AETNA BETTER HEALTH® OF PENNSYLVANIA

Your healthy pregnancy and baby care guide
Your pregnancy

We want you to enjoy this time and stay healthy

Congratulations on your pregnancy. This is a very exciting time in your life. And we’re here to help keep you and your baby healthy.

The information in this guide can help you make your best choices to be well. Please read it carefully. It’ll help you prepare for your pregnancy and your new baby. If you have any questions about the benefits and services you can receive, just call Member Services at 1-866-638-1232, PA Relay 7-1-1. We’ll help you access the care you need. We can also connect you to programs and services that will help you before and after your baby’s birth.

Take advantage of Text4baby

Text4baby is a service we offer for all pregnant moms. It sends you information about your pregnancy and new baby.

Getting started is easy. Just text the word “baby” to 511-411 on your cell phone. The service will send you some questions about your pregnancy. After you answer these questions, you’ll get texts with tips, reminders and updates.
Your pregnancy is divided into three parts called trimesters. A full-term pregnancy lasts about nine months (or 40 weeks) and is counted from the first day of your last period.

### First trimester: Months 1–3 (or weeks 1–12)

<table>
<thead>
<tr>
<th>Month</th>
<th>Milestone</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Your baby’s heart is beating and all the important organs are beginning to work.</td>
</tr>
<tr>
<td>2</td>
<td>Your baby is the size of a grape. All organs have formed and your baby is starting to move his or her arms, legs, fingers and toes.</td>
</tr>
<tr>
<td>3</td>
<td>Your baby weighs about 1 ounce and is about 4 inches long.</td>
</tr>
</tbody>
</table>

### Second trimester: Months 4–6 (or weeks 13–27)

<table>
<thead>
<tr>
<th>Month</th>
<th>Milestone</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Your baby weighs about 5 ounces and is 6 to 7 inches long. Your baby boy or girl now has eyelashes and eyebrows. He or she also kicks, turns and moves a lot, but you can’t feel it yet.</td>
</tr>
<tr>
<td>5</td>
<td>Your baby weighs ½ to 1 pound and is about 12 inches long. You’ll soon feel your baby move.</td>
</tr>
<tr>
<td>6</td>
<td>Your baby weighs 1 to 1½ pounds and is about 14 inches long. Your baby starts to open and close his or her eyes.</td>
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</tbody>
</table>

### Third trimester: Months 7–9 (or weeks 28–40)

<table>
<thead>
<tr>
<th>Month</th>
<th>Milestone</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Your baby weighs about 3 pounds and is about 15 inches long. Your baby is very active and even sucks his or her thumb. Your baby can hear and often responds to touches (that’s why so many women rub their tummies).</td>
</tr>
<tr>
<td>8</td>
<td>Your baby weighs 5 to 6 pounds and is about 18 inches long. Your baby’s organs are working well. But your baby isn’t ready to be born yet, because the lungs aren’t ready to breathe on their own. Your baby’s moving may slow down because there isn’t much room in there. But make sure to call your doctor if you don’t feel the baby move for a day.</td>
</tr>
<tr>
<td>9</td>
<td>Your baby weighs between 6 and 9 pounds and is 19 to 21 inches long. Your baby is saving up a lot of energy for the big day and is ready to come any time.</td>
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</tbody>
</table>
Prenatal care

Giving your baby the best start in life

You can start taking care of your baby while you’re pregnant. It’s called prenatal care. And getting started is easy. Just follow these simple tips.

Listen to your doctor

You should see your doctor as soon as you find out you’re pregnant. If you don’t have a doctor, choose one who makes you feel comfortable. Your doctor will help you make healthy lifestyle choices and answer questions about your baby’s health and yours. Your doctor will also teach you about labor and delivery. You’ll learn what warning signs to watch for. And after birth, your doctor can help you choose the family planning option that will work best for you.

Your doctor will also let you know which medicines are safe to take. This includes over-the-counter (OTC) drugs. Always follow your doctor’s instructions on how to take your medicine. And never use anyone else’s medicine.

Protect yourself from abuse

Nobody deserves to be abused. And it’s not just dangerous for you. It can also hurt your unborn baby. Abuse can be:

- Physical (hitting, kicking, biting)
- Mental/emotional (cursing, yelling, put-downs and controlling behavior)
- Sexual (being forced to have sex)

Let us connect you to help. You can contact Member Services. Or you can call the National Domestic Violence Hotline at 1-800-799-7233.

If you aren’t safe at home, you should call us or tell your doctor right away. We can help you get into a “safe house.” It’s a place where no one can find you and hurt you. For information about a safe house near you, just call Member Services.

Choose your baby’s doctor before your baby is born

After babies are born, they need their own doctors (pediatricians or family physicians). Your baby’s doctor will not be the same one you see during your pregnancy.

We need to know your baby’s doctor by the time you’re seven months pregnant. Just call Member Services to let us know which doctor you choose. For help finding a doctor, you can call Member Services or ask your doctor. Or, you can pick the same doctor you have for your other children.

Make healthy choices

When you take care of yourself, you’re taking care of your baby. Make sure you eat well, drink lots of water and get plenty of rest. You should also try to stay active. You can ask your doctor about the best way to stay fit when you’re expecting. And make time for yourself. It’s okay to ask for help when you need it. Let your partner, family or friends be there for you. And remember, we’re also here to help.

Quit your bad habits

Everything you do affects your baby. You shouldn’t smoke, drink alcohol or take drugs. If you need help quitting, talk to your doctor or contact Member Services right away.

Member Services
1-866-638-1232, PA Relay TTY 7-1-1
Working with your doctor for a healthier pregnancy

Regular visits with your doctor will help keep your pregnancy on track.

Along with the care you’ll receive, your doctor can also help you learn more about your pregnancy. And you can get counseling and support as needed. So be sure to follow your doctor’s advice about how often you should be seen. A common schedule is:

- **Weeks 4-28:** A visit at least every 4 weeks
- **Weeks 29-36:** A visit at least every 2 weeks
- **Weeks 37-40:** A visit at least every week

You’ll get a physical checkup at each visit. Your doctor will also decide which tests you need and when they’ll be done. Keep in mind that all pregnant women have their blood drawn at the first visit. Your blood needs to be checked for problems that can complicate a pregnancy.

If you’re identified as “high-risk” by your doctor, you may need more visits or closer monitoring. And we may also get you a case manager who can help you.

Protect your baby - get tested for STDs and HIV

We encourage every pregnant woman to get tested for sexually transmitted diseases (STDs) and HIV (the virus that causes AIDS). Getting tested is easy and there’s no cost to you. Just ask your doctor to have you set up for testing. If you test positive for any STD or HIV, your doctor can help you get counseling and any treatment you need.

Ask your doctor about the medicines and vitamins you’re taking

Medicines can help you stay healthy. But taking the wrong medicine while you’re pregnant can be dangerous. You’ll want to work with your doctor to manage your medicines. Just take all your medicines to your next visit.

Remember, medicines include prescriptions, over-the-counter (OTC) drugs, vitamins and herbal supplements. Tell your doctor exactly which medicines you’re taking and how often you’re taking them. **And don’t stop taking any medicine recommended by your doctor without checking with him or her first.**

Your doctor may also prescribe you a new vitamin. It’ll give your body the extra help you need while you’re pregnant. You may also get a prescription for a supplement like folic acid. It can help your baby’s vital organs develop the way they should. But keep in mind that folic acid works best when taken before you’re pregnant.

Don’t forget to see your dentist too

Your oral health directly affects your unborn baby’s health. If you have tooth decay or infections, you can pass the bad bacteria on to your unborn child. If you haven’t seen a dentist in a while, or are due for a cleaning, now is the time to do it.

And don’t worry about hurting your baby with X-rays. You’ll have a special apron to cover you when your mouth is X-rayed.

And be sure to tell your dentist about any medicines you’re taking.
Good nutrition is important for your baby’s healthy growth

Eating right is always good health advice. But it’s extra important when you’re pregnant. When babies get the right vitamins, they’re more likely to be born healthy.

When you’re pregnant, you’ll qualify for services to get nutritional help. To learn more, just call WIC at 1-800-942-9467, TTY 7-1-1. Your doctor can also give you advice about eating right.

Getting started is simple. Just follow these healthy eating tips:

- **You may find you want more liquids when you’re pregnant.** Water and non-sweetened drinks are best.
- **Eat healthy snacks and meals.** Instead of eating three big meals a day, try eating five or six small meals and snacks that include:
  - Fruit and fruit juice
  - Cheese
  - Vegetables
  - Yogurt
  - Well-cooked (baked or grilled) meats, poultry and fish
- **Stay away from foods with “empty calorie” value,** such as:
  - Donuts, cake, cookies, candy, ice cream and chips
  - Fried foods
  - “Fast foods” like burgers and fries
- **Stay away from foods that could make you or your baby sick,** such as:
  - Raw fish, raw shellfish and some other fish like swordfish, shark and king mackerel
  - Undercooked meat and poultry
  - Raw or undercooked eggs
  - Soft cheeses
  - Cheeses not made in the United States
  - Unpasteurized milk and foods made from this
  - Unpasteurized juices
  - Raw sprouts (i.e., alfalfa sprouts)

### Gaining the right amount of weight

Gaining too much or too little weight can be bad for you and your baby. So your doctor will tell you how much weight you should gain during your pregnancy. Most women gain about 25 to 35 pounds.

<table>
<thead>
<tr>
<th>The extra weight is:</th>
<th>Pounds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baby</td>
<td>7.5</td>
</tr>
<tr>
<td>Placenta</td>
<td>1.5</td>
</tr>
<tr>
<td>Uterus (womb)</td>
<td>2</td>
</tr>
<tr>
<td>Amniotic fluid (water around baby)</td>
<td>2</td>
</tr>
<tr>
<td>Breasts</td>
<td>1</td>
</tr>
<tr>
<td>Extra blood</td>
<td>3</td>
</tr>
<tr>
<td>Tissue and fluid</td>
<td>3</td>
</tr>
<tr>
<td>Your reserves</td>
<td>5</td>
</tr>
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</table>
You can quit your bad habits. And we can help.

Your baby’s healthy development is one of the best reasons for quitting your bad habits.

In fact, using cigarettes, alcohol and other drugs while pregnant can put your baby at risk for sickness and even death.

Get the support you need to quit for good
Breaking bad habits isn’t always easy. But you can do it. For your best chance of quitting (for good), you should discuss treatment plans with your doctor. Quitting some drugs too suddenly can cause problems for your and your baby’s health. So be sure to work with your doctor to come up with the treatment plan that works best for you.

Protect your baby from tobacco and cigarettes
Did you know that even secondhand smoke can be harmful? Always keep in mind that the chemicals in tobacco and cigarette smoke can hurt your baby. By staying away from these products, you’ll have a healthier pregnancy. And you’ll give your baby a better chance at living a healthy life.

When you take Illegal drugs and even some prescription drugs, your baby does too
Your baby can become addicted to some drugs and medicines you may take. During your pregnancy, some substances are passed to your baby through your blood. And at birth, if your newborn is still dependent on those drugs or medicines, he or she may go through withdrawal. It can cause your newborn baby to have trouble sleeping, eating or staying calm. Some babies even have seizures. This group of problems is called neonatal abstinence syndrome (NAS).

To prevent NAS, make sure you:
- Go to your regular checkups.
- Are honest with your doctor. Talk openly about the medicines, drugs and other substances you’re taking or have taken. Make sure you include:
  - Prescription medicine
  - “Over-the-counter” (OTC) drugs
  - Street drugs
  - Herbal remedies
  - Alcohol
  - Cigarettes
- Don’t try to quit narcotics on your own. This can be harmful to your baby.

Remember, if you need help quitting, talk to your doctor.
It’s okay. It can be very hard to quit on your own. And in some cases, it can harm you or your baby. You can also call Member Services at 1-866-638-1232 or PA Relay 7-1-1. Or visit our website to find other resources to help you. We want you to have the best chance of having a healthy baby.
What to expect as your body changes

Your body goes through many changes during pregnancy. And you may have many aches and pains as a result. To learn which feelings are normal, just read the list of common side effects below.

First trimester
- You may feel tired and sleepy all the time.
- You may have an upset stomach. This is called “morning sickness,” but can happen at any time of the day.
- You may have sore and tender breasts.
- You may find that you have to go to the bathroom to urinate (pee) more often.
- You may be irritable, moody and cranky, or cry easily.
- You may be afraid or you may be very happy.

Second trimester
- You may have a discharge from your breasts and they may itch.
- Your changing hormones may make you sweat.
- You may have mood swings.
- You may feel mild aches and pains in your sides as the baby grows.
- Your belly may have stretch marks and itch a lot.
- You may have heartburn as well as morning sickness.

Third trimester
- You may need to urinate a lot because the baby is pressing on your bladder.
- Your hands and ankles may swell a little.
- You may have backaches.
- You may get constipated.
- You may get hemorrhoids.
- You may have aches and pains in your sides as the baby grows and stretches your muscles and ligaments.

You can also help your body feel more comfortable while your baby is growing. Just make sure to get plenty of sleep and stay physically active.

Sleep
You may feel very tired and need more sleep than you normally do. This may be especially true in the first three months of your pregnancy. You should ask your doctor how many hours of sleep you’ll need now that you’re pregnant.

Physical activity
You don’t have to stop all physical activity because you’re pregnant. However, you may need to change the type of physical activity that you do. You should talk to your doctor about the level of physical activity that’s safe for you. For example, ask your doctor if it’s okay for you to take a walk every day.
Warning signs
Some symptoms shouldn’t be ignored

Call your doctor right away if you have any of these problems.

<table>
<thead>
<tr>
<th>Trimester</th>
<th>Symptoms</th>
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<tbody>
<tr>
<td><strong>First:</strong></td>
<td>• Vomiting that lasts more than two days or you can’t keep fluid down&lt;br&gt;• Pain or burning when you urinate&lt;br&gt;• Pain or itching in your vaginal area&lt;br&gt;• Unusual vaginal discharge&lt;br&gt;• Bleeding or fluid leaking from your vagina&lt;br&gt;• Fever over 100 degrees or you have chills and flu-like symptoms</td>
</tr>
<tr>
<td><strong>Second</strong> - same as the first trimester plus:</td>
<td>• Any signs of labor&lt;br&gt;• Cramping that doesn’t go away after a few minutes&lt;br&gt;• Swelling in your face&lt;br&gt;• A bad headache that doesn’t go away after eating or resting&lt;br&gt;• You see spots, stars or your vision is blurred</td>
</tr>
<tr>
<td><strong>Third</strong> - same as the first and second trimesters plus:</td>
<td>• Sudden swelling in your hands and feet when you get up in the morning&lt;br&gt;• Your baby’s movements change in any way from normal&lt;br&gt;• Your baby has stopped moving</td>
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</table>

*If it’s three or more weeks before your due date and you feel four contractions in one hour, you should call your doctor right away.*
Help prevent your baby coming too early (premature birth)

Babies who are born too early can have many problems right from the start. In fact, many newborns die because they are born way too early. They’re simply not ready to be born.

Some situations that put you at risk for premature birth are beyond your control. For example, moms who are under 17, over 35, or expecting twins can be at risk. Also, moms who’ve already delivered a baby early may deliver early again. But the good news is there are things you can do to help. Just make sure to follow these healthy living guidelines:

- **Get good prenatal care** – Get care early. And go to all of your appointments. You don’t want to wait until later in your pregnancy to start seeing your doctor.

- **Make healthy lifestyle choices** – Eat well and don’t let yourself get stressed. You don’t ever want to smoke, drink alcohol or take drugs.

- **Take care of all your health issues** – Tooth and gum disease or infections aren’t only bad for you, but can also affect your pregnancy. Make sure you talk to your doctor about all your health issues and conditions.

If you’ve had a premature birth before and are now pregnant with one baby, you may be able to get progesterone shots. These shots, also called 17-P may help prevent premature birth. Just talk to your doctor to see if this treatment is right for you.

**Key facts about premature birth**

A baby is considered premature when born before 37 weeks. And the earlier the baby comes, the more danger there is to the baby. If your baby is born too early, you can expect the following issues:

- Your baby won’t weigh as much as he or she needs to. This means they can’t keep warm by themselves nor have enough energy to eat and grow.

- Premature babies can be very sick and can spend most of their first year of life in the hospital.

- Premature babies may need special care throughout their whole lives.

**You should carry your baby as long as possible**

You want to give your baby all the time he or she needs to grow. It’s true that there are times a baby will need to be born before 39 weeks. But in these cases, early birth is for medical reasons. So if everything is going well, it’s always best to wait until your baby comes naturally. You shouldn’t induce labor between 37 and 39 weeks if you don’t need to.

For more information about premature babies, visit the March of Dimes website at [www.marchofdimes.com](http://www.marchofdimes.com).
Labor and delivery

What to do before your baby arrives

Babies don’t always arrive on schedule. So you'll want to be prepared well before your due date.

You should have a car seat for the baby. The hospital may not let the baby go home without one. And make sure you have your bag packed. If you have other children, let them know you’ll soon be going to the hospital to have the new baby. You may also want to make plans for someone to watch your children when it’s time for you to go to the hospital. You can also ask your doctor for a list of things you need.

Learn the signs of labor

Call your doctor right away if you have any of these symptoms:
- Contractions every 5 to 7 minutes for 1 hour
- Your water breaks or is leaking (or if you’re not sure)
- Contractions get stronger and more frequent when you’re walking

If you plan to breastfeed, ask about a lactation (breastfeeding) consultant

Breast milk is the best food you can give your baby. There are steps you can take to get ready for breastfeeding while you’re still pregnant. Just tell your doctor that you plan to breastfeed and ask for a lactation consultant. Lactation consultants are specially trained to help mothers with breastfeeding. You can also talk about breastfeeding during a childbirth class. And be sure to ask your friends and family for their support.

Take childbirth classes ahead of time

Childbirth classes are available to you. They can help you know what to expect when you’re pregnant. You’ll also learn what to expect when you bring your new baby home. It’s normal to be nervous when you have a new baby. Taking childbirth classes will help you feel more comfortable.

You should start childbirth classes at about week 30 of your pregnancy. Classes usually meet once a week for about 4 to 6 weeks. Class topics cover the late stages of pregnancy, when to go to the hospital, the stages of labor, what happens at birth, and what to expect the first few days after birth. Other topics include pain management options, breathing and relaxation techniques, and breastfeeding. Some hospitals offer classes in Spanish too.

Classes are available to our members at no cost. You can call Member Services at 1-866-638-1232, TTY 7-1-1 for help finding a childbirth class near you. You can also call the hospital where you’re going to have your baby. They’ll tell you when and where they have classes available. We can also help you schedule a ride to your childbirth classes if you can’t find one.
Your new baby

This part of the guide will help answer some of the questions you may have after your new baby arrives. Remember, you can always talk to your baby’s doctor if you have more questions.

Make your baby’s first appointment before leaving the hospital
A doctor will check your baby right after delivery. And the hospital staff will help make sure your baby is healthy. But it won’t be long before you’re taking your baby home. Most healthy babies are sent home within 48 hours after being born.

You’ll want your baby to see his or her doctor two to five days after coming home. Remember to bring your baby’s member ID and immunization (shot) record with you. If your baby hasn’t received a Hepatitis B shot, he or she may get one at this first visit. You can also make a list of questions about your baby’s health and care. This way, you won’t forget to talk to your baby’s doctor about them.

Make your postpartum appointment within one week of having your baby
You’ll need to see your doctor six weeks after delivery. This is your postpartum appointment. It’s a very important visit. Your doctor will make sure you’re healing well. And if you’ve had a C-section, your doctor may want to see you more than once.

Remember, it’s normal to feel sore and tired after delivery. Just try not to push yourself too hard. However, some symptoms aren’t normal. Call your doctor right away if:
- You have heavy bleeding or large clots that continue two to three days after you have your baby
- Your bleeding goes away and comes back heavy or with clots
- Your discharge develops a bad smell or gets heavier
- You develop a fever and abdominal pain
- You have breast pain and redness in any area of one or both breasts

Birth spacing is good for babies
Babies less than 18 months apart are more likely to have low birth weight or be born prematurely. You should talk to your doctor about birth control before leaving the hospital. Or discuss family planning options during your first postpartum visit. Your doctor can help you with any birth control method you may want to use. We can provide you with the following family planning services:
- Birth control pills, patches or vaginal ring
- Implanon (a long acting birth control put under your skin)
- Depo-Provera
- IUDs
- Diaphragms
- Spermicidal foams, jellies and creams
- The morning-after pill
- Sterilization (tubal ligation or vasectomy) for members 21 and older only
Caring for a baby with neonatal abstinence syndrome

If you took drugs during your pregnancy, your baby will be monitored for neonatal abstinence syndrome (NAS). Your baby may have signs of withdrawal because he or she isn’t getting the drugs or medicines from the womb any more.

NAS symptoms can start within hours to a few days after birth. Drugs or medicines that can cause NAS include methadone, heroin, Oxycodone (Percocet), Hydrocodone (Vicodin, Suboxone), Fentanyl, Ativan (lorazepam) and Xanax (alprazolam). Alcohol abuse can also cause withdrawal symptoms. Symptoms include:

- High-pitched cries
- Shaking or tremors
- Stuffy nose
- Stiff arms or legs
- Fast breathing
- Diarrhea (loose stools)
- Difficulty feeding or sleeping
- Excessive yawning or sucking
- Seizures

Treating babies with NAS
Swaddling in a blanket and gentle rocking helps babies with NAS. These babies may need to be fed often. And they do better in a quiet or calm room.

Some babies have more severe symptoms. The doctor may start a medicine to help the baby feel more comfortable and calm. Each baby responds differently to this medicine. Your baby is watched until he or she is well.

Your baby’s doctor will need to check the baby with NAS after leaving the hospital. Your baby’s doctor will watch over the baby for the next few weeks or even months to make sure all NAS symptoms are gone.

Never shake your baby

Being the parent of a new baby isn’t easy. And it comes with challenges you never knew you’d have. Sometimes these challenges can be frustrating, especially if you’re already tired.

So before you leave the hospital make a plan for staying calm during these times. Ask the hospital staff or your doctor about the best ways to soothe a crying baby. And talk to people or family members who are close to you about helping you with breaks or rest periods.

Remember, it’s never safe to shake your baby—even if it’s done in fun and not anger. It can hurt a baby’s neck and brain. Rough bouncing or swinging can also hurt your baby.

So if you need a babysitter, make sure it’s someone you trust and know will treat your baby with loving care. You’ll want to leave the person a list of what your baby likes and what will calm him or her. Also, give your babysitter a plan to use as well, if he or she gets frustrated.
How to know if you have postpartum depression

When you bring your new baby home from the hospital, you may have a mix of emotions. You may feel anxious, or even a little sad.

If your sad feelings don’t go away in a couple of weeks, you may be suffering from depression. Deep depression after the birth of a baby is called postpartum depression. It’s important to call your doctor if your sad or anxious feelings get worse. You’ll want to get help if you:
• Have trouble completing tasks at work or at home
• Lose interest in taking care of your baby or yourself
• Think about hurting the baby or yourself

Thoughts of hurting yourself or the baby are scary. Most likely, you’d never act on them. Still, you should tell your doctor about them right away.

Get help from professionals
Some women feel embarrassed, ashamed or guilty about feeling depressed. However, being depressed doesn’t mean you’ve done anything wrong. Many women get depressed during or after having a baby. So you’re not alone. Just don’t wait to get help. Your depression can affect your baby’s health and wellbeing too. The first thing you should do is contact your doctor, nurse or a medical professional you trust.

Other helpful things you can do:
• Rest as much as you can. Sleep when your baby is sleeping. Ask your family and friends for help with the baby and household chores.
• Don’t try to do too much or be perfect. And don’t make any major life changes right now.
• Don’t hide your feelings. Talk about them with your partner, family and friends. Or join a support group and talk with other mothers.
• Make time to go out, visit friends or spend time alone with your partner.
Your baby’s development

All children grow and change at their own rate. **If you have any questions about the way your baby is developing, ask your baby’s doctor.**

**Here are some general things to watch for in your baby’s development:**

**Baby’s eyes**
Your baby sees objects best when you hold them about 8 to 15 inches away from his or her eyes. Babies like looking at faces, bright lights, colorful objects, and black and white patterns. Some examples of these are a picture of a black and white bear, a red ball or a yellow smiley face.

**Baby’s ears**
Your baby hears sounds. It’s common to raise the pitch of your voice and “baby talk” to your baby. Babies hear higher tones best. Your baby likes to hear the sound of your voice. Hold your baby against your chest so your baby can hear your heartbeat.

**Baby’s sleep**
Babies need a lot of sleep. When sleepy, babies’ eyes will start to blink. If there is a loud sound, babies’ bodies may jerk. Babies in a deep sleep breathe evenly and don’t wake up easily. When your baby sleeps more lightly, breathing may be less even. His or her eyes may move under their closed eyelids. Babies’ mouths may also make a sucking motion. Many babies wake up slowly. It may take a little while for your baby to be ready to eat or play. You can talk softly to your baby. Try holding your baby gently to give him or her time to wake up.

**Baby’s learning**
When awake, your baby will be moving and learning about the world. Your baby will look at your face. He or she will listen to the sound of your voice. At first, babies are only able to do this for one to two minutes at a time. As babies get older, they’ll be able to focus longer.

**Baby’s reflexes**
New babies have many automatic reactions (reflexes). These reflexes show how well your baby’s brain, nerves and muscles are working. But these special “baby” reflexes go away as babies grow and change. You’ll see some of these reflexes right away in your new baby:

- **Grasp reflex** - Babies will hold on tightly to your finger.
- **Startle reflex** - Loud sounds will startle babies. Their arms and legs will straighten suddenly.
- **Rooting reflex** - If you stroke your baby’s cheek, he or she will turn his or her head and open his mouth.
- **Crawl reflex** - When babies are on their tummies, they’ll move their arms and legs as if they’re trying to crawl.
- **Sucking reflex** - Babies will suck on anything that’s placed in their mouths.
Watching your baby grow is fun and exciting. Just remember that all children grow and change at their own rate. You shouldn’t compare your baby with other babies. **But if you question the way your baby is growing, be sure to ask your baby’s doctor.**

The following list outlines the things most babies are able to do as they grow.

<table>
<thead>
<tr>
<th>1 week</th>
<th>9 months</th>
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</thead>
<tbody>
<tr>
<td>• Respond to sound</td>
<td>• Respond to own name</td>
</tr>
<tr>
<td>• Respond to parents’ faces and voices</td>
<td>• Understand a few words</td>
</tr>
<tr>
<td>• Move arms and legs</td>
<td>• Crawl and stand with help</td>
</tr>
<tr>
<td>• Hear very well</td>
<td>• Sit up without help</td>
</tr>
<tr>
<td>• Sleep about 14 to 17 hours a day</td>
<td>• Show fear of strangers</td>
</tr>
<tr>
<td></td>
<td>• Play games like peek a boo and pat a cake</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1 month</th>
<th>12 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Lift head for a short time when lying down</td>
<td>• Begin to take steps and talk</td>
</tr>
<tr>
<td>• Sleep three to four hours at a time; stay awake one hour or more</td>
<td>• Look for dropped or hidden objects</td>
</tr>
<tr>
<td>• Watch your face as it moves from side to side</td>
<td>• Wave “bye bye”</td>
</tr>
<tr>
<td>• Be comforted by being held or talked to</td>
<td>• Able to say a few words</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2 months</th>
<th>15 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Coo and make noises when spoken to</td>
<td>• Feed self with fingers</td>
</tr>
<tr>
<td>• Listen to voices and other noises</td>
<td>• Drink from a cup</td>
</tr>
<tr>
<td>• Like to look at colorful things and lights</td>
<td>• Understand simple orders</td>
</tr>
<tr>
<td>• Smile</td>
<td>• Listen to a story</td>
</tr>
<tr>
<td>• When lying on tummy, will lift head, neck and upper chest</td>
<td></td>
</tr>
<tr>
<td>• Can control his or her head when held upright</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4 months</th>
<th>18 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Babble, coo, smile, laugh and squeal</td>
<td>• Throw a ball</td>
</tr>
<tr>
<td>• When lying on tummy, will raise upper body on hands</td>
<td>• Imitate words</td>
</tr>
<tr>
<td>• Roll from front to back</td>
<td>• Use two word phrases</td>
</tr>
<tr>
<td>• Open hands, hold own hands, grasp rattle</td>
<td>• Use a cup and spoon</td>
</tr>
<tr>
<td>• Control head well</td>
<td>• Show affection, kisses</td>
</tr>
<tr>
<td>• Reach for and bat at objects</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6 months</th>
<th>2 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Say “dada”</td>
<td>• Can go up and down stairs one at a time</td>
</tr>
<tr>
<td>• Sit with help</td>
<td>• Kick a ball</td>
</tr>
<tr>
<td>• May have first tooth</td>
<td>• Stack blocks</td>
</tr>
<tr>
<td>• Hold objects and put them in mouth</td>
<td>• Follow two step orders</td>
</tr>
<tr>
<td>• Move objects from one hand to the other</td>
<td>• Copy adults</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Safety comes first

Keeping your baby safe at home is an important part of your job. You can start by keeping your baby out of public places for the first four months unless it’s absolutely necessary. Your baby’s body isn’t ready to protect itself from germs in the community. And this will help you keep your baby healthy.

Here are some other safety tips you should know:

<table>
<thead>
<tr>
<th>Safety Tip</th>
<th>Details</th>
</tr>
</thead>
</table>
| **Home**                                                                 | - Install smoke and carbon monoxide detectors. Test them each year.  
- Use sleepwear with a label that says the fabric is flame retardant.  
- Never leave household cleaners, drugs or other poisons near your child not even for a few seconds.  
- Protect your baby from electrical shocks. Use outlet protectors.  
- Don’t let your baby play with electrical cords or plugs. |
| **Play**                                                                 | - Everyone who touches your baby — including you — needs to wash their hands first. People who have colds, coughs, the flu or “cold sores” shouldn’t touch your baby.  
- Keep your baby away from both small and large animals.  
- Don’t leave other small children alone with your baby.  
- Hold your baby gently and carefully. |
| **Car and travel**                                                        | - Make sure used or hand me down car seats, strollers, toys, cribs, etc., were not recalled for safety reasons. Check recalled products at 1-800 638 2772; TTY 1-301-595-7054 or visit www.cpsc.gov.  
- Use a car seat. Never hold your baby in a moving car.  
- All babies should ride in a car seat in the back seat.  
- Never place a baby in a car seat in the front if there is an airbag there.  
- Install your car seat correctly.  
- Never leave your baby alone in a car.  
- Never leave your baby alone in a car seat outside of the car.  
- Don’t place a baby in a car seat on a shopping cart. |
| **Choking prevention**                                                     | - Never leave small objects or plastic bags near your baby. Your baby could choke on them or be smothered. |
| **Fall prevention**                                                       | - Never leave your baby alone on a bed or changing table. Your baby may fall and get hurt. |
| **Burn and scald prevention**                                             | - Protect your baby against burns.  
  - When holding your baby, don’t hold a hot drink.  
  - Test bath water with your elbow to make sure that it’s just warm.  
  - Turn down your hot water heater to 120 degrees. |
| **Swimming and water**                                                    | - Never leave your child alone near water. Always make sure there’s an adult watching children at all times by swimming pools, lakes, ponds or even a bathtub.  
- Keep lids down on toilet seats and bathroom doors shut.  
- Don’t leave out buckets or containers with water in them, even if it’s only one to two inches. |
The more you learn about caring for your baby, the better prepared you’ll feel. And there are many books and websites that you might find helpful. But you can start with the following advice.

**Holding your baby**

Newborn babies have very weak muscles in their necks. Their heads are heavy and hard for them to control. To stop neck or head injuries, keep your hand or arm under your baby’s head. You can:

- Hold your baby up to your shoulder
- Cradle your baby in one arm
- Hold your baby under your arm, like a football

**Baby care basics**

*Helping new moms succeed*
Soothing your baby

Remember, never shake your baby. If your baby is crying or fussy and you’re feeling frustrated or angry, try these suggestions to soothe and calm your baby. You can also visit [http://epht.pa.gov/portal/server.pt/community/maternal___child_health/14202/shaken_baby_syndrome/558165](http://epht.pa.gov/portal/server.pt/community/maternal___child_health/14202/shaken_baby_syndrome/558165) for more tips.

- Softly run your finger around your baby’s face to soothe your baby.
- Slowly feed and burp; change the diaper.
- Offer your baby a pacifier.
- Hold your baby against your chest and walk or rock your baby.
- Swaddle your baby tightly in a soft warm blanket.
- Lay your baby, tummy-down, across your lap; gently rub or pat the back.
- Check for signs of illness. If signs are present, call a doctor.
- Take your baby for a ride in a stroller or the car (in a car seat).
- Let anger out in a safe way. Listen to music, exercise or do housework.
- Call a friend or relative and talk out your frustration. See if they can take care of your baby for a while.
- If nothing else works, wrap your baby in a blanket and place the baby on his or her back in a safe place like a crib. Close the door and go to another room. Check on your baby every 10 minutes.

Feeding your baby

It’s best to feed your baby when he or she is hungry, not at a set time. However, if you have more than one baby, you may have to feed them on more of a set schedule. All babies eat different amounts. They also eat different amounts at different times. But they all start out eating very little and eat more as they grow.

Check with your doctor about the right amount of milk for your baby. You can learn the average amounts babies eat. But remember, your baby is unique. Your baby may eat more or less than other babies. Most importantly, make sure you feed your baby when he or she is hungry. Don’t let your baby go more than three or four hours without eating. Even if babies are sleepy, they still need to eat.

How to know your baby is getting enough to eat

New moms often worry about whether or not their babies are getting enough to eat. Keep in mind that breastfeeding babies may have a bowel movement every time they eat. Or they may only go once every day or every other day. You can also be sure your baby is eating enough when he or she:

- Has 6 or more wet diapers every 24 hours and soft bowel movements (poop or stool)
- Gains weight after the first week - sometimes babies lose some weight the first few days
- Gets sleepy or calm after eating and burping

How to burp your baby

Babies often swallow air when they’re nursing or drinking from a bottle. Burping helps to get rid of the swallowed air so that your baby’s tummy can hold more milk. Burping also helps to reduce spitting up and upset tummies. Try to burp your baby in the middle of a feeding and at the end. But if your baby doesn’t burp, it’s okay. All babies don’t need to burp every time they eat.

While holding your baby comfortably, lightly pat or rub the back. Sometimes, milk or formula comes up when a baby burps. It’s a good idea to use a burp cloth to cover your clothes. You can hold your baby upright on your shoulder. You can also lay your baby on his or her tummy across your knees. Another way is to hold your baby in a sitting position on your lap.
Breast milk is best for baby

Your breast milk is the perfect food for your baby.

In fact, each mother’s milk is uniquely made for her own baby. This means your milk has exactly the right mix of nutrients to help your baby grow. And breastfeeding babies eat more often than bottle-fed babies. So it may help you and your baby bond faster. Other benefits for your baby include:

- Protection against allergies and infections
- Fewer food sensitivities – your baby gets used to different flavors in your milk
- Better nutrition – the right balance of fats, protein and sugars
- Easier digestion – it’s much easier for your baby to digest than cow’s milk formula

But breastfeeding doesn’t just help your baby. It’s also good for you. It helps your womb (uterus) return to its normal size faster. And it burns calories. So you’ll lose weight faster after giving birth. Also, your breast milk feeds your baby at no cost. You won’t need bottles and formula.

The help you need to get started
You should start breastfeeding as soon as possible after birth. So make sure the hospital staff knows that you want to breastfeed. And ask them not to give your baby other food unless medically necessary. Remember, you should breastfeed often. So ask that your baby stay in your hospital room with you. And try not to give your baby a pacifier – at least not yet. Your baby needs to get used to latching onto just your breast.

You’ll want to keep in mind that breastfeeding takes time and effort. You shouldn’t get discouraged if it doesn’t come easily. Many women need extra help breastfeeding, especially in the beginning. After you have your baby, talk to the lactation consultants at the hospital to help you. They can help you get started. And they are available anytime you need them. This will give you a great start in successful breastfeeding.

There’s also help for you when you get your baby home. The La Leche League is a service that helps mothers with breastfeeding. You can find help at 1-877-452-5324 (1-877-4-LaLeche). We’re also here to help. Just call Member Services at 1-866-638-1232, TTY 7-1-1.

Ask Member Services about getting a breast pump
At times, you’ll need to pump and save your milk. This will happen when you need to leave your baby with a caregiver for longer than a couple of hours. Or it may be for medical reasons. The good news is a standard breast pump is covered under your plan. So it’s available at no cost to you. For help finding a breast pump, you can ask your lactation consultant before you leave the hospital. Or you can also ask Women, Infants and Children (WIC). Just call 1-800-942-9467 or TTY 7-1-1. Remember, we’re also here to help if you have questions. Just call Member Services.

Ask your doctor about any medicines you’re taking
Remember, the medicines you take can affect your baby. When you’re pregnant, they can reach your baby in the womb. Now, some medicines reach your baby through your breast milk. Make sure you tell your doctor you plan to breastfeed, and ask about taking your medicines at this time. Don’t stop taking any medicines you’re on without talking to your doctor. Also, don’t start or take any new medicines without speaking to your doctor. This includes anything you can buy at the store like Tylenol or herbal supplements. This is important for you and the health of your baby.

Also, just as when you’re pregnant, don’t smoke or take drugs. And talk to your doctor about how much alcohol is safe to drink. Remember, any substance you put into your body can affect your baby through your breast milk.
Choosing and using baby formula for your baby

While breastfeeding is best, there may be a time period or a medical reason when you’re unable to breastfeed or give your baby pumped breast milk.

If you must feed your baby infant formula, there are important things to remember:
- Bottle-fed babies may only be hungry every three to four hours.
- Check with your baby’s doctor about which kind of formula to use. Make sure you follow the directions on how to mix powdered formula with water. If it’s not mixed the right way, your baby may not get the nutrition that he or she needs. This could affect your baby’s health and development.

Tips for successful bottle feeding

Whether you’re feeding your baby formula or pumped breast milk, you’ll need to use a baby bottle. When you’re feeding from a bottle, there are some very important things to remember.

- Bottles should be clean for each feeding.
- Don’t heat bottles in a microwave oven. Formula heats unevenly. It can burn your baby even if the bottle doesn’t feel hot.
- If you’re not sure the tap water is clean enough for your baby, boil and cool it first. Or, use bottled water.
- Check how hot the milk is by putting a few drops on the inside of your arm. If it burns, it’s too hot for your baby.
- Milk should flow from the nipple in slow drops. Babies can choke if formula is flowing too fast.
- Don’t force your baby to finish every bottle.
- Throw out what your baby doesn’t take at each feeding. It can’t be reheated or used after it has been put to your baby’s mouth.
- Always hold your baby in your arms when feeding. And hold the bottle to his or her mouth. Never prop the bottle up against anything or leave the baby unattended when feeding.
- After you put the nipple into your baby’s mouth, tip the bottom of the bottle up so the nipple is full of formula and not air.
Baby’s bowel movements (poop)
The first few poops after birth are thick, dark green and sticky. They’re called meconium. After the first few green poops, a new baby has yellow poop. The way your baby’s poop looks depends on whether your baby is fed breast milk or formula.

Breast milk-fed babies:
• Have yellow, lumpy and liquid poop, the color of mustard
• May have up to 10 dirty diapers every day in the first weeks
• May have only one poop each day or one every few days
• Have dirty diapers that do not smell bad

Formula-fed babies:
• Have poop that is a little firmer
• Have poop that looks like yellowish peanut butter
• Usually have dirty diapers one or two times a day

If your baby isn’t able to have a bowel movement (poop) or the poop is hard and dry, your baby may not be getting enough liquids. Throwing up and fever are other signs that your baby needs more liquids. If you notice these problems, contact your baby’s doctor right away.

Cleaning your baby’s diaper area
The rule for cleaning a baby is to wash from the clean areas to the dirtier areas. Always wipe baby’s bottom from the front to the back. This keeps germs out of your baby’s openings.
• Use a clean baby wipe or a clean part of a washcloth for each wipe.
• If your baby is a girl, use a clean wet wipe or washcloth and wipe from front toward the back to clean any poop that may have collected in the folds of skin around her vagina.
• If your baby is a boy, the foreskin on the penis may not loosen until about three years of age. Don’t try to pull the skin covering back.

How do you recognize diaper rash?
Diaper rash is red and may have small bumps. It shows up on the baby’s skin usually around the diaper area. Diaper rash can happen when wet or dirty diapers stay too long against the baby’s skin. Sometimes, babies react to the soap you use to wash their cloth diapers. And some babies even react to disposable diapers. Or, it could be a reaction to a new food in your baby’s diet.

Whatever the cause, here are simple steps you can take to make your baby comfortable again:
• Change your baby’s diapers more often.
• Use a diaper rash cream every time you change the baby.
• Let your baby go without a diaper for some time each day.

Check with your doctor if the diaper rash doesn’t go away within a few days or if it gets worse.

How to prevent diaper rash
• Change your baby’s diaper after every poop.
• Change your baby’s diapers often when they’re wet.
• Wash the diaper area with a soft, wet cloth. Dry the area before putting on a clean diaper.

Leave your baby’s bottom bare for a while each day. The air helps stop diaper rash.
Caring for your baby’s umbilical cord (belly button)
The doctor or nurse at the hospital will tell you how to take care of your baby’s cord.
• Never try to pull the cord off.
• The cord will fall off by itself in 7 to 14 days.
• Keep the cord clean.
• Keep it dry by folding the top of the diaper down below it.
• Call your baby’s doctor if the skin around the cord gets red or bleeds any more than one or two drops of blood.
• Binding the belly button (or taping coins on the cord) won’t keep your baby’s belly button from sticking out.
• Don’t put any type of covering over the cord, such as a bandage, because it will keep the cord from drying and falling out.

Caring for your baby after a circumcision
Circumcision is a choice. And may not be covered by your health plan. So be sure to talk to your doctor about the pros and cons of circumcision before your baby is born. And call Member Services to find out if it’s covered by your plan.

If you choose to have your baby circumcised, ask your baby’s doctor how to take care of the penis after it’s done. Drip warm water gently over the end of the penis to clean it with every diaper change. Put diapers on loosely. It takes about two weeks to heal.

Washing your baby
For the first days after birth, use a sponge to wash your baby. This will help keep the cord dry. If you keep your baby’s cord, genitals and face clean, your baby only needs a bath every few days. Be sure to wash the diaper area and under the chin, arms and around the legs. And dry these areas well to help stop skin rashes.

After the belly button is okay, you can bathe your baby in a small tub or sink with only two to three inches of warm water. Bath water should be warm to your touch, not hot.

Before washing your baby, get all the things you need. Have a washcloth, gentle soap, towels, clean clothes and a diaper ready. Start washing your baby’s face and neck. Wash the diaper area last. Always hold onto babies in or around water. A child can drown quickly. Never leave a child alone in water.

Dressing your baby
Unless your baby weighs less than 4½ pounds, your baby only needs to wear a little more clothing than you do. Too many clothes and blankets can make your baby too hot.

Protect your baby’s skin from the sun. For the first few weeks, it’s best to keep your baby inside. Baby’s skin burns very easily. So stay away from the sun and keep your baby in the shade or lightly covered. You can always use sunscreen for older babies and children when they go outside.
Putting your baby to sleep

New babies sleep most of the time. And they’re awake for short periods.

When your baby is tired, he or she will let you know. Your baby will get fussy, turn away and stop wanting to play. Baby’s waking and sleeping patterns will be very different from yours.

New mothers should take a nap whenever the baby is sleeping. Babies often get days and nights mixed up. When a baby sleeps, it may be the only time mom has a chance to get her rest. Don’t forget to take care of yourself.

What you should know about SIDS

Sudden Infant Death Syndrome (SIDS) is:
• The sudden and unexplained death of an infant.
• Sometimes known as crib death.
• One of the most common causes of death in babies from one month to one year of age.

Your baby should always sleep on his or her back. Babies put on their backs to sleep have less chance of SIDS. Also, don’t smoke or let anyone else smoke in your home or around your baby. And talk to your baby’s doctor about other steps you can take to cut the chance of SIDS. You can also find more information online at www.sidsalliance.org.

Death from SIDS happens quickly and silently during sleep. Scientists have found several risk factors for SIDS. And there are things you can do to prevent SIDS.

At bedtime:
• Place your baby on his or her back to sleep. Do this when the baby is put down for a nap or to bed for the night. But if your baby rolls over, don’t try to force your baby to stay on his or her back.
• Don’t put your baby to sleep in an adult bed, especially a waterbed. Have your baby sleep alone in his or her own crib. Don’t let your baby sleep with you, your partner or other children.
• Don’t place fluffy blankets, pillows, stuffed animals, sheepskins or other soft bedding in your baby’s crib.

While awake:
• Let your baby try different positions. Putting your baby on the tummy to play helps your baby’s neck and shoulder muscles get stronger.
• Keep your baby away from cigarette smoke. Smoking near babies may cause health problems for babies.
• Breastfeed your baby.
**Why babies cry**

It can be frustrating when your baby cries, but crying is just the way babies ask for help.

Your baby could be hungry, tired, lonely, sick, or have a wet diaper. Crying may also help a tired baby feel better. Listen and you will soon know your baby's different cries.

Some babies are “fussy” at the same time every day, often at night. Some babies have colic and cry really hard into the night. The good news is colic is usually gone by three months.

**A few ways to help a fussy baby feel better:**

- Change wet or dirty diapers.
- Hold your baby close to your chest and softly rock your baby. Also try different positions that provide support for your baby’s tummy.
- Let your baby suck on your clean finger or on a clean pacifier.
- Feed your baby.
- Swaddle your baby by wrapping a blanket around your baby tightly.
- Talk to your baby face to face; use low, rhythmic sounds.
- Reduce noise and lights in the room.
- Put your baby in a carriage or baby-carrying pack, and walk with your baby inside or outside. Or take your baby for a car ride.
- Put your baby in the crib and let your baby cry. Be patient. Some babies just need to cry a few minutes before they can sleep.

**What to do if your baby keeps crying**

If you cannot calm your baby or he or she is acting differently, check your baby’s temperature. Call your baby’s doctor right away if your baby:

- Has a fever
- Isn’t acting normally
- Can’t be calmed

**If your baby is sick and has a fever,** ask your doctor’s office if you can bring your baby in that day. If your baby gets sick after hours or on a weekend, call the doctor’s office anyway. An answering service will make sure your doctor gets your message. The doctor’s office will call you back to tell you what to do. Be sure your phone accepts all calls. Otherwise, the doctor may not be able to reach you.

**If your baby cries a lot and seems to have lots of gas,** your baby may have an upset tummy. Something your baby ate may be causing pain. Breastfeeding mothers may have to give up foods that upset their baby’s tummies. Sometimes bottle-fed babies need to have a different formula. Talk to your baby’s doctor about this.

**If you feel yourself getting very upset with your baby,** try to find a trusted adult who will take care of your baby. Or put your baby in the crib. Sometimes babies need to cry it out for a short time. Parents Anonymous also has a hotline you can call when you need someone to help you deal with angry feelings. Just call **1-855-427-2736.** Someone will be there to help you Monday through Friday, 10 a.m. to 7 p.m. (PST).
**Teething**

Your baby’s teeth start to appear around four to seven months.

The first teeth to show are usually the two bottom front teeth. Some signs that can tell you if your baby is teething are bulging gums, drooling, fussing, waking at night, and sometimes biting. You can try using teething gels or anything cold to soothe your baby’s mouth while teething.

While your baby is teething, your baby may also have:
- A rash caused by drool
- Watery poop
- Cough
- Low-grade fever

**Cleaning your baby’s teeth**

Baby teeth start to come in during the first year of your baby’s life. Taking care of your baby’s teeth is important because good baby teeth help children talk well and eat well. Also, healthy baby teeth help permanent teeth come in straight. This helps your child have a good self-image.

Ways to protect your baby’s teeth include:
- Don’t put baby to bed with a bottle.
- Limit snacks that will stick to baby teeth, like crackers or raisins.
- Have your baby’s teeth checked often by a dentist, doctor or nurse.
- Take care of any cavities.
- Clean your baby’s teeth and gums with a damp cloth or a soft toothbrush.
- Don’t give your baby juice.

**Mom’s dental health can affect baby’s teeth too**

When you brush your teeth, it helps to get rid of the germs in your mouth. You won’t want to pass on germs to your baby. You shouldn’t share anything that’ll get saliva from your mouth into your baby’s mouth. For example:
- You and your baby shouldn’t eat from the same spoon.
- Don’t chew food to feed to your baby.
- Never “clean” a dropped pacifier by putting it in your own mouth.
Health care basics

Well-child visits

Babies grow and change so much during their first years. So your baby will see the doctor for several different checkups during this time.

We call these Early and Periodic Screening and Diagnostic Treatment (EPSDT) or well-child visits. And these visits are important because a doctor can sometimes find problems you can’t see. Early care can keep many problems from becoming worse.

At these visits, the doctor will weigh your baby. The doctor will also measure your baby’s length and head size, and check your baby head to toe. During many of these visits, your baby will also get immunizations (shots).

**Shots can protect your child from many diseases.** And they can be given even if your baby has a cold. If your child has a fever, watery poops (diarrhea) or is taking antibiotics, shots can still work. Shots won’t make your baby sick. However, missing shots could put your baby at risk for serious illnesses. So if your baby ever misses a well-child visit, you’ll want to talk to the doctor about catching up on missed shots.

Keep in mind that it’s unusual for a baby to have a bad reaction to shots. And the side effects are small. Your baby may be fussy or have a low fever for a day or two. Check with your baby’s doctor to see if you should give your baby any medicine after shots. And call the doctor if your baby’s fever goes above 103 degrees.

You should take your baby's shot record with you to every checkup. Keep it in a safe place, and be sure not to lose it. When you baby is older, he or she will need to show this record every year to start school.

**Well-child (EPSDT) visits: 0–2 years of age**

<table>
<thead>
<tr>
<th>Age</th>
<th>Well-child (EPSDT) visits</th>
<th>Shots</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 to 5 days</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>2 to 4 weeks</td>
<td>Yes</td>
<td>Check with doctor</td>
</tr>
<tr>
<td>2 months</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>4 months</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>6 months</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>9 months</td>
<td>Yes</td>
<td>No (If child is up to date)</td>
</tr>
<tr>
<td>12 months (1 year)</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>15 months</td>
<td>Yes</td>
<td>Check with doctor</td>
</tr>
<tr>
<td>18 months</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>24 months (2 years)</td>
<td>Yes</td>
<td>No (If child is up to date)</td>
</tr>
</tbody>
</table>

More information about well-child visits and baby shots can be found in your member handbook.

Remember, the best way to keep your baby healthy is to follow the advice your baby’s doctor gives you. Family and friends mean well, but your baby’s doctor is the best source for medical information.
Testing for lead is important

You want your children to be safe from illness and accidents. But if you live in an older home, or have things you bought in another country, there may be a hidden danger: Lead. And lead can poison your children.

How can lead hurt your child?
Lead poisoning doesn’t always show up right away. But over time, too much lead in a child’s blood can cause several problems. And there are many ways lead can get into your blood. You can breathe in lead dust from paint or from the soil. Also, children tend to put their hands in their mouths often.

But some symptoms can look like or appear to be other conditions. So always check with your doctor if you’re not sure. If not treated, lead can cause:
- Permanent damage to the brain
- Slow learning and development
- Trouble paying attention or sitting still
- Anger issues and trouble getting along with others
- Physical aches and pains

How can you prevent lead poisoning?
Make an appointment with your doctor to get your child tested for lead poisoning. It’s a simple blood test, and won’t take long to do. Other actions to take:
- Teach your children to wash their hands before eating and after playing.
- Wash your child’s toys often and throw away any metal jewelry you find.
- Mop your floors with warm water and a good cleaner.
- Use cold water for drinking, making baby formula and cooking.
- Learn how to safely remove paint made from lead.
- Take off shoes before coming inside the house.

Check for sources of lead in your home
Some houses built before 1978 were painted with lead-based paint. Older toys and toy jewelry also may contain lead. Manufacturers don’t use lead as much today. But it’s still found in many places. Below are some things you can check.

Lead-based paint in:
- Homes built before 1978
- Toys, dishes and cookware made before 1978

Lead used in:
- Toys and toy jewelry from other countries*
- Traditional food and water storage pots imported from Mexico and other countries
- Candy or candy wrappers from Mexico
- Some plastics
- Antiques

Some worksites produce lead dust too
You or someone in your family could be exposed to lead dust at a worksite. This may be especially true if you or a family member works in construction. Check with the supervisor if you’re unsure. If it could be a problem, you or your family member should shower and change clothes before coming home.

* If you’re unsure whether your child’s toys are safe, you can call the Consumer Product Safety Commission at 1-800-638-2772 or visit www.cpsc.gov.
Illnesses, injuries and accidents
When your calm response matters

What to do when your baby is sick
1. Fever is one of the signs of sickness. So take your baby’s temperature if you think your baby has a fever. And call your doctor if your baby’s temperature is over 100.4 degrees or under 97.8 degrees. Don’t wait until the temperature is 103. (Just keep in mind that babies are too young to hold a thermometer in their mouths. So try to use a digital thermometer. Just ask your doctor about how and when to use these thermometers.)
2. Write down what the number is, how you took it and the time.
3. Write down what you see that makes you think the baby is sick.
4. Make notes about your baby’s skin color.
5. Write down if your baby is crying. Note if your baby is throwing up or has watery poop (diarrhea).

Other times to call the doctor
You should call the doctor anytime your baby is not acting or looking normal. You’ll soon learn what is normal for your baby. It’s always best to talk with your baby’s doctor if you’re worried. Call the doctor if your baby has any of the following conditions:
• A temperature over 100.4 degrees or under 97.8 degrees
• Vomiting that shoots 2 or 3 feet out of the mouth (projectile vomiting)
• Vomiting that continues for more than 6 hours
• A tummy that feels very swollen and tight
• Two or more times of green, watery diarrhea, or more than 10 soft poops in 24 hours
• Refusing to eat 2 feedings in a row
• Discharge or bleeding from any openings (except from the vagina of a newborn girl less than 1 week old)
• Coughing or choking while feeding (make sure that the milk is not flowing too fast from the bottle nipple)
• Crying that continues for more than 1 to 4 hours a day
• Skin that looks very pale or bluish, and baby’s hands are cold
• Jaundice (a yellow tint to the skin) that starts or gets worse after you bring the baby home from the hospital
• An infection around the cord or circumcised penis that is red and has pus

Urgent Care clinics can help after office hours
Your baby’s doctor may tell you to take your baby to an urgent care or walk-in clinic. These clinics are open longer hours and on weekends. Call Member Services at 1-866-638-1232 or PA Relay 7-1-1 to find a clinic close to you that fits your needs.

Be sure to save the after-hours number for your baby’s doctor. This way you can speak to your baby’s doctor or a covering doctor outside of office hours.
What’s an emergency?

A true emergency is when you believe a severe injury or illness is threatening your baby’s life or may cause permanent harm. In these cases a baby needs emergency medical treatment.

You may feel more confident and calm if you have learned what to do in an emergency. Most hospitals, fire departments, the Red Cross and the American Heart Association hold cardiopulmonary resuscitation (CPR) and other first aid classes. Talk to your baby’s doctor in advance about what you should do in case of a true emergency.

Call 911 if you think your baby’s life is in danger
Don’t hang up. Hold for the operator to give you instructions. The operator will ask what is happening and for your address. It’s easy to forget your address when you’re scared or excited. It helps to have your address posted near your phone.

Call 911 right away for any of these problems:
- Trouble breathing or is turning blue around mouth and eyes.
- Breathing very fast (more than 60 breaths per minute).
- Breathing very heavily. (Nose is flaring and upper tummy area under breast bone is sucking in with every breath.)
- Not breathing for more than 15 seconds.
- Choking and not able to suck in air - don’t stick your fingers in baby’s mouth. You may push objects further into baby’s throat.
- Won’t wake up.
- Is shaking or very still, staring, with no eye focus.
- Increased sleepiness with little movement or a floppy body.
- You or your baby is in immediate danger of being hurt by anyone.

Take your baby to the ER if:
- Your baby’s life is in danger
- Your baby is extremely ill. These are some symptoms you might see:
  - A high fever
  - Excessive vomiting in a newborn
  - The baby is wheezing or making a high-pitched noise when breathing
  - A blue or pale tinge to the baby’s skin
  - Acting strangely or becoming more withdrawn and less alert
  - Rhythmic jerking and/or loss of consciousness (a seizure)
  - Increasing effort or trouble with breathing
  - Skin or lips that look blue, purple or gray
  - Neck stiffness or a rash with fever
  - Seems to be in increasing or severe pain
  - Unconsciousness or no response when you talk to him or her
- Your baby has a severe injury:
  - A bad fall
  - A cut that is large or deep, or involves the head, chest or abdomen
  - Bleeding that does not stop after applying pressure for five minutes
  - A burn that is large and/or involves the hands, feet, groin, chest or face
  - An electric shock
  - An object stuck in the nose, ear or eye
  - An animal or human bite
  - Hitting his or her head – your baby might seem confused, can’t stay awake or is throwing up
  - Unconsciousness or no response when you talk to him or her

Call your baby’s doctor first if there isn’t a life-or limb-threatening problem
If your baby doesn’t have a medical emergency and you go to the ER, you may have to wait for hours before a doctor sees your baby. If your baby is sick, but it’s not an emergency, your baby’s doctor is the one to give you the best care. Call your doctor for advice on what to do.
Community resources
Organizations with a helping hand

Below are some community resources that can help you before and after your baby is born.

**Women, Infants, and Children (WIC)**
Women, Infants, and Children (WIC) provides food, breastfeeding education, and nutrition advice for pregnant women, infants, and children under five years old. They have staff that can help you locate WIC shelters. They also can help you connect with other helpful local agencies.

Phone numbers: **1-800-942-9467**, TTY **7-1-1**

**Healthy Families America**
This program helps mothers have a healthy pregnancy. You can get advice on child development, nutrition, safety and other things. A community health worker will go to the pregnant member’s home to give her information and help with any concerns. The program starts while the member is pregnant, and can continue until the child is five years old.

Website: [www.healthyfamiliesamerica.org](http://www.healthyfamiliesamerica.org)

**Child and Family Resources**
Child and Family Resources provide knowledge, resources, and a support network to strengthen family relationships. You can enroll while you’re pregnant. Families must enroll before the child is three months old. Parents learn about healthy child development and what they can expect as their child grows. Workshops and in-home visits encourage healthy attitudes and positive parenting techniques.