. Cover this with a soft cotton crib sheet. Avoid use of soft bedding, quilts, all pillows, large floppy toys, or comforters, in the crib. Keep crib free of small objects that your child could swallow or choke on. Don't attach pacifiers, or objects to the crib or body with a cord. Do not place a string or necklace around the baby's neck. Never place crib near or in reach of cords or mini blinds.
- D. Never leave baby alone in the bathtub. Bring all bath supplies into the bathroom prior to bath (Shampoo, Towel, Diaper, Pajamas). Never use a cordless telephone while bathing baby. Avoid answering door and phone. If you must step away, carry baby with you.
- E. To avoid severe lung irritation due to breathing in talc never use baby powder.
- F. Set hot water heater thermostat lower than 120 degrees Fahrenheit. Before placing your baby in the bath, always test the water with the inside of your wrist or forearm.
- G. Install smoke detectors, and have fire extinguisher in home. Periodically check for good working order. Rehearse a fire escape plan.
- H. Be careful not to giggle or shake baby's head too vigorously. Always support baby's head and neck when moving his/her body.
- I. Place infant on back/side (back is preferred) when placing baby to sleep at night to reduce SIDS. Avoid the use of soft bedding. Keep your home, daycare, and car smoke free. Babies and young children exposed to smoke have more colds and other upper respiratory tract infections, as well as an increased risk of Sudden Infant Death Syndrome (SIDS).

WHEN TO CALL YOUR PEDIATRICIAN

Yellow eyes or skin (Jaundice), less than 3 wet diapers/day, rectal temperature of over 100.4 degrees, persistent vomiting (not just nasal congestion or spitting up). Difficulty breathing, seizures, bloody stools, oozing, redness of umbilical stump, excessive irritability or listlessness. Life threatening emergencies, such as severe respiratory distress, should be directed to the emergency room or 911.

Resources: Pediatric Associates of Orlando, [Caring For Your Baby Birth To Age 5](#). American Academy of Pediatrics, S. 1991, [What To Expect The First Year](#). Eisenberg, 1989. Parenting Section at your local library or bookstore or www.brightfutures.org or www.aap.org.