



JAUNDICE AND YOUR NEWBORN

What is jaundice?

Jaundice is the yellow color seen in the skin of many newborns. It happens when a chemical called bilirubin builds up in the baby's blood. Jaundice can occur in babies of any race or ethnicity.

Why is jaundice common in newborns?

Everyone's blood contains bilirubin, which is removed by the liver. Before birth, the mother's liver does this for the baby. Most babies develop jaundice in the first few days after birth because it takes a few days for the baby's liver to get better at removing bilirubin.

How can I tell if my baby has jaundice?

The skin of a baby with jaundice usually appears yellow. The best way to see jaundice is in good light, such as daylight or under fluorescent lights. Jaundice usually appears first in the face and then moves to the chest, abdomen, arms, and legs as the bilirubin level increases. The whites of the eyes may also be yellow. Jaundice may be harder to see in babies with darker skin.

Can jaundice hurt my baby?

Most babies have mild jaundice that is harmless, but in unusual situations the bilirubin level can get very high and might cause brain damage. This is why newborns should be checked carefully for jaundice and treated to prevent a high bilirubin level.

Does breastfeeding affect jaundice?

Jaundice is more common in babies who are breastfed than babies who are formula-fed. If you are breastfeeding, you should nurse your baby at least 8 to 12 times a day for the first few days. This will help you produce enough milk and will help to keep the baby's bilirubin level down. If you are having trouble breastfeeding, ask your baby's doctor or nurse or your lactation specialist for help. Breast milk is the ideal food for your baby.

When should I call my baby's doctor?

Call your baby's doctor if: Your baby's skin turns more yellow; your baby's abdomen, arms, or legs are yellow; your baby is jaundiced and is hard to wake, fussy, or not nursing or taking formula well.

How is harmful jaundice prevented?

Most jaundice requires no treatment. When treatment is necessary, placing your baby under a special light while he/she is undressed will lower the bilirubin level. This can safely be done in the hospital. Treatment can prevent the harmful effects of jaundice.

When does jaundice go away?

In breastfed babies, jaundice often lasts for more than 2 to 3 weeks. In formula-fed babies, most jaundice goes away by 2 weeks. If your baby has jaundice for more than 3 weeks, see your baby's doctor.



2 DAY CHECKUP

Date: _____

Weight: _____

Next Visit: **2 Weeks of Age**

Feeding Your Baby

- Feed only breast milk or iron-fortified formula in the first 4 months.
- Feed when your baby is hungry: Puts hand to mouth, sucks, roots, or is fussing.
- Healthy babies do not require extra water.

If Breastfeeding

- Breastfeed 8-12 times per day.
- Make sure your baby has 6-8 wet diapers a day.
- You can still call the lactation specialist at the hospital where your baby was born with questions about breastfeeding.

If Formula Feeding

- Offer your baby 2 oz. every 2-3 hours.
- Do not prop the bottle.
- Because formula is expensive, you may be hesitant to throw any away that is left in the bottle. For food safety reasons, if your baby has not taken all of the formula at one feeding and you plan to continue using it, you should put it back in the refrigerator. Do not mix this formula with new formula. If the formula has been heated and has been out of the refrigerator for 1 hour or more, discard it.
- If you are thinking about switching brands of formula, talk to your pediatrician first.

Baby Care

- Cord care recommendations include keeping the cord dry (no submersion baths) and keeping the diaper below the cord until the cord falls off (about 10-14 days). There may be some slight bleeding for a day or two after the cord falls off. Call our office if there is a bad smell, redness, or fluid from the cord area.
- If your baby is fussy or feels warm, check for fever, which is a rectal temperature of 100.4°F/38.0°C or higher. Do not use an ear thermometer.
- In babies 3 months and younger, fevers can be serious. Call us if your baby has a temperature of 100.4°F/38.0°C or higher.
- Do not give medicine unless instructed.
- Have a list of phone numbers for emergencies, including poison control.
- Have everyone who touches the baby wash their hands first.
- Avoid crowds to minimize exposure to germs.

Getting Used to Your Baby

- Start routines for bathing, feeding, sleeping, and playing daily.
- Help wake your baby for feedings by patting, changing diaper, or undressing.
- Always put your baby to sleep on his/her back in his/her crib (not your bed).
- Do not put loose, soft bedding or toys in the crib such as comforters, pillows or pillow-like bumper pads.
- Use a crib with slats no more than 2 3/8" apart.
- Don't let your baby get too warm or cold.

Safety

- Refer to Car Seat Safety handout provided at this visit for further details.
- Your baby should never be in a seat with a passenger air bag.
- Keep your car and home smoke-free.
- Keep your baby safe from hot water and hot drinks. Do not drink hot liquids while holding your baby.
- Make sure your water heater is set lower than 120°F.
- Always wear a seat belt and never drink and drive.

How You are Feeling

- Call us for help if you feel sad, blue or overwhelmed for more than a few days.
- Try to sleep or rest when your baby sleeps.
- Accept help from family and friends.
- Give your other children small, safe ways to help you with your baby.
- Spend special time alone with each child.
- Maintain family routines.

Get a Pertussis Vaccine!

- Pertussis, also known as whooping cough, can be serious for adults, but infants are the most vulnerable. They can have severe complications and even be hospitalized. Studies show that when the source can be identified, family members are the source of up to 83% of the cases transmitted to infants.
- Protecting your infant from pertussis is very important. Ask us how you and your family can get your pertussis vaccination today!