



OGDEN
CLINIC

2 MONTHS



**WELL-CHILD
CHECK-UP**

Well-Child Checkup: 2 Months

At the 2-month checkup, the healthcare provider will examine the 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 the baby to get an idea of the infant's development. By this visit, your baby is likely doing some of the following:

- Smiling on purpose, such as in response to another person (called a “social smile”)
- Batting or swiping at nearby objects
- Following you with his or her eyes as you move around a room
- Beginning to lift or control his or her head

Feeding tips

Continue to feed your baby either breastmilk or formula. To help your baby eat well:

- During the day, feed at least every 2 to 3 hours. You may need to wake the baby for daytime feedings.
- At night, feed when the baby wakes, often every 3 to 4 hours. It's OK if the baby sleeps longer than this. You likely don't need to wake the baby for nighttime feedings.
- Breastfeeding sessions should last around 10 to 15 minutes. With a bottle, give your baby 4 to 6 ounces of breastmilk or formula.
- If you're concerned about how much or how often your baby eats, discuss this with the healthcare provider.

- Ask the healthcare provider if your baby should take vitamin D.
- Don't give your baby anything to eat besides breastmilk or formula. Your baby is too young for solid foods (solids) or other liquids. A young infant should not be given plain water.
- Be aware that many babies of 2 months spit up after feeding. In most cases, this is normal. Call the healthcare provider right away if the baby spits up often and forcefully, or spits up anything besides milk or formula.

Hygiene tips

- Some babies poop (have 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 the baby also becomes fussy, spits up more than normal, eats less than normal, or has very hard stool, tell the healthcare provider. The baby may be constipated (unable to have a bowel movement).
- Stool may range in color from mustard yellow to brown to green. If it's another color, tell the healthcare provider.
- Bathe your baby a few times per week. You may give baths more often if the baby seems to like it. But because you're cleaning the baby during diaper changes, a daily bath often isn't needed.
- It's OK to use mild (hypoallergenic) creams or lotions on the baby's skin. Don't put lotion on the baby's hands.

Sleeping tips

At 2 months, most babies sleep around 15 to 18 hours each day. It's common to sleep for short spurts throughout the day, rather than for hours at a time. The baby may be fussy before going to bed for the night, around 6 p.m. to 9 p.m. This is normal. To help your baby sleep safely and soundly follow the tips below:

- Put your baby on his or her back for naps and sleeping until your child is 1 year old. This can lower the risk for SIDS, aspiration, and choking. Never put your baby on his or her side or stomach for sleep or naps. When your baby is

awake, let your child spend time on his or her tummy as long as you are watching your child. This helps your child build strong tummy and neck muscles. This will also help keep your baby's head from flattening. This problem can happen when babies spend so much time on their back.

- 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 don't offer it 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.
- Don't put a crib bumper, pillow, loose blankets, or stuffed animals in the crib. These could suffocate the baby.
- Swaddling means wrapping your newborn baby snugly in a blanket, but with enough space so he or she can move hips and legs. Swaddling can help the baby feel safe and fall asleep. You can buy a special swaddling blanket designed to make swaddling easier. But don't use swaddling if your baby is 2 months or older, or if your baby can roll over on his or her own. Swaddling may raise the risk for SIDS (sudden infant death syndrome) if the swaddled baby rolls onto his or her stomach. Your baby's legs should be able to move up and out at the hips. Don't place your baby's legs so that they are held together and straight down. This raises the risk that the hip joints won't grow and develop correctly. This can cause a problem called hip dysplasia and dislocation. Also be careful of swaddling your baby if the weather is warm or hot. Using a thick blanket in warm weather can make your baby overheat. Instead use a lighter blanket or sheet to swaddle 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 cause a baby's airway to become blocked or the baby to suffocate.
- It's OK to put the baby to bed awake. It's also OK to let the baby cry in bed for a short time, but no longer than a few minutes. At this age babies aren't ready to "cry themselves to sleep."
- If you have trouble getting your baby to sleep, ask the healthcare provider for tips.

- 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 says that babies should sleep in the same room as their parents. They should be close to their parents' bed, but in a separate bed or crib. This sleeping setup should be done for the baby's first year, if possible. But you should do it for at least the first 6 months.
- Always put cribs, bassinets, and play yards in areas with no hazards. This means no dangling cords, wires, or window coverings. This will lower the risk for strangulation.
- Don't use baby heart rate and monitors or special devices to help lower the risk for SIDS. These devices include wedges, positioners, and special mattresses. These devices have not been shown to prevent SIDS. In rare cases, they have caused the death of a baby.
- Talk with your baby's healthcare provider about these and other health and safety issues.

Safety tips

- To avoid burns, don't carry or drink hot liquids, such as coffee or tea, near the baby. Turn the water heater down to a temperature of 120.0°F (49.0°C) or below.
- Don't smoke or allow others to smoke near the baby. If you or other family members smoke, do so outdoors while wearing a jacket, and then remove the jacket before holding the baby. Never smoke around the baby.
- It's fine to bring your baby out of the house. But stay away from confined, crowded places where germs can spread.
- When you take the baby outside, don't stay too long in direct sunlight. Keep the baby covered, or seek out the shade.
- 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.
- Older siblings can hold and play with the baby as long as an adult supervises.
- Call the healthcare provider right away if the baby is under 3 months of age and has a fever (see Fever and children below).

Vaccines

Based on recommendations from the CDC, at this visit your baby may get the following vaccines:

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

Vaccines help keep your baby healthy

Vaccines (also called immunizations) help a baby's body build up defenses against serious diseases. Having your baby fully vaccinated will also help lower your baby's risk for SIDS. Many are given in a series of doses. To be protected, your baby needs each dose at the right time. Many combination vaccines are available. These can help reduce the number of needlesticks needed to vaccinate your baby against all of these important diseases.

Talk with your child's healthcare provider about the benefits of vaccines and any risks they may have. Also ask what to do if your baby misses a dose. If this happens, your baby will need catch-up vaccines to be fully protected. After vaccines are given, some babies have mild side effects such as redness and swelling where the shot



was given, fever, fussiness, or sleepiness. Talk with the provider about how to manage these.

Parent Notes:

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