
❖ Cabarrus Crib Notes ❖

4 Month Edition

A publication of Cabarrus Pediatric Clinic

weight _____
length _____
head circumference

Development

At 4 months, your baby's personality may really begin to shine! She is more interested in her surroundings, may laugh, coo, and babble, and may be ready to roll from front to back. She loves to hear you talk and sing and may like to play peek-a-boo or other games. Rattles and soft toys help her to practice grabbing and holding things. Get down to her level and enjoy watching her learn and develop.

Nutrition

Most babies are ready to begin solid foods at this age. Begin with rice cereal, mixed to a soupy consistency with breast milk or formula, and feed it by spoon twice daily. Baby cereals are a good source of the iron that your baby needs at this age. Other baby cereals may be tried after two to three weeks. By 5 months of age your baby may be eating three solid meals a day. If your baby is bottle-fed, do not let him take a bottle to bed. This increases the risk of tooth decay and ear infections. You can begin strained or pureed fruits or vegetables once your baby has mastered eating cereal off of a spoon, usually between 5 and 6 months. Once you begin these, introduce only one new food at a time every two to three days. If a new food causes digestive problems, withhold it for a month or two before trying it again. Babies frequently make a face when a new food is tried that is not sweet or one of their established favorites. Fortunately, by continuing to offer the food, they will usually begin to eat it without resisting. Picky eaters are often trained to be picky. As a parent, your goal is to train your infant to like nutritious foods.

*Have you
"BABY-
PROOFED?"*

Safety Quiz

Over the next several months, your baby will continue to develop new and greater abilities to interact with the world. Although these skills are fun and exciting, they also will make your infant much more susceptible to accidents. Have you baby-proofed in the following ways? If not, NOW is the time!

- medicines and cleaning supplies locked out of reach
 - Poison control # posted near phone (1-800-84 TOXIN)
 - water heater set to 120 degrees
 - tested smoke detectors
 - plug protectors in empty outlets
 - is your home smoke free?
 - removed poisonous plants
 - taken a CPR class
 - used car seat appropriately
 - kept small items, toys, choking hazards out of reach
 - installed gates for stairs (and unsafe windows if necessary)
 - planned to lower your baby's crib mattress before he learns to sit up
 - avoided clothes, crib toys, pacifier holders with long strings that could strangle your baby
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Common Concerns: *Antibiotics*

Antibiotics are medications that kill germs known as bacteria. Antibiotics are used to treat illnesses caused by bacteria such as ear infections, strep throat, pneumonia, meningitis, and urinary tract infections. Used appropriately, antibiotics can shorten bacterial illnesses, relieve symptoms, and save lives. The *vast majority* of pediatric illnesses, however, are caused by germs known as *viruses*. Examples of viral infections include the common cold, most stomach and intestinal infections, most throat infections, the “flu”, and chickenpox. Viruses also cause the majority of fevers in young children. Viral infections are gradually cured by your child’s immune system without any help from medicines. Antibiotics *do not* kill, harm, or even scare viruses and should not be used for these infections.

Antibiotics do not kill, harm, or even scare viruses. Viral infections are cured by your child’s own immune system.

Due to inappropriate overuse of antibiotics for viral illnesses (remember antibiotics do not help viral infections), many *bacteria* are no longer killed by antibiotics taken by mouth. Therefore, there are now many ear infections and some more serious infections, like pneumonias, that cannot be easily treated with these medicines.

To minimize your child’s risk of having such problems, we only prescribe antibiotics when they are required for a bacterial infection. This is why we do not call in antibiotics without seeing your child. (We’re really not just being difficult.) When your child is seen for a sickness, we determine if the illness is caused by a bacteria or a virus. If it’s caused by a virus, you should leave reassured that your child should get better gradually—and he doesn’t need an antibiotic!

Recharge your batteries!

If you are like most parents, the majority of your time and energy over the last four months has been directed toward your little one. Consequently, most parents haven’t been on a date, seen a movie (unless you count rentals), gone out for dinner (unless you count drive-thru’s), or gotten as much exercise as they would like. The quality of your child’s family life will be greatly affected by the quality of your marriage. For single parents, a short break for something just for you is even more important. So find a good babysitter, spoil yourselves a little, and recharge your batteries. You and your child will benefit!

Immunizations

At the 4 month visit most babies receive immunizations for Diphtheria, Tetanus, Pertussis, Hemophilus influenzae (this is not “the flu” but rather a germ that causes meningitis), and Polio. You can expect some fever and mild soreness which may be relieved by acetaminophen. Call our office if your baby has any of the severe reactions listed in the vaccine handouts.

Other Instructions:

*Next Checkup:
Age 6 months*