

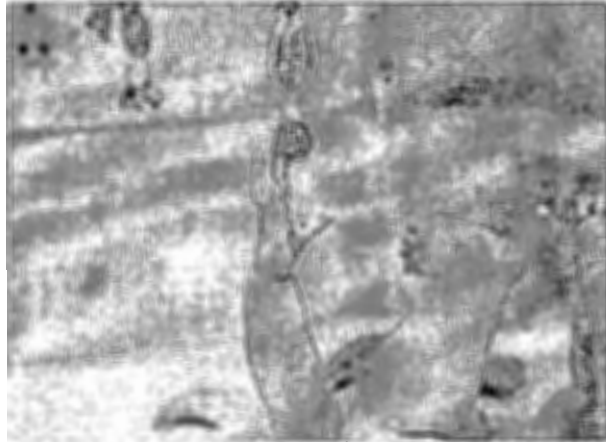
eClinicalWorks

Well-Baby Checkup: 4 Months

At the 4-month checkup, the healthcare provider will examine your baby and ask how things are going at home. This sheet describes some of what you can expect.

Development and milestones

The healthcare provider will ask questions about your baby. He or she will observe your baby to get an idea of the infant's development. By this visit, your baby is likely doing some of the following:



- Holding up his or her head
- Reaching for and grabbing at nearby items
- Squealing and laughing
- Rolling to one side (not all the way over)
- Acting like he or she hears and sees you
- Sucking on his or her hands and drooling (this is not a sign of teething)

Feeding tips

Keep feeding your baby with breastmilk or formula. To help your baby eat well:

- Continue to feed your baby either breastmilk or formula. At night, feed when your baby wakes. At this age, there may be longer stretches of sleep without any feeding. This is OK as long as your baby is getting enough to drink during the day and is growing well.

- Breastfeeding sessions should last around 10 to 15 minutes. With a bottle, gradually increase the number of ounces of breastmilk or formula you give your baby. Most babies will drink about 4 to 6 ounces but this can vary.
- If you're concerned about the amount or how often your baby eats, discuss this with the healthcare provider.
- Ask the healthcare provider if your baby should take vitamin D.
- Ask when you should start feeding the baby solid foods (solids). Healthy full-term babies may begin eating single-grain cereals around 4 months of age.
- Be aware that many babies of 4 months continue to spit up after feeding. In most cases, this is normal. Talk with the healthcare provider if you notice a sudden change in your baby's feeding habits.

Hygiene tips

- Some babies poop (bowel movements) a few times a day. Others poop as little as once every 2 to 3 days. Anything in this range is normal.
- It's fine if your baby poops even less often than every 2 to 3 days if the baby is otherwise healthy. But if your baby also becomes fussy, spits up more than normal, eats less than normal, or has very hard stool, tell the healthcare provider. Your baby may be constipated. This means they are unable to have a bowel movement.
- Your baby's stool may range in color from mustard yellow to brown to green. If your baby has started eating solid foods, the stool will change in both consistency and color.
- Bathe the baby at least once a week.

Sleeping tips

At 4 months of age, most babies sleep around 15 to 18 hours each day. Babies of this age commonly sleep for short spurts throughout the day, rather than for hours at a time. This will likely improve over the next few months as your baby settles into regular naptimes. Also, it's normal for the baby to be fussy before going to bed for the night (around 6 p.m. to 9 p.m.). To help your baby sleep safely and soundly:

- Place the baby on his or her back for all sleeping until the child is 1 year old. This can decrease the risk for SIDS (sudden infant death syndrome), aspiration, and choking. Never place the baby on his or her side or stomach for sleep or

naps. If the baby is awake, allow the child time on his or her tummy as long as there is supervision. This helps the child build strong tummy and neck muscles. This will also help minimize flattening of the head that can happen when babies spend too much time on their backs.

- Ask the healthcare provider if you should let your baby sleep with a pacifier. Sleeping with a pacifier has been shown to decrease the risk for SIDS. But it should not be offered until after breastfeeding has been established. If your baby doesn't want the pacifier, don't try to force him or her to take one.
- Wrapping the baby tightly in a blanket (swaddling) at this age could be dangerous. If a baby is swaddled and rolls onto his or her stomach, he or she could suffocate. Don't use swaddling blankets. Instead, use a blanket sleeper to keep your baby warm with the arms free.
- Don't put a crib bumper, pillow, loose blankets, or stuffed animals in the crib. These could suffocate the baby.
- Don't put your baby on a couch or armchair for sleep. Sleeping on a couch or armchair puts the baby at a much higher risk for death, including SIDS.
- Don't use infant seats, car seats, strollers, infant carriers, or infant swings for routine sleep and daily naps. These may lead to blockage (obstruction) of a baby's airway or suffocation.
- Don't share a bed (co-sleep) with your baby. Bed-sharing has been shown to increase the risk for SIDS. The American Academy of Pediatrics recommends that babies sleep in the same room as their parents, close to their parents' bed, but in a separate bed or crib appropriate for babies. This sleeping arrangement is recommended ideally for the baby's first year. But it should at least be maintained for the first 6 months.
- Always place cribs, bassinets, and play yards in hazard-free areas—those with no dangling cords, wires, or window coverings—to reduce the risk for strangulation.
- This is a good age to start a bedtime routine. By doing the same things each night before bed, the baby learns when it's time to go to sleep. For example, your bedtime routine could be a bath, followed by a feeding, followed by being put down to sleep.

- It's OK to let your baby cry in bed. This can help your baby learn to sleep through the night. Talk with the healthcare provider about how long to let the crying continue before you go in.
- If you have trouble getting your baby to sleep, ask the healthcare provider for tips.

Safety tips

- By this age, babies begin putting things in their mouths. Don't let your baby have access to anything small enough to choke on. As a rule, an item small enough to fit inside a toilet paper tube can cause a child to choke.
- When you take the baby outside, avoid staying too long in direct sunlight. Keep the baby covered or seek out the shade. Ask your baby's healthcare provider if it's OK to apply sunscreen to your baby's skin.
- In the car, always put the baby in a rear-facing car seat. This should be secured in the back seat according to the car seat's directions. Never leave the baby alone in the car.
- Don't leave the baby on a high surface such as a table, bed, or couch. He or she could fall and get hurt. Also, don't place the baby in a bouncy seat on a high surface.
- Walkers with wheels are not recommended. Stationary (not moving) activity stations are safer. Talk to the healthcare provider if you have questions about which toys and equipment are safe for your baby.
- Older siblings can hold and play with the baby as long as an adult supervises.

Vaccines

Based on recommendations from the Centers for Disease Control and Prevention (CDC), at this visit your baby may receive the following vaccines:

- Diphtheria, tetanus, and pertussis
- Haemophilus influenzae type b
- Pneumococcus
- Polio
- Rotavirus

Having your baby fully vaccinated will also help lower your baby's risk for SIDS.

Going back to work

You may have already returned to work, or are preparing to do so soon. Either way, it's normal to feel anxious or guilty about leaving your baby in someone else's care. These tips may help with the process:

- Share your concerns with your partner. Work together to form a schedule that balances jobs and childcare.
- Ask friends or relatives with kids to recommend a caregiver or daycare center.
- Before leaving the baby with someone, choose carefully. Watch how caregivers interact with your baby. Ask questions and check references. Get to know your baby's caregivers so you can develop a trusting relationship.
- Always say goodbye to your baby, and say that you will return at a certain time. Even a child this young will understand your reassuring tone.
- If you're breastfeeding, talk with your baby's healthcare provider or a lactation consultant about how to keep doing so. Many hospitals offer return-to-work classes and support groups for breastfeeding moms.