

POSTNATAL INSTRUCTIONS AND CHARTING — **BABY** — **FIRST** 24 HOURS

Baby's Name _____ Sex _____ DOB _____ Time _____ MR# _____
 Mother's Name _____ MR# _____ Father's Name _____
 EDD _____ Wks Gestation _____ Gestational Age Assessment _____ APGAR Scores: 1 min. _____ 5 min. _____ 10 min. _____
 Any complications or unusual circumstances during pregnancy: _____

Length of Labor: Prodromal _____ 1st st _____ 2nd st _____ FHT range _____ Fetal distress _____
 Any complications or unusual circumstances during labor, birth or transitional period: _____

PLEASE NOTE: This sheet is for **MY** records. If you take your baby to see a physician you can give a copy of this sheet to him/her but I need you to return the original to me. I will also be happy to give to you or mail or fax copies of all other newborn records to your baby's physician.

SLEEP: Your baby will probably sleep for several hours soon after birth, and will continue to need a lot of sleep but in shorter time intervals. Provide a restful atmosphere for your baby to minimize stimulation or interruptions. After his/her initial long sleep period your baby should not sleep more than three hours without eating. NOTE: The AAP currently suggests that infants be placed on their back to sleep to reduce the risk of SIDS. However, during the first couple of days your baby will be working up mucus from his lungs, or may spit up. To prevent choking we suggest propping the baby up slightly on his/her side (prop with rolled baby blankets) to sleep. He/she needs to sleep on a firm surface, no pillows or piles of blankets. **The baby should be kept close to you while sleeping.** This means NOT in another room.

EATING: Get comfortable before beginning to nurse. Make sure the baby is well latched-on to your breast, with as much of the areola (darker area surrounding the nipple) in his/her mouth, centered between the tongue and roof of his/her mouth. The baby's tummy should be facing your tummy. Sore nipples are a sign your baby is not latching properly. A breastfed newborn should nurse about every **two hours** and for at least **10 minutes**. Your breasts produce colostrum the first few days. This is the perfect food for your baby. It provides him/her with everything he/she will need until your milk comes in, including important antibodies to help prevent infections. It also helps the baby to eliminate the meconium from his system, an important process to help reduce jaundice. Your baby does not normally need anything else, including water. After the first long sleep period, wake your baby if he/she sleeps longer than 3 hours and feed him/her. Check off each time your baby nurses for at least 5 minutes:

ELIMINATION: Your baby's stools will be sticky and dark for the first two or so days. This type of stool is called meconium and is normal. He/she will have several bowel movements each day. Your baby should urinate within the first 24 hours and have a bowel movement within 48 hours. Urination can be difficult to determine with disposable diapers. Place a folded tissue inside the diaper so you will know if he has urinated. If your baby has not urinated within 24 hours notify your midwife.

Time of first urine _____ Time of first BM _____

SKIN CARE: A newborn cannot regulate his/her body temperature during the first 24 hours so if you wash your baby be sure to keep him/her warm, or just use a warm wash cloth to wipe off any blood. Use unscented baby wipes or a wet cloth to clean the diaper area. Unless your baby's skin is very dry you do not need oils, and you should not use baby powder as it irritates your baby's lungs. If his/her skin is dry you can use olive oil or an unscented, non-mineral based lotion or oil.

CORD CARE: Keep the diaper folder under the cord. Do not put alcohol or anything else on the stump as this will preserve it and it will take up to two weeks to heal, dry, and fall off. Left alone your baby's dried cord will fall off in approximately 3 – 5 days.

SUNNING THE BABY (Jaundice): Jaundice is not normal during the 1st 24 hours. If you think the baby's skin or eyes look yellow notify your midwife. To help prevent jaundice, begin sunning the baby daily. Remove clothing and place baby in direct sunlight for 3-4 minutes on each side twice daily. Cover eyes with a folded wash cloth, and protect from drafts. If it is cloudy or too cold you can place the baby in front of a sunny window for 20 minutes 2 - 4 times daily. Check off each time you sun the baby.

TEMPERATURE: Your baby will not be able to regulate his/her temperature the first 24 hours. Normal under-arm temperature in the newborn is 97° – 99°. A digital thermometer is included in your birth kit. Tuck it firmly in the arm pit and leave in **until the digital display quits rising**. This will take longer than when it "beeps". Record your baby's temperature every 4 hours. If above or below normal, adjust clothing and retake in 30 minutes. If still abnormal, or if there is a 2° deviation (up OR down) from previous temps call your midwife immediately.

Time: _____ Temp. _____ Time: _____ Temp. _____
 Time: _____ Temp. _____ Time: _____ Temp. _____
 Time: _____ Temp. _____ Time: _____ Temp. _____

BREATHING: It is normal for your baby's breathing to be irregular, but it should not appear labored. Signs of difficulty include: nasal flaring, chest retractions, grunting on expiration, 'see-saw' breathing (lasting more than a few seconds at a time), or consistently breathing very fast. Normal respiratory rate is 30 – 60 breaths per minute. You should count the baby's breaths for 1 minute every 4 hours while he is quiet, or anytime they appear unusual. Notify your midwife of anything that appears unusual. Record respirations below:

Time: _____ Resp. _____ Time: _____ Resp. _____
 Time: _____ Resp. _____ Time: _____ Resp. _____
 Time: _____ Resp. _____ Time: _____ Resp. _____

Note anything unusual: _____

CONTACT MIDWIFE IF ANY OF THE FOLLOWING ARE NOTED:

1. The baby becomes listless or lethargic, or difficult to wake.
2. The baby becomes jittery or develops a high-pitched, shrill cry.
3. The baby refuses to eat for more than two feedings.
4. The cord starts to smell bad or has pus oozing from it.
5. Development of eye drainage.
6. Cyanosis (blue/dusky skin color.)
7. A continual rise or fall in the baby's temperature.

POSTNATAL INSTRUCTIONS AND CHARTING — BABY — AFTER 24 HOURS

SLEEP: Your baby will need a lot of sleep. Provide a restful atmosphere for your baby to minimize stimulation or interruptions. For the first couple of weeks your baby should not sleep more than about every two or three hours without eating. NOTE: The AAP currently suggests that infants be placed on their back to sleep to reduce the risk of SIDS. However, during the first couple of days your baby will be working up mucus from his lungs, or may spit up. To prevent choking we suggest propping the baby up slightly on his/her side (prop with rolled baby blankets) to sleep. He/she needs to sleep on a firm surface, no pillows or piles of blankets. The baby should be kept close to you while sleeping. This means NOT in another room.

EATING: A breastfed newborn should nurse at least every two - three hours and for at least 10 minutes for the first couple of weeks. As your milk comes in, and the baby's stomach grows, feedings will gradually space out. Breast milk provides him/her with everything he/she needs. Your baby does not normally need anything else, including water. Wake the baby to feed if he/she sleeps longer than 3 hours other than the middle of the night. Let him/her sleep up to 4 or 5 hours during the night once your milk is in. Check off each time your baby nurses:

Day 2: [] [] [] [] [] [] [] [] [] [] [] [] [] []
Day 3: [] [] [] [] [] [] [] [] [] [] [] [] [] []
Day 4: [] [] [] [] [] [] [] [] [] [] [] [] [] []
Day 5: [] [] [] [] [] [] [] [] [] [] [] [] [] []
Day 6: [] [] [] [] [] [] [] [] [] [] [] [] [] []
Day 7: [] [] [] [] [] [] [] [] [] [] [] [] [] []

ELIMINATION: Your baby's stools will turn yellow and soft. The number of bowel movements a breastfed baby has can vary significantly, from after every feeding to just one every day or so. This is normal. Your baby should wet at least 6 - 8 diapers each day. If you are unsure, put a folded tissue in his/her diaper to make sure he/she is urinating properly.

SKIN CARE: Once the baby's temperature is stable you may bathe him/her. Use a gentle soap. It is not necessary to bathe your baby every day. Bathe as needed. Use unscented baby wipes or a wet cloth to clean the diaper area. Unless your baby's skin is very dry you do not need oils, and you should not use baby powder as it irritates your baby's lungs. If his/her skin is very dry you can use olive oil or an unscented, non-mineral based lotion or oil.

CORD CARE: Keep the diaper folder under the cord. Do not put alcohol or anything else on the stump as this will preserve it and it will take up to two weeks to heal, dry, and fall off. Left alone your baby's dried cord will fall off in approximately 3 - 5 days.

SUNNING THE BABY: (Jaundice): It is normal for babies to develop a slight amount of jaundice about the 3rd or 4th day after birth. A slight yellow color is normal but let your midwife know so she can evaluate it. To help prevent or alleviate jaundice continue to sun the baby as before, for about a week or so. Be sure to protect the eyes and keep baby warm. Check off each time you sun your baby:

[] [] [] [] [] [] [] [] [] [] [] [] [] []

TEMPERATURE: Your baby should be able to regulate his/her temperature after about 24 hours. Normal under-arm temperature in the newborn is 97° - 99°. A digital thermometer is included in your birth kit. Place it firmly in the arm pit and leave in until the digital display quits rising. This will take longer than when it "beeps". Record your baby's temperature 4 times a day for the next 2 days, then twice a day for 4 more days or as needed. If above or below normal, adjust clothing and/or room temperature, and retake in 30 minutes. If still abnormal, or if there is a 2° deviation (up OR down) from previous temps call your midwife immediately.

Day 2: Temp: [] Temp: [] Temp: [] Temp: []
Day 3: Temp: [] Temp: [] Temp: [] Temp: []
Day 4: Temp: [] Temp: [] Day 5: Temp: [] Temp: []
Day 6: Temp: [] Temp: [] Day 7: Temp: [] Temp: []

BREATHING: It is normal for your baby's breathing to be irregular, but it should not appear labored. Signs of difficulty include: nasal flaring, chest retractions, grunting on expiration, 'see-saw' breathing (for more than a few seconds), or consistently breathing very fast. Normal respiratory rate is 30 - 60 breaths per minute. You should count the baby's breaths for 1 minute twice a day for a few days, while he/she is quiet, or anytime they appear unusual. Notify your midwife of anything that appears unusual. Record respirations below:

Resp. [] Resp. [] Resp. [] Resp. []
Resp. [] Resp. [] Resp. [] Resp. []
Resp. [] Resp. [] Resp. [] Resp. []

Note anything unusual: _____

CONTACT MIDWIFE IF ANY OF THE FOLLOWING ARE NOTED:

- 1. The baby becomes listless or lethargic, or difficult to wake.
2. The baby becomes jittery or develops a high-pitched, shrill cry.
3. The baby refuses to eat for more than two feedings.
4. The cord starts to smell bad or has pus oozing from it.
5. Development of eye drainage.
6. Cyanosis (blue/dusky skin color.)
7. A continual rise or fall in the baby's temperature.

ADDITIONAL INSTRUCTIONS:

PLEASE RECORD ALL INFORMATION! Your midwife will review all charted information at your postpartum visits.

Reviewed by _____ Date _____ Time _____
Midwife _____ Phone numbers _____