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Discharge Instructions for your Newborn

1. Feeding: Nursing or Bottle-fed

a. If you chose to nurse, you need to feed your baby about every two to four hours. You can tell if he or she is getting enough breast milk because you will be changing your baby about four or five times a day. If the baby only requires one diaper change a day, then I suggest that after nursing you add regular unsterilized water to meet the baby's liquid needs. You can use a medicine cup or syringe to substitute for a bottle to avoid any confusion for the baby. If you choose to regularly supplement the baby with formula you can decrease your body's ability to produce enough milk later. Colostrum is an important fluid in the first days of the baby's life. Don't be alarmed if your primary milk is not available for a few days.

2. Safety Seat

a. Your baby should not be carried in the car unless she or he is in an infant safety seat. The baby will face backwards in the car for the first 24 months of life. Do not use the front passenger seat of the car if there is an air bag on the passenger side.

3. Jaundice (yellow skin)

a. It is common for there to be some yellowness in the baby's skin during the first week of the baby's life. For most babies, the yellowness will be barely noticeable or in face. You must make the decision about jaundice based on natural light even on a cloudy, rainy or foggy day. Artificial lights make the skin appear yellow so please don't call with the concern of jaundice at night because indoor home lighting makes us look more yellow. If the skin on the chest or tummy seems yellow please call.

4. Temperature

- a. Normal temperature is 97° to 99°. You should measure the temperature only if you think your child is ill and calling for advice. Using a rectal temperature takes only one minute to read whereas the axillary temperature (under the arm) can take four or five minutes. Don't use an ear thermometer under six months of age. I don't recommend pacifier or forehead thermometers.
- b. Axillary temperature is one degree below core temperature (rectal) so 99° axillary can be converted to 100° rectal. I consider 101° to 105° rectal temperature a true fever.

5. Office Follow-up

a. The first follow-up appointment should be within three to five days after leaving the hospital unless other instructions are given. Please call the office during the business hours for the first appointment, the first weekday following discharge.

6. Umbilical Cord

a. The umbilical cord has a plastic yellow clamp affixed while the baby is in the hospital. The nurses will remove the clamp on or before the baby's discharge home. Apply regular rubbing alcohol on a saturated cotton ball to the cord about four times a day. Don't use a Q-tip or alcohol pad because we want lots of alcohol to enhance evaporation. Make sure you apply the alcohol to the area where the cord attaches to the baby not just the top part.

7. Circumcision

Circumcision may be considered by parents for some boys. If you have made that decision, I will refer your child to an urologist or your obstetrician who may perform the procedure. I recommend Drs. Ambati or Beniwahl if an urologist is selected. Contact them at 321-2800.

8. Doctor Availability

a. If you think there are significant problems with the baby you can call the office 559 538-3070. (I have an extensive amount of well and sick child information on my Web site – www.marksimonianmd.com. The information is available for call group and my patients.)