Well Child Visit: 2 Months

Medical Home Port Clinic, Naval Hospital Sigonella

My Provider: Dr. Arthur My Nurse: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ My Corpsman: \_\_\_\_\_\_\_\_\_\_\_\_\_



**After Hours Nurse Advice Line:** 00800-4759-2330 (also accessible by calling the appointment line) **Poison Control:** 1-800-222-1222 (US number) **Emergencies**: On-Base 624-1911; Off-base 095-86-1911 **Appointment Line:** Off-base—095-56-2273; on-base—624-2273

**How do I call my doctor?** Medical Home Port Front Desk: off-base—095-56-4622; on-base—624-4622

Medical Home Port After Hours Line:335-578-8077

**Date: \_\_\_\_\_\_\_\_\_\_**

**Weight: \_\_\_\_\_\_\_kg ( \_\_\_\_\_\_\_%) \_\_\_\_\_\_\_\_\_\_ pounds**

**Length: \_\_\_\_\_\_\_cm ( \_\_\_\_\_\_\_%) \_\_\_\_\_\_\_\_\_\_ inches Head Circ: \_\_\_\_\_\_\_cm ( \_\_\_\_\_\_\_%)**

**Parent-Infant Interaction:**

**Play everyday**: Your baby can see up to 3-4 feet. Look your baby in the eyes during feeding or when talking to him/her. Hold, cuddle, sing, talk and read to your baby. Listen to music with your infant.

**Establish a bedtime routine**: Give the infant a bath, cuddle or feed, read a book and put the baby to sleep. Place your baby in the crib when drowsy, before he/she is completely asleep. Sleep patterns are highly variable, only about ½ of babies sleep through the night at this age. Keep nighttime feeds quiet and put your baby promptly back to bed after the feed. Do not put your infant to bed with a bottle.

**Dealing with colic**: Colic (crying/fussing not associated with any medical disorder) is common at this age. Colic spells usually occur in the evening and are part of normal infant behavior. Try wrapping your baby snugly in a blanket, rocking your baby rhythmically, placing your baby next to white noise from a TV or radio, or taking your baby for a walk or car ride.

**Smoking**: Second-hand smoke causes a greater risk for ear infections, chronic stuffy noses, SIDS (Sudden Infant Death Syndrome), and respiratory infections. Second-hand smoke lingers, on clothes and everywhere a person has smoked (in the house/car and on hair/skin). Never smoke while holding your baby. For your baby’s health, if you smoke, consider quitting. If you can’t quit, shower prior to holding your infant, to remove the second-hand smoke from skin and hair.

**Take time for yourself**: Arrange time with friends without your baby. Leave your baby with a trusted, competent sitter. Allow yourself to vent about natural frustrations.

**Development and your baby**: Over the next few weeks, you can expect your baby to

* Smile in response to people
* Coo and begin making vowel sounds (ah,eh)
* Turn to familiar voices or other sounds
* Focus his/her eyes and follow objects
* “Find” his/her hands and make purposeful arm movements, start to grasp objects briefly
* Show pleasure interacting with parents and primary caregivers
* In the prone position: your infant can lift their head, neck and upper chest with forearms

**To promote these skills:**

* Talk to your baby: make all different sounds; talk about things in the environment around the baby; listen to music
* Read to your baby: It is never too early to start reading to your baby- books with big, bright pictures with hard pages are best for this age. It is okay if the baby puts the book in his/her mouth.



* Provide tummy time for your baby every day: A few minutes multiple times per day is best. This helps your baby develop the muscles in his/her chest and neck.

**Safety:**

1. **Crying**: Crying is common at this age. **IT** **IS NEVER OKAY TO SHAKE, HIT, OR PUNCH YOUR BABY**. Shaking can badly damage your baby’s brain. If you are frustrated with your baby when the baby is crying, please put your baby in a safe place, like the crib or playpen, and give yourself a “time-out.” Call a friend, a family member, or the pediatric clinic for help.
2. **Falls and injuries**: Your baby is learning to roll. Never leave your baby unattended on the changing table, bed, couch, or other high place, even for a second. Always keep crib rails up when your baby is in the crib. Keep the crib away from windows and curtain cords.
3. **Choking**: Be aware of the good, yet potentially unsafe, intentions of older children who may give your baby inappropriate toys or food. Avoid toys with small parts that can fall out/off or be removed. Good toys include soft, washable toys larger than a toilet paper roll and without removable parts or sharp edges. Infants at this age also enjoy colorful mobiles hung above the crib and rattles. Avoid hanging toys or pacifiers with elastic, string, or ribbon because they can strangle your baby.
4. **Burns**: Always check your baby’s bath water temperature with your hand before placing your baby in it. Your water heater should not heat water above 120°F (49°C). Use your smoke alarm and check it monthly.
5. **Car accidents**: Your baby should always ride in a properly-installed car seat, even on short trips. The car seat should face the rear until your baby is **2 years old or too large to face backwards**. The safest place for an infant car seat is in the center of the back seat. Never place the car seat in the front seat. Never leave your child alone in the car, not even for “just a second.”
6. **Sudden infant death**: To prevent sudden infant death, always put your infant to sleep on his/her back. Keep your infant’s sleep area clear of soft mattresses, fluffy bedding, pillows and soft toys. Do not smoke, and if you do, quit today.

**Illness concerns:**

* **Fever:**  Fever is a common reason for bringing infants to the emergency room or clinic. For infants over two months who have received their first set of immunizations, if your child has a fever, but is otherwise acting well, you may give your infant Tylenol. If the fever is greater than 102.0 or lasts greater than 24 hours, call the clinic for further guidance.
* **Use of the emergency room(ER):** Your infant should be brought to the ER if he/she does not look well, is unusually sleepy or inconsolable, is vomiting persistently or excessively, vomits anything green or bloody, is working hard to breathe, is dehydrated or has less than one wet diaper every 6-8 hours, or for other parental concerns.

Your child’s Tylenol dose is \_\_\_\_\_\_\_\_\_\_\_\_\_ mg or \_\_\_\_\_\_\_\_\_\_ ml of Tylenol infant drops (80 mg/0.8 ml)

**Immunizations:**

* Your infant will receive four vaccinations today. Rotateq, Prevnar, Pediarix (Dtap, Hep B, and IPV) and HIB.

**Next Visit**

Bring your baby in at 4 months of age for an exam and vaccinations. Always bring your child’s immunization card to the clinic.