# **Baby Medical Care**

# **Medical Care Given at Birth**

# **Treatments**

# **Vitamin K injection**

A shot given to boost your baby's level of vitamin K and prevent serious bleeding. If you don't want your baby to receive an injection, vitamin K can be given by mouth.

# **Eye treatment**

An antibiotic ointment used to prevent your baby from getting an infection when certain bacteria from your vagina get into his eyes during delivery. Left untreated, some infections can cause blindness.

# **DID YOU KNOW**

You have the right to say no to any treatment you don't feel comfortable with. But get all the information first. Talk with your health care provider if you have questions or concerns.

# **Screenings**

# **Newborn screening**

A blood sample taken from a prick in your baby's heel to see if he requires further testing for rare but serious disorders. Early treatment can prevent developmental delays, growth issues and life-threatening health problems. If the screening result is positive, it doesn't mean that your baby has a disorder – only that he may need testing to find out for sure. Screening is done before you and your baby leave the hospital, or at home by your care provider if you had a home birth.

# **TRY THIS**

While your baby's blood is being taken, comfort him and help reduce his pain with skin-to-skin cuddling or breastfeeding.

# **Early hearing screening**

Testing done in hospital, at public health offices and community hearing clinics. Because hearing can change, it's important to have your child re-checked if you have future concerns about his hearing, speech or language development.

# **DID YOU KNOW**

If your baby doesn't pass the early hearing screening, he'll need further testing. But it doesn't mean that he has hearing loss.

# **Optional interventions**

# Circumcision

Surgery to remove the foreskin covering the head of the penis. Although not recommended by the Canadian Pediatric Society and not covered by the Medical Services Plan, you may choose to circumcise your child based on your own beliefs and customs. Remember that your child can choose to get circumcised later in life.



# **Immunization**

# What is immunization ("inoculation" / "vaccination")?

Protecting your child from a disease before it has a chance to make him sick.

### How it works

Immunizations help keep us healthy by causing the immune system to make proteins ("antibodies") that fight germs. When you immunize your baby against a certain disease, she develops protection against it.

# Why immunize

Immunization is the best way to prevent your child from getting serious diseases including:

- measles and German measles ("rubella")
- mumps
- hepatitis B
- · diphtheria
- tetanus
- whooping cough ("pertussis")
- polio
- meningitis
- chicken pox ("varicella")
- HPV-related cancers
- flu ("influenza")
- rotavirus

Some of these diseases are now rare in Canada, thanks to immunization. But the germs that cause them still exist and can make any child who isn't immunized very sick.

# **DID YOU KNOW**

When you immunize your child, you're also protecting the wider community. When more people are vaccinated, disease can't spread as easily and those most at risk – the elderly and babies too young for vaccination, for example – are safer.

# When to immunize

It's important that your baby gets her immunizations on time. Some are given once or twice; others are given in a series.

Children in British Columbia are usually immunized at 2, 4, 6, 12 and 18 months and at 4 to 6 years, 11 years (Grade 6), and 14 years (Grade 9). Immunization schedules can change, though. Talk with your doctor or public health nurse, visit immunizebc.ca or call HealthLink BC at 8-1-1 if you have questions.

# **TRY THIS**

Breastfeed your baby or simply hold her skin-to-skin before, during and after an immunization. Being held close will give her comfort, sucking will distract her, and your milk has substances that can naturally calm her and reduce her pain.

# The flu shot

Children 6 months and older and their caregivers should get the influenza vaccine each flu season. Young children are at a higher risk of becoming seriously ill if they get the flu.

# TRY THIS

Use the Child Health Passport (available through your public health nurse) or the immunizebc.ca app to keep track of your child's immunizations.

## Is it safe?

Immunization is very safe. Some may cause soreness or slight fever, but these side effects are minor and usually last only 1 or 2 days.

# **DID YOU KNOW**

Serious side effects to immunizations (such as high fever) are very rare. Choosing not to immunize is much more dangerous, since the risks of the disease are far greater than the risk of side effects.

# **Common Health Concerns**

# Ear infection

The most common cause of hearing problems in very young children.

# How will you know?

If your baby has an ear infection, she may:

- be fussy
- have pain
- put her hand or fist to her ear
- · have a fever
- · have fluid leaking from her ear
- · have trouble hearing

# What can you do?

See your health care provider right away if your baby has any of these symptoms.

# **DID YOU KNOW**

Babies who live in homes with cigarette smoke get more ear infections.

# Crossed ("wandering") eyes

A normal occurrence in the first 6 months.

# How will you know?

Your baby may have wandering eyes if her eyes cross constantly, or if they continue to cross after 6 months. Children with a family history of crossed eyes are more likely to be affected.

# What can you do?

Contact your health care provider or HealthLink BC at 8-1-1.

# **Thrush**

An infection that happens when a yeast normally found on the body ("candida") grows out of control.

# How will you know?

If your baby has thrush, she may:

- have white patches in her mouth or a red rash in her diaper area
- refuse to breastfeed
- · have slow weight gain
- be gassy and cranky

# What can you do?

Thrush can be treated by putting antifungal cream on the infected area. Since breastfeeding mothers and babies can pass the infection back and forth, both need treatment. Thrush is usually not serious, but you should see your health care provider.

# **TRY THIS**

If your baby has thrush, regularly replace her soothers, bottle nipples and any other items she puts in her mouth, or boil them for 5 to 10 minutes each day.

# **BE AWARE**

Health Canada warns that gentian violet (also known as crystal violet) can increase the risk of cancer. If you're breastfeeding, don't use it to treat thrush or any other condition.

# High temperature / fever

# **DID YOU KNOW**

Armpit measurements are often easiest with babies, but they're not always accurate. Even if your baby has a "normal" armpit temperature – 36.5 to 37.5°C (97.8 to 99.5°F) – she may have a fever. Watch your baby for other signs and symptoms.

# How will you know?

If your baby has a fever, she may:

- be flushed, pale, sweaty or hot on the back of her neck
- feed poorly
- be uninterested in things she usually enjoys
- be extra sleepy

## **HOW TO**

Check your baby's temperature

- 1. Put the tip of a digital thermometer in the middle of her armpit.
- **2.** Tuck her arm snugly against her body.
- 3. Comfort and distract her.
- **4.** Gently remove the thermometer when it beeps.
- 5. Check under the other arm.

**Don't** use a mercury (glass) thermometer (which can be dangerous), or forehead strips, pacifier thermometers or ear thermometers (which are less accurate). Rectal temperatures are very accurate, but only use this method if you have a thermometer that's meant to be used in the rectum, if you've been taught how to use it safely by a health care provider, and if you feel comfortable doing so.

Method	Normal temperature range
Armpit	36.5 to 37.5°C (97.8 to 99.5°F)
Ear	35.8 to 38°C (96.4 to 100.4°F)
Mouth	35.5 to 37.5°C (95.9 to 99.5°F)
Rectum	36.6 to 38°C (97.9 to 100.4°F)

# What can you do?

If your baby shows signs of fever or if her temperature is above the normal range shown on the chart, speak to your health care provider or call HealthLink BC at 8-1-1. Let her breastfeed more (or give her more to drink), and take off any extra clothing she's wearing.

Acetaminophen (Tylenol) can help. Talk with your health care provider or call HealthLink BC at 8-1-1 before giving it to your baby, then follow the package directions.

If your baby is less than 3 months old and has a fever, see your health care provider right away to make sure it's not a sign of a more serious illness.

**DANGER** 

Never give your baby aspirin or anything else containing acetylsalicylic acid (ASA), which can damage her brain and liver. If your baby is less than 6 months old, talk with your health care provider before giving her ibuprofen (Children's Advil or Motrin). Always check with your health care provider before giving your baby any medication.

# **Food allergy**

A potentially dangerous reaction to food.

# How will you know?

Symptoms of an allergic reaction can be mild to severe. They often show up within minutes of eating the food. Your baby may get hives, swelling, redness, rash, stuffy or runny nose or itchy or watery eyes. She may cough or vomit.

Once a person has a food allergy, a reaction will happen every time they eat that food.

Over time, though, some children outgrow some allergies. Your child's health care provider can help you determine if this is true of your child.

# What can you do?

Stop giving your baby any food you think she might be allergic to and talk with your health care provider.

# **TRY THIS**

Help prevent allergies by breastfeeding. See Understanding Food Allergies to learn more about how to introduce common food allergens into your baby's diet.

# MEDICAL EMERGENCY Call 9-1-1 immediately if your baby has any of the following:

- swelling of her mouth, tongue or throat
- · hives that are spreading
- · trouble breathing or swallowing
- · repetitive coughing or wheezing
- a hoarse voice or cry
- pale or bluish face or lips
- faintness or weakness or has passed out









## **Jaundice**

A yellowing of the skin and the whites of the eyes caused by too much bilirubin in your baby's blood.

# How will you know?

Jaundice usually appears on the face and chest during the first week and lasts a few days. In most cases, it will go away with extra feeding. Your baby may be checked for jaundice before you leave the hospital. Your health care provider will also check during follow-up visits after the birth.

In rare cases, jaundice is severe and, if untreated, can lead to long-lasting problems. Call your health care provider right away if your baby seems sleepy and refuses to drink and if his skin or the whites of his eyes look yellow.

# Diaper rash

A red, painful reaction in the diaper area caused by dampness, a yeast infection, soap, perfume or oils.

# What can you do?

You can help ease diaper rash by:

- changing diapers as soon as they're wet or dirty
- cleaning with warm water without soap, drying well, and using a thin layer of zinc-based cream
- letting your baby go diaper-free a few times each day
- using unscented detergents and wipes
- · adding vinegar when you wash cloth diapers
- · not using plastic pants

Contact your health care provider if the rash lasts longer than 5 days, if it's mainly in the skin creases, or if there are blisters, pus, peeling or crusty patches.

### Other rashes

# How will you know?

In the first few weeks, your baby may have tiny white raised dots on his face ("baby acne"). In the first few months, he may get blotchy red pinpoints on his body.

# What can you do?

Both will clear up on their own. Call your health care provider if a rash suddenly becomes red and itchy and oozes fluid.

You can soothe your baby's skin by:

- · keeping him warm but not hot
- giving him short baths in lukewarm water every second or third day only
- dressing him in cotton
- moisturizing him with a small amount of non-medicated, unscented lotion
- not using perfumed soaps, lotions or fabric softeners

# **DID YOU KNOW**

The less product you put on your baby's sensitive skin, the better. Test a small amount on your baby first, then use as little as possible. Talk with your health care provider about what products might be right for your baby.

# **Cradle cap**

# What can you do?

A bit of scaliness on your baby's scalp is normal. If it's crusty, try rubbing in a drop of unscented oil. Then gently brush out the scales and wash the oil off well.

# Coughing and sneezing

Your newborn will cough and sneeze to clear his nose and lungs, but this doesn't mean he has a cold. Don't give him cough or cold medicine unless recommended by your health care provider.

# Constipation

# How will you know?

Once they're a few weeks old, some babies will poop every day, while others will go once a week. Both are normal. It's also normal for your baby to grunt and get red in the face when he poops, even when he's not constipated.

# What can you do?

See your health care provider or call HealthLink BC at 8-1-1 if:

- your baby is less than 2 weeks old and he poops less than twice a day
- his poop is dry and hard or he has trouble passing it for more than a week
- there's fresh blood in his poop

Laxatives, suppositories and enemas should only be used if prescribed by your doctor.

DID YOU KNOW

A baby who's only breastfed rarely gets constipated.

# **Vomiting**

# How will you know?

Most babies spit up. Spit-up rolls out of the mouth, sometimes with a burp, and doesn't usually bother a baby.

Vomiting is much more forceful. And if your baby is throwing up more than a few tablespoons of liquid, he may become dehydrated.

# What is projectile vomiting?

Milk or formula ejected very forcefully in an arc – sometimes over a distance of several feet. Projectile vomiting usually happens right after a feeding, but can happen hours later. In some cases, it means the passage between your baby's stomach and intestines is too small ("pyloric stenosis"). This can be fixed, but needs immediate medical treatment.



# **MEDICAL EMERGENCY**

See your health care provider right

- your baby can't keep fluids down or seems dehydrated
- there are streaks of blood in the spit-up
- spitting up causes your baby to choke, gag or turn blue
- · your baby is projectile vomiting

### Diarrhea

# How will you know?

If your baby's poop is watery and bad-smelling, he may have diarrhea. Usually, you can treat him at home by giving him plenty of human milk, or formula if he's being formula fed.

# MEDICAL EMERGENCY

When diarrhea leads to dehydration, your baby can become very sick, very quickly. Get medical help right away if your baby:

- is very sleepy and hard to wake up
- has a very dry mouth and tongue
- has very dry eyes, with no tears or fewer tears than normal
- is peeing less than usual, with fewer than
   4 wet diapers in 24 hours
- has a soft, sunken spot on his head
- has a faster heartbeat
- has sunken eyes
- · has greyish skin





# Flat areas on the head

Because your baby's skull is soft, he can get a flat area if he always rests on the same part of his head. This will likely go away on its own.

# What can you do?

You can help avoid flat areas by:

- having supervised tummy time several times a day while your baby is awake (see Healthy Habits)
- using different positions to hold your baby
- placing him with his head at one end of the crib one day and at the other end the next day (always on his back)
- limiting time in a bouncy seat, infant swing, stroller and car seat to 1 hour

# A flat area on your baby's head won't affect his brain development.

# TRY THIS

If you're driving a longer distance, take breaks so you can take your baby out of the car seat every hour.