

Preparing for Baby's Arrival

Parents devote considerable time, energy and financial resources to becoming well informed about many aspects of infant and child care. Useful information is communicated via word of mouth and countless books, periodicals, classes, and web sites. These clinically sound practical tips are different from those found in the popular media, because they are a synthesis grounded not only in evidence based nursing practice, but also in extensive hands on professional experience helping expectant and postpartum families achieve maximal wellness at home. We hope some of this information helps make those first days at home go by happily and smoothly. For additional detailed information, including telephone numbers and web site addresses, please refer to our Prenatal-Postpartum Resource Guide.

There are many things you can do before your baby's arrival to save precious time and reduce the stress and exhaustion that usually accompany baby's first days and weeks at home. Whether you are expecting a first baby or expecting to learn some new things before the birth of a later child, preparing for new experiences can make a difference.

Classes

Classes that are frequently updated and provide current information help parents save time and prevent injury and illness. Parents taking classes on infant and child safety, first aid, breastfeeding, infant massage and many other topics become relaxed, confident, empowered, healthy parents of healthy infants and children. Both parents benefit greatly from all the classes noted above. Supportive, encouraging dads who understand breastfeeding set mom and baby up for a wonderful, successful breastfeeding experience, and give their sons and daughters the healthiest possible start in life, and many benefits that last a lifetime.

CPR classes including information on infant and child CPR are especially important, and can be taken in many community settings or in a small group of your choice in your home. This can be surprisingly affordable. You can get family, friends and anybody who may be caring for your baby together for a CPR party—a small class where everybody gets plenty of individual help and attention.

Parent Groups

- ***The Parent Connection***, formerly known as Las Madres, is a terrific parent resource network sponsored by Scripps. It provides many services, including an information-packed monthly newsletter, neighborhood playgroups, group activities, outings, tours, parties, educational lectures and workshops, and even family swap meets. It's a nice way to get to know others who live nearby and have one or more children close to your child's age. Call the Parent Connection or 1-800 Scripps (1-800-727-4777) for a free sample newsletter and a membership application. Membership fees are \$20.00 a year or \$36.00 for two years, and, if you like, you can join before your baby is born.

- ***The Scripps Mothers of Twins Club*** has been providing a valuable service to the community since 1981. It welcomes parents who have or are expecting twins or

multiples, and provides support, education and fun for parents with twins or multiples. It offers a resource library on multiples, a Big Sister program, a monthly newsletter, seasonal parties and semi-annual sales of baby items.

Organizational Tips

• ***Laundering baby's clothing and linens.*** Parents who launder and put away most of the baby clothing and linens before baby is born say how glad they are that they didn't wait. A special baby laundry detergent may be a good choice if sensitive skin runs in the family. Most babies have skin that is not irritated by whatever laundry products are used for other family laundry. If you suspect that a laundry product is causing your baby to have a rash, try discontinuing the use of fabric softener and strong detergents, and switching to a detergent made specifically for baby laundry.

• ***Storing baby's clothing and linens.*** Baskets, boxes and drawer dividers help keep baby's drawers nice and neat. It's not unusual for babies to outgrow some of their clothing before wearing it even once. Small plastic closet dividers that fit over the clothes pole (like the ones seen in department stores) can organize all those outfits by size, so that you know at a glance what fits and what's too big or too small. When you consider how many complete changes of clothing a baby may need in one day, it's a great timesaver! There's no need to waste time and energy rummaging through messy drawers and hunting for size labels, when you can hang clothes up, all organized according to size. As baby grows, separating outgrown items and storing them together helps keep things neat and uncluttered.

• ***Making papers easy to retrieve.*** Well before your baby is born, you will accumulate a rapidly growing collection of information sheets, brochures and pamphlets from health care providers, hospitals, class instructors, businesses, and others. This collection will expand and grow for about 21 years!

One easy way to organize papers you want to keep is to get a thick looseleaf notebook, and plenty of dividers and top loading sheet protectors and a second, thinner looseleaf notebook to take to the hospital for organizing the many papers you'll receive there.

After you get home, the thin notebook can be recycled to hold things you may want to take to medical appointments, like your baby's immunization record, appointment and business cards, medical business cards, appointment cards, your list of questions, forms that need a signature from pediatric office staff, and other information needed at or received at medical appointments. One notebook can organize materials for one or more infants and children.

• ***Screening baby names*** for ones you may wish to avoid can be helpful. Books and web sites for popular pet names may list some names to eliminate from consideration.

Tips on Finding Safe, User-friendly Baby Furniture, Supplies and Gifts

There are many characteristics, features and functions to consider when selecting furniture, supplies and gifts for babies. Safety considerations override all others.

Recalled items are hardly ever for sale in catalogs or retail stores, but it's good to double check, just in case. The web site of the Consumer Products Safety Commission ("CPSC") is the most useful source of safety information on the web. It's great for checking every single item used by, for or around your infant or child. It saves shopping time and prevents the hassle of returning questionable items. Parents are strongly encouraged to subscribe to the CPSC mailing list. This service can prevent injuries and save lives by giving consumers timely notice of hazards and recalls.

Tips on Safe Sleeping for Little Babies

- **Positioning.** The "Back to Sleep" campaign is well known for greatly reducing the number of Sudden Infant Death Syndrome ("SIDS") deaths in the U.S. You may still see some people positioning healthy, full term babies on their sides for sleep. People who do this may not be aware of the most current information. Side lying is fine for playtime, when you're watching your wide awake baby, but when he sleeps, he should be on his back. Lying on the back is twice as safe as lying on one side or another. One reason is that the side lying position can be unstable, and a baby can easily roll onto his tummy. Sleeping in another position is okay only if your baby's pediatrician orders it for a serious medical reason.
- **B.Y.O. bedding.** The baby's whole sleep environment, whether at home, at someone else's home, in a day care setting or in a hotel or motel, should be carefully planned to reduce the risk of SIDS. That may mean bringing safe, correctly sized bedding along whenever your baby sleeps away from home.
- **No soft bedding.** That means that soft bedding, including thick blankets, quilts, bumper pads, sheepskins, pillows, and stuffed toys should be avoided, and should not be in the basket, bassinet, crib or other sleeping area. A thin blanket tucked in snugly at the foot of the bed is recommended.
- **Sheets should fit snugly,** and be neither too tight nor too loose. Poorly fitting sheets can come off of the mattress too easily, and infants and children can get entangled in them. A mother whose son suffocated while entangled in a loose sheet designed some safety crib sheets, which slide onto the mattress like a pillowcase and have a flap with a hook and loop closure. They come in a variety of sizes and are sold online.
- **Avoid excessive warmth.** The sleeping area should be comfortable, around 70°F. A baby should not be overdressed to the point that he is hot and sweaty. Lightweight, snug fitting sleepers are ideal for the warmer months. Blanket sleepers are recommended for cooler months, instead of a thick quilt or blanket.
- **Bassinets and Moses baskets** can provide cozy, adorably sweet, portable sleeping environments for your baby while he's so tiny that he can sleep there surrounded by plenty of space. When he gets bigger, his face can easily end up next to the side or top of the sleep space, potentially making breathing more difficult. It's important for baby to move up to a bigger bed when he gets bigger. If you have two babies, it's safest to

transition to two baskets or bassinets as soon as the babies are bigger and sleeping either close to each other or close to the side or end of the basket or bassinet.

- ***Co-sleeping baby beds*** are designed to allow baby to sleep close to mom and dad while protecting him from overlying and from falls. There are many pros and cons. Babies love being close to mom and dad, and some babies decide early on that a little bed attached to mom and dad's bed is much too far away, and are not able to settle down and sleep in the co-sleeper bed. The co-sleeper beds tend to be big. The bed forces the adjacent parent to crawl to the bottom of the bed to get out of bed, so positioning it next to a mom who is recovering from a cesarean section is not recommended.
- ***Cribs and playpens at home or away from home*** should meet the criteria that are most important to you. First, they should meet all safety criteria on the CPSC and National SAFE KIDS Campaign web sites.
- ***Smoothly operating, quiet drop sides.*** Cribs with two drop sides are most convenient to position. Sides that can be raised smoothly, quietly and with one hand are nice, because they allow you to lower the side, set a sleepy baby in bed, and raise the side without waking her up. Some cribs without drop sides have sides with hinged upper sections that fold down, and could possibly pinch fingers and hands. Those cribs are not recommended.
- ***A mattress that's quick and easy to change*** will save precious time. The later the hour, and the more you will appreciate this feature. Sometimes the crib design or items attached to the crib ends or sides can slow the process severely.
- ***A mattress that lowers quickly and easily.*** Some babies as young as 4 or 5 months of age amaze us all by learning to pull themselves up to a standing position. When you see a baby moving in that direction, it's time to lower the mattress right away. With many cribs, that process is quick and easy, but some cribs are designed so that lowering the mattress requires tools and an hour or so of your time.

Tips on Safe Seating For Babies

Please see the section titled "Other Important Safety Resources" in our Prenatal-Postpartum Resource Guide for access to a wealth of information from local and national safety programs and organizations. This detailed information can help keep your baby safe in the car, in airplanes, in strollers and baby carriages, at home, and away from home. Check out the listings and make an appointment for a free local car seat checkup, to make sure yours is installed correctly, and to make sure your baby is strapped in correctly. Most car seats are incorrectly installed, and/or incorrectly used.

Make sure the seats your infant uses are designed to recline slightly, and keep his head and neck stable and comfortable. Car seats that are too vertical cause the baby's head to slump forward and bounce around when the car is in motion. You can read more about the correct angle of recline for rear and forward facing car seats in the Technical

Encyclopedia on the www.carseat.org web site, which also features online car seat checkups.

Young babies who haven't quite begun to sit up all by themselves quickly tire of swings and high chairs that are too vertical. High chairs and swings with adjustable backs are nice for young babies. Babies as young as four or five months of age may love to keep you company at your level in a high chair or swing, while you eat a meal or sit at a desk or table next to them. Babies have great fun with swings and high chairs equipped with interesting toys that snap onto the tray. Multi-speed musical swings can be very soothing.

- ***Bouncy seats*** are very popular with babies and parents. To prevent falls, when baby is in the seat, never carry it or set it on a bed, chair, counter or table. Keep it on the floor. To prevent suffocation and choking, never put more than one baby in a seat. Seats with lots of features, like a toy bar, lights and music are wonderfully entertaining. Vibrating bouncy seats can help babies relax enough to fall asleep.

Other Supplies and Furniture

- ***Baby monitors*** with speakers that work while plugged in or with batteries can help parents hear baby and respond in a timely manner. Some speakers are small enough to tuck into a pocket and carry around. Baby monitors do need to be thoroughly tested throughout your home and possibly in the yard as well. Some monitors don't have a long enough range to work in a big house. Others won't work in homes with lots of computers and electronic equipment. Others just won't work at all. Since there's a chance you may be returning the monitor, buy it at a local store, save the receipt, open the box very gently and carefully, and save the packing materials until you've checked it out.

- ***Supplies for taking rectal temperatures*** are good to have on hand right from the start. A digital rectal thermometer is the safest, most accurate thermometer for an infant up to three months of age. If you think your baby may be ill, you'll want to use it before calling the pediatrician. Disposable plastic probe covers, made of thin plastic film, slide over the thermometer and protect it from fecal contamination. They are available at bloodcurdling expense at drug stores and much less expensively at medical supply stores. A little water soluble lubricant can make insertion as gentle and comfortable as possible.

- ***Parents say they're glad they have ample supplies*** of burp cloths, small, thin baby washcloths, small bibs or disposable bibs, size small, diaper container refills, 100% cotton balls and disposable diapers. It's hard to have too many of these on hand. To save lots of time, consider storing stacks of some of these items in baby's room, and in various places around the house—washcloths in bathrooms and the kitchen, bibs in the kitchen and next to the feeding area, burp cloths next to the feeding area and in the kitchen, where you can use them as baby towels to gently pat baby's face and hands dry after washing. It's nice to have liquid baby wash in a plastic dispenser bottle at the kitchen

sink, bathroom sink and next to the bathtub. Multiple fully stocked diaper changing areas are great timesavers. Consider one in baby's room, another in a bathroom with plenty of counter space and another at some other convenient location.

- Many people are surprised to learn that wearing ***sunglasses*** that protect your child's eyes from all forms of ultraviolet light (UVA, UVB and UVC) can prevent the development of several pediatric and adult eye problems. Unprotected exposure to ultraviolet light can stimulate the development of growths on the surface of the eye in toddlers, children, adolescents and adults. Some can be removed surgically, but they may grow back. They can become red, irritated and quite uncomfortable. Sunglasses protect against macular degeneration, the greatest cause of blindness for those over sixty years of age. Sunglasses also help prevent the development of cataracts, and eliminate the need for cataract surgery. Sunglasses help prevent skin cancer of the eyelids and tumors inside the eye.

Careful selection of sunglasses is important. Infant and child sunglasses should have frames and lenses that won't shatter or break into sharp pieces. They should fit very well. Wraparound styles protect the front and the side of each eye. The lenses should have complete blockage for all ultraviolet radiation and light with a wavelength under 400nm. An ophthalmologist, optometrist or optician who has a photometer can check the sunglasses to make sure they offer the protection your child needs. Wide brimmed hats for babies and toddlers offer additional protection.

- ***Safe, quiet, comfortable chairs for parents*** to use when for rocking, feeding and soothing baby are very helpful. It's good to have one in the baby's room, and to have one or more others elsewhere. Glider rocker and ottoman sets are very popular. An overstuffed swivel rocker with matching ottoman is another comfortable choice. Some recliners are not recommended, because they can entrap and pinch hands, arms and legs. Babies also love to be held by an adult sitting outdoors in a glider or porch swing.

- ***B.Y.O. Pillows.*** When shopping for a new glider rocker or other chair, take your breastfeeding pillow(s) along in a tote bag. Try the pillow on, (difficult as that may be when pregnant) and make sure that you're comfortable sitting in the chair with the pillow in place. Some expectant moms discover that they're much more comfortable breastfeeding baby on a sofa or a chair they already have. Breastfeeding two babies at a time is easiest on a sofa, a very wide upholstered chair or in bed. A nursing stool makes feeding time more comfortable for many mothers by elevating the lap for better positioning and reducing muscle tension in shoulders, arms, back and legs.

Diaper Changing Supplies

- ***Diapers.*** Cloth diapers are preferred by some parents, because they don't use up landfill space. Since washing cloth diapers at home can contaminate your washer and dryer with feces, a good diaper service would be nice, but most of them have gone out of business. Most parents choose ultra-absorbent disposable diapers that wick moisture away from baby's skin. Hook and loop style tabs are better than tape, because they can easily be refastened at any time, and work well even when baby lotions and creams are

spilled on them. Diapers with elasticized tabs or waistbands can provide a fit that is snug, yet comfortable. If you remove a wet ultra-absorbent diaper, and your baby's skin looks like someone has sprinkled it with salt crystals, there's no need for an emergency call to the pediatric urologist. Wet or very wet ultra-absorbent diapers sometimes leave crystals on baby's skin. Of course any time your infant appears ill, you will want to contact her pediatrician or nurse practitioner. After removing the diaper, you can turn it into a neat little package by rolling it from front to back, and then securing each end of the roll by fastening each tab.

Small babies who have a high fluid intake and also sleep for long periods at home or in the car or stroller can soak the most absorbent diapers and spring a leak. Highly absorbent insert pads that create a double diaper effect can be set inside a diaper for extra absorbency. They are sold at grocery stores. Thicker, more absorbent overnight diapers are available for older babies. Swim diapers are very convenient for the pool. Just rip them off and throw them away after use.

- ***Diapers striped on the inside with petrolatum and zinc oxide*** are more expensive than many other diapers, but may be a good choice for a baby with extremely sensitive skin. While they're worn, they deposit a thin, invisible protective layer of petrolatum and zinc oxide on baby's skin. It's almost as if the diapers contain tiny elves with paintbrushes, energetically painting baby's skin with petrolatum and zinc oxide.

When you buy disposable diapers, save the receipts. If your baby grows into a larger diaper size, you can take unopened packages of the smaller diapers back to the store. Diaper coupons can be found in the Sunday newspaper, in other periodicals, and on diaper company web sites. Many parents ask friends and relatives without babies to save diaper coupons for them.

- ***Cotton balls (100% cotton for maximum absorbency)*** and warm water provide a very gentle way to thoroughly remove irritating feces from baby's diaper area. Unlike baby washcloths, they don't create a major laundry problem. If the changing area is not in the bathroom, you may want to use a new disposable 8 or 9 ounce cup every day and as needed for carrying warm water to and from the changing area. Parents who don't like the occasional cotton fibers that cotton balls may leave on baby's skin sometimes buy 4" x 4" gauze pads at the drug store or medical supply store and use them instead.

- ***Soft, cloth-like paper towels.*** When moist with warm water, they make gentle disposable washcloths for cleaning up faces, hands and diaper areas.

If you and your baby aren't allergic to latex, ***smooth, well fitting, unsterile, disposable latex gloves*** can save valuable time. (If allergies are a problem, latex free gloves are available.) Gloves are handy for messy jobs like changing diapers, applying creams, wiping little noses and even pumping gas. If you wear a glove or two, you'll still wash your hands after the diaper change, but you can avoid the extra twenty minutes it can take to scrub feces, cream, ointments and whatever out from under your fingernails. It's

helpful to keep some gloves in the diaper bag some in the car, and even a few in your pocket. Latex gloves are sold in every drug store.

- ***Baby wipes***, however gentle and free of irritants they may be, are often quite irritating to young babies' sensitive skin. As babies get older, their skin toughens up a bit, and they may develop a greater tolerance for baby wipes. Baby wipes are certainly handy to use when you're out and about and changing diapers. They also can be used to clean up a toddler's sticky hands. You may want to keep a small quantity of wipes on hand, and get more later if your baby has or develops tough skin.

- ***Disposable changing mats*** or plain old paper towels are nice for protecting linens on the changing table at home, and for providing a disposable landing spot for diaper changes away from home. The prefolded paper towels that come in a box or are sold in bulk at warehouse stores are easy to handle when you're on the go. It's good to have a mat, blanket or towel you can machine wash and dry, preferably one with a recognizable up side that goes next to baby and a down side that overlies the diaper changing surface. After use, if you fold or roll it with the clean side in and put it in a plastic bag before returning it to the diaper bag, you'll protect the contents of the bag from bacteria and viruses it may carry. When you get home, you can discard the plastic bag and toss the mat, blanket or towel into the washer.

Immediate disposal of used diapers is made quick, easy and odor free by double wrapping the diaper in a free plastic carrying bag from the grocery store. Here is one quick way. 1. Drop the folded diaper into the bag. 2. Twist the bag tightly closed above the diaper. 3. Grab the open top edges of the bag, and pull them downward, creating a skirt-like double layer of plastic over the diaper. 4. Hold the wrapped package you're making so that the twisted part is located below the diaper. 5. Grab the open edges of the plastic bag again, and twist the bag closed. Tie the twist into a tight knot. You should end up with a double wrapped diaper with a twist at the "north pole" and the "south pole."

For neat and compact storage of empty bags, just fold or roll each bag into a tiny package, and stuff it into the end of a clean, empty paper towel roll. Then you can add another and another. One paper towel roll can hold many bags.

- ***Barrier creams and ointments*** can help prevent and treat diaper rash. Ultra-absorbent diapers effectively wick most urine away from your baby's skin, but they can't protect his skin from feces. If your baby has sensitive skin, you may want to protect his little bottom from feces by applying a thick layer of a barrier cream or ointment. Diapers wet with urine still need to be changed frequently to prevent skin irritation. Prolonged exposure to urine can be particularly irritating to the area around the urinary meatus at the tip of the penis, whether a baby boy is circumcised or uncircumcised. If any diaper rash is no better in 48 hours, blisters or pus are present or you're very concerned, speak directly with your pediatrician during daytime hours, or make an appointment for a same or next day office visit. When you make the appointment, explain that treating the rash at home has not worked.

- ***Before applying these products***, the skin should be cleaned with fresh, clean, warm water and patted dry. Cotton balls provide a clean, gentle way of cleaning the skin with water and patting it dry.
- ***A good time for cord care is right before a diaper change***, and right after you wash your hands. If your pediatrician recommends that you clean the stump of the umbilical cord with alcohol, cotton balls can make the job quick, easy and effective. Here's one way to do it. Wash and dry your hands. Wearing unsterile gloves, use a cotton ball like a stopper at the top of the open bottle of alcohol and invert the bottle. Then remove the cotton ball and re-cap the bottle. Next, hold the cotton ball over a wastebasket and squeeze out the excess alcohol. Then hold the stump in a vertical position with one hand, and thoroughly clean the stump and the skin at its base with the alcohol-moistened cotton ball.
- ***Applying thick creams and ointments*** is fastest and easiest if you use a gloved finger or two. These products do not need to be removed at each diaper change, and rubbing and scrubbing can be irritating. Apply more barrier cream or ointment to the diaper area as needed. The thicker the layer of cream or ointment, the more effective the barrier will be.
- ***Products in tubes*** are protected by the tube and stay cleaner than those in jars or tubs.
- ***Keep tubes neat and easy to handle*** by rolling the end and securing the roll with a binder clip from the office supply store.
- When used as directed, Diaper rash ointment or cream can help prevent and treat the most common type of diaper rash, ***irritant diaper dermatitis***, which can be caused by wetness and/or urine and/or feces. Common ingredients include varying percentages of zinc oxide and/or Vitamins A and D or an oil rich in vitamins A and D. Some products stay on skin better than others. The ones that stay on well are more difficult to remove from skin and clothing. Scents range from odor-free to baby powder to fishy. Some products contain talc, linked to ovarian cancer in some studies.
- If your pediatrician recommends applying ***petroleum jelly*** to your baby boy's healing circumcision site, it's a good idea to use it as a barrier cream, too, until the circumcision site has healed, so that other creams and ointments don't accidentally get rubbed onto the circumcision site.
- ***Creams and ointments containing steroids*** can cause or exacerbate problems, and should be used in the diaper area only if recommended by baby's physician or nurse practitioner. Use precisely as directed. If you have questions about the directions, speak with your pediatrician, nurse practitioner or pharmacist.
- ***Veterinary ointments*** are not recommended for the diaper area. They are intended for use on livestock and pets. A little internet research or a question to your pharmacist will

let you know whether the Food and Drug Administration has approved a product for use on human beings, and if not approved, why it was not approved.

- Sometimes babies get another kind of diaper rash, *candidal diaper dermatitis*, also known as a yeast infection. This is common in babies who are taking antibiotics or who have thrush (a yeast infection of the mouth). Typically the affected area is beefy red, and you may see little red or scabbed dots of rash, called satellite lesions, around the perimeter of the rash. Candidal diaper dermatitis can be treated with over the counter antifungal creams or ointments.

- ***Disposing of used diapers*** can keep you busy. Two "diaper systems" are quite popular. Isn't it interesting that our parents and grandparents used diaper pails, and now parents use "diaper systems?" Both types of containers remain relatively odor-free if emptied about once a day. Fortunately, the stool of exclusively breastfed babies has a very minimal odor; so many parents can "breathe easy" until other things are added to baby's diet. That gives you time to perfect your breath holding and mouth breathing skills.

You may wish to consider the cost of refill cartridges or bags, time and hassle required for changing the cartridge or bag, and odor transfer to air, hands and arms during the emptying process. Misplacing the instructions can make one feel "diaper system challenged." Fortunately, product web sites either have instructions you can print out, or customer service departments you can contact.

- ***Changing tables.*** The bigger the changing surface is, the longer your child will fit onto it. Safety features designed to prevent falls, like elevated sides and waist belts securely attached to a stable, tip-proof base can be helpful. The best safety feature is always one of your hands holding the baby securely at all times. It's amazing how many things parents learn to do one-handed! Changing tables that will hold a baby or toddler with his head on the left side of you and his feet on the right work best for right-handed parents. Turning the baby in the opposite direction works well for left handed parents.

Changing tables that hold a baby with his head away from you and his feet toward you tend to be too short and too narrow, and don't allow you to get close enough to comfortably or easily perform tasks like administering eye or ear drops, administering medication by dropper, or taking a rectal temperature. A baby on such a table who also has explosive diarrhea can be very hazardous to your clothing and shoes!

Location, Location, Location: Setting Up Diaper Changing Areas

There are a number of good diaper changing locations in every home. Setting up more than one area works well in large homes and two story homes. Wherever you change a diaper, hold onto the baby securely with at least one hand at all times to prevent falls. For nighttime diaper changes, it's nice to have a small or dim light or night-light in the changing area, so that you don't overstimulate and fully waken your baby. When baby wakes up at night, it's good to keep lights dimmed, and keep all interactions "brief and boring," to help baby develop the habit of sleeping at night.

- If your baby has sensitive skin and you're not using baby wipes every day, it may be convenient to locate changing area where you have ***access to water***. A roomy bathroom counter may be big enough to hold a cozy changing pad or folded towel or blanket. Supplies can be stored on the counter or in the drawers or cabinet below, and a container for used diapers can be placed nearby. A very spacious bathroom may have room to position a changing table close to a sink. Either way, it's quick and convenient to dampen cotton balls with warm water and to wash your hands one at a time. A clean dispenser will keep liquid soap cleaner than bar soap.
- A changing area or table in baby's room is convenient, especially if you're using baby wipes, and don't need instant access to warm water during the diaper change.
- A folded blanket or towel on ***the lowered tailgate of your sports utility vehicle*** provides a cleaner changing area when you're away from home. It is relatively free of bacteria and viruses from outside your household.

Hazardous Items to Avoid

- ***Baby walkers*** with wheels that allow a baby to use her feet to roll around on a floor or carpet. This is one of the most dangerous items a baby can have.
- ***Swings or jumpers that are suspended from a doorframe*** can cause serious falls.
- ***Fluffy, soft bedding***, (mattresses, quilts, comforters, pillows and bumper pads) can cause suffocation, and is associated with SIDS deaths.
- ***Hazardous older items***. Used items and older items can sometimes be unsafe, unsanitary, worn out or damaged. They may even have been recalled for safety reasons. Check the Consumer Products Safety Commission ("CPSC") web site, to see if they've been recalled. It's quick and easy to look things up either by brand name or product type. If the item has not been recalled, check it for signs of damage, that can make otherwise safe items hazardous.

Then clean the item well. If a surface can tolerate a disinfectant cleaner, you'll be able to remove some viruses and bacteria, and prevent the spread of infectious disease. Use the cleaner as directed on the label, and then rinse well and dry if your child's hands or face will have contact with the surface.

- ***Choking hazards***. Parents have to be vigilant all the time to make sure that infants and children don't get small items into their mouths and choke on them. Look for clothing without buttons and other items that can be hazardous. If clothing has buttons, make sure that the buttons are securely attached. Scan sleeping areas, changing tables, and floors for choking hazards. The old rule of thumb is that if you can pass an item through a cardboard toilet paper roll, it's a choking hazard. These rolls are not very sanitary. A cardboard roll for paper towels makes a better screening device.

- **Poorly fitting sheets** that are either so tight that they really can't be fitted correctly over the mattress, or so loose that they don't fit can come off the mattress and entangle a baby or young child.

Setting Up Safe Zones for Feeding Your Baby While Keeping Older Children Safe

Find comfortable places for feeding the baby while simultaneously interacting with an older child or children. Since toddlers are so capable of outsmarting locks and latches, consider using gates with latches that will not open without the application of much more physical strength than your toddler or preschooler has or will have in the coming year or two. If you have more than one toddler or preschooler, you'll notice that they can collaborate in defeating safety devices, and that together, they are extremely strong and impressively resourceful. Toddlers and preschoolers like to climb and stand on things. To fasten a door securely, place whatever you are using to secure the door so high that it cannot be reached by a child standing on a chair or other piece of furniture.

Tips on Keeping in Touch

Energy and uninterrupted time are necessary for important things like enjoying your spouse and baby, and learning to breastfeed. It's best to keep the numbers and the duration of visits and telephone conversations to an absolute minimum. Sharp HealthCare hospitals have e-mail services to help friends and relatives to keep in touch with patients. Sharp patients' loved ones can visit the Sharp web site and click on "E-mail a Patient." E-mail is wonderful because it doesn't interrupt rest, adult mealtimes or infant feedings.

A relative, friend or caregiver who helps parents keep up with calls, e-mails, and thank you notes during the hospital stay and in the first weeks at home can be a blessing. Some new dads volunteer to write all the thank you notes after the first baby is born, and enjoy their wives' appreciation for years and years.

Tips on Coping with Stress and Feelings of Sadness

Keeping ones' sense of humor alive and well, and being gentle with each others' feelings can help parents cope with the pileup of stressors and sleep deprivation. If that's not helping and either parent feels terrible for more than a few days, it's time to see what's going on, and get hands on help with the household and baby and professional help with the sad feelings.

- **Baby blues.** After baby is born, sleep deprivation and exhaustion can overwhelm both parents. Tearful, weepy episodes once or twice a week are normal responses to overwhelming fatigue and stress, and may relieve tension.

- **Depression.** If either parent becomes gloomy or depressed day after day, that's not the time to hide those feelings or be a hero. The sooner a depressed person speaks with a knowledgeable, caring doctor, the sooner medical treatment can cause the depression to lift. Usually, a combination of medication and talk therapy with a professional who specializes in postpartum issues can be very effective. If a parent has thoughts of suicide

or homicide, with or without a specific plan, the parent needs to speak with his or her physician right away. That would be a psychiatric emergency.

- ***Postpartum psychosis*** is an extremely rare psychiatric emergency. A mother with postpartum psychosis is out of touch with reality. She may have visual and/or auditory hallucinations, including command hallucinations directing her to harm or kill herself or others. If a mom develops these symptoms, make sure she is watched continuously, and call her doctor right away, no matter what time it is. She may need immediate psychiatric hospitalization. If you cannot reach the physician, take her to the emergency room of a good hospital. If she is a danger to herself or others, and refuses to go anywhere, it is an emergency, and you may need to call the police, who can put her on a hold and hospitalize her. Such a patient needs the protection of a locked psychiatric facility.

Preparing for Breastfeeding

- ***Be well informed.*** Some advance preparation can set mother and baby up for a rewarding breastfeeding experience. If both parents attend a breastfeeding class, they understand breastfeeding; they're well informed, and the whole family benefits. Learning to breastfeed a baby can be a challenge. Gradually progressing to breastfeeding with effective and efficient milk transfer is a complex process dependent on many variables. Gradually increasing infant maturation, strength and development are major factors. Patience with the process and vigilance about adequate intake and weight gain are both important.

One of the best predictors of a wonderful breastfeeding experience and a lifetime of good health for your baby is a supportive, empathic, knowledgeable father who understands why “good health begins with breastfeeding.” The more parents know, the more parents and babies can enjoy the many health benefits and the convenience of breastfeeding. If possible, read one or two of the breastfeeding books from our list of “Helpful Books.”

- ***Artificial nipples*** (bottles and pacifiers) introduced before breastfeeding is well established sometimes cause nipple confusion, nipple preference or flow preference. Drinking from a bottle requires mouth and tongue movements and sucking actions that are more passive and very different from those your baby uses when nursing at the breast. A healthy full term breastfeeding baby rarely needs formula and does not need water, glucose water or Pedialyte.® Breastmilk is so good for a well or sick baby that filling him up with anything else deprives him of the nutrition he needs.

Plan ahead with your baby's pediatrician, and then you both can be on the same page if someone else suggests giving your healthy full term baby any artificial nipple or liquid not specifically ordered by him or her. You may wish to write out instructions and make copies so that they appear in your baby's chart and that your nurse makes sure they are made clear to all staff.

- ***The San Diego County Breastfeeding Coalition*** has an authoritative, comprehensive web site that is a treasure trove of the best clinically sound and up to date breastfeeding

information. It is provided as a public service by San Diego county's own Breastfeeding Coalition. Every breastfeeding family needs a copy of their Breastfeeding Resource Guide, available on the web site and in hospitals, in English and Spanish. Please see our Prenatal-Postpartum Resource Guide for more information.

- ***The La Leche League*** is an international organization that provides mother-to-mother support and information at monthly meetings, by telephone and with its outstanding web site. It's a good to call the local telephone number before your baby arrives, and attend several monthly meetings in your area. It can be a fun way to meet other breastfeeding moms and learn a lot at the same time. La Leche League leaders are extremely experienced and generous in sharing their knowledge. Most groups have a lending library of good breastfeeding information.

- ***Breastfeeding pillows and accessories.*** A wraparound type breastfeeding pillow helps you position yourself and your baby for comfortable nursing while you're sitting up. Taking yours to the hospital will increase support and comfort for mother and baby. Additional pillows are extremely helpful. You may want to place a pillow on your lap, just beneath the breastfeeding pillow, and other pillows behind your back or at your sides to for additional support and comfort. Convenient accessories including washable covers further increase the pillows' usefulness. These pillows are also great for positioning your growing baby in a variety of comfortable positions, and for providing support as she learns to sit up.

- ***A flat, shelf-type breastfeeding pillow*** is quite popular, and, because it is deeper, it can be used for bigger babies than the smaller, rounded breastfeeding pillow. An inflatable travel version is coming soon. It should be great for tucking into the bag you take to the hospital and later in a diaper bag for travel.

- The ***smaller, rounded breastfeeding pillow*** can also be used when you play with your baby. Set the pillow in the middle of a large space on a blanket-covered carpet, and sit down with your baby, watching her continuously. Never leave any baby or young child unattended. Baby can recline on the pillow as if she's on a lounge chair, with her head and neck resting on the rounded part, her bottom in the middle of the "ring" and her legs propped up on the pillow or extending out in the space between the ends of the "ring." For "tummy time," the closed side of the pillow can be placed under baby's chest, to support her while she reaches for toys placed in front of and next to the pillow. A crawling baby may like to climb right over the pillow, which can be used as part of a cuddly obstacle course. Sitting in the middle of the pillow can also provide a little extra support to a baby who is learning to sit.

- ***Getting comfortable.*** Set up some cozy, comfortable places at home where you and your baby can relax and enjoy breastfeeding, one of life's sweetest, most heartwarming experiences. At different times you may prefer a sofa, a chair or lying down in bed. A table next to the breastfeeding area is a convenient parking place for things you want to keep within reach at feeding time.

- ***Using a breast pump*** can allow a mother to step out from time to time or go back to work and continue to breastfeed. When a mom is away from her baby, whoever cares for the baby can feed the mother's expressed milk to the baby.
- ***If your baby is not nursing well*** when you leave the hospital, and ***is in danger of being underfed***, you may need a good hospital grade electric pump. Your baby needs to be seen regularly by her pediatrician or nurse practitioner, who will carefully monitor growth, development and weight while helping to resolve the feeding problem. Additional help from a highly qualified lactation consultant can help turn things around as quickly as possible.
- ***Postpone pumping and introducing a bottle.*** Without an urgent reason, for example, a feeding problem, a very premature birth and a baby who isn't yet strong enough to nurse at the breast, or a baby who has difficulty nursing because of a cleft palate, or a mother who has to return to full time work right away, introducing a bottle should be postponed until breastfeeding is well established. Breastfeeding may be well established by the time baby is three or four weeks of age. For most babies, breastfeeding progress is gradual and uneven, with two steps forward, one step back, one step forward, etc.
- ***Selecting a pump.*** Pumps are not one size fits all products to borrow from a friend or have a girlfriend run out and pick up. You and your baby deserve a carefully selected pump that fits your body, your specific needs, your lifestyle and your budget. It's ideal to visit an experienced lactation consultant or have a lactation consultant visit you and get what really fits your needs. You can find a lactation consultant with strong credentials and ample experience by consulting the San Diego County Breastfeeding Coalition's excellent Breastfeeding Resource Guide, available free at hospitals and at the Coalition's web site. Many mothers like to rent a pump, and try before they buy, or just rent a pump, period.
- ***Borrowing a friend's pump*** is not recommended because of possible spread of infection from one person to another, and because many of the smaller pumps get weaker and weaker with continued use. You need a pump that works really well. Mothers who are committed to breastfeeding for a year or longer, as recommended by the American Academy of Pediatrics, tend to prefer to rent or buy a powerful hospital grade pump.
- ***Expert continuing education in breastfeeding.*** Most hospitals have free weekly breastfeeding support groups led by lactation consultants. Find out the schedule for the hospital where your baby will be born, mark your calendar, and plan to attend with your baby. Some lactation consultants in the community also have free support groups. If a friend or relative wants to come along, that can be very helpful. One person can ride in the back seat next to the car seat and keep an eye on baby while the other person drives.

Mastitis

If you're breastfeeding, you need to know about mastitis--what it is, how to help prevent it, what to do if you think you may have mastitis, and what to do if you are diagnosed with mastitis. Mastitis can be classified into three categories, in order of severity and

duration: milk stasis, noninfectious inflammation and infectious mastitis. Symptoms may affect part or all of the breast, and are usually, but not always unilateral. It's very worthwhile to do everything possible to avoid mastitis and the discomfort and malaise that usually accompany it. Mastitis is often triggered by a mother's extreme sleep deprivation and exhaustion.

- **To help prevent mastitis**, be sure to allow your baby to completely remove milk from both breasts, so that they are soft. If your breasts are uncomfortably full and your baby is asleep, apply moist heat to your breasts to encourage letdown, (by taking a shower or applying warm, wet towels), and then wake her up and encourage her to nurse. If your nipples are soft enough for baby to latch on, she will be much more effective at milk removal than a pump. If your nipples are extremely full so that latching on is difficult, you may need to pump off some milk to soften the area before baby latches on.

- **Breast massage** before and during each feeding promotes good circulation and complete removal from all areas of each breast. Let a knowledgeable friend, mother-baby nurse or lactation consultant show you where the massage is most effective, and how to do it. Avoid any pressure that gets in the way of good blood circulation in and around the breasts. For example, don't wear identical underwire bras every day. Wear a variety of comfortable styles. Spend some time each day and night with no bra at all. Big tee shirts with dark colors are good for this.

- **Examine your breasts** in the mirror every day, checking for discoloration, pain, warmth or hardness, which may be signs that milk is not being completely removed and that circulation is not what it should be. If you feel ill and have areas of breast discoloration and/or tenderness, warmth, or hardness, and/or body aches, sweating and chills, examine your breasts, take your temperature and then call your obstetrician during normal waking hours, even if it's Saturday or Sunday. You may have mastitis or a postpartum complication that requires treatment the same day. For severe or extreme symptoms and health concerns, contact your obstetrician right away, no matter what day or time it is, in case your condition is a medical emergency that requires immediate treatment. Mastitis is not a reason to either nurse less often or stop nursing. Effective milk removal helps one recover from mastitis.

If you are diagnosed with mastitis, your doctor may prescribe an antibiotic. Do take it as directed. No matter how sick and tired you feel, don't skip any doses, and finish the entire bottle of medication. Then get much more rest, healthy meals, lots of fluids and continue all the mastitis prevention activities noted above to hasten your recovery and prevent a recurrence.

Tips on Preventing Postpartum Constipation

To be as comfortable as possible after your baby is born, you will want to have normal bowel movements in a timely manner. You don't want that first bowel movement to be delayed for days and days and making you uncomfortable. Discussion and advance planning with your obstetrician can help a lot. He or she may prescribe or recommend something for use in the hospital and during the first days at home. You can be

conscientious about fluid and fiber intake before and after baby is born. You probably know what works for you. Prune juice, prunes, dried or fresh fruit, fresh vegetables, bran muffins and whole grains are some of the foods that can help. You'll feel so much better if you don't get constipated.

Tips on Preparing for Twins, Triplets, Quadruplets or More!

When you're expecting more than one baby, advance preparation and mental health are more important than ever. You are sure to appreciate any time and energy that you save. Having large supplies of everything on hand and organized prevents the hassle of running out to the store every day or two. Know what to do if either parent becomes depressed, and talk openly about it with supportive family and friends and most of all with a caring physician who can help get the treatment that will resolve the depression.

- ***Prevent laundry emergencies*** by stocking up on clothing and linens for the babies, and underwear and linens for the parents.
- ***The Scripps Mothers of Twins Club*** has many benefits, and you can join before baby arrives.
- Sharp has ***Multiple Expectations*** classes just for parents expecting twins or more
- ***Freebies!*** Some companies that manufacture baby supplies and equipment will give some free merchandise to parents of multiples. It's worth asking friends who have multiples who might have such a program, and it's worth contacting the companies as well. This is a good thing to look into before the babies are born. Most companies require that you send them copies of your babies' birth certificates before they send you free merchandise.
- ***Yes, you can breastfeed twins, triplets and quads!*** Others have done it, and you can, too! At web sites for breastfeeding moms, you will see big nursing pillows especially designed for multiples.
- ***Even if you're on bed rest***, you can do some preparation. You can connect with some parents of multiples. Consider calling the mother whose name is listed with Mothers of Twins Club, to see if she can help. You can do online and catalog comparison shopping, and order much of what you need. You can read books and become very well informed. (You may like our list of helpful books.) You can surf over to wonderful web sites that will make you a knowledgeable parent. You can carefully consider and narrow down a list of baby names. This can be a big help later on. You and others will be able to address your babies by name, and that's so much more satisfying and better for bonding than having to call them "Baby A," "Baby B," "Baby C," etc. You can also enjoy uninterrupted conversations with friends and family—something that may not be happening for a while after the babies are born!