4 Month Check Up

Well Child Appointments can be made online at AustinRegionalClinic.com.

Feeding Patterns
Continue to gauge your infant for signs of fullness. At four months, signs that your baby may not want to eat any more include:

- Bites nipple
- Blocks mouth with hands
- Turns away
- Cries or fusses if feeding persists
- Increases attention to surroundings
- Loses interest in feeding
- Releases nipple and withdraws head

Breastfed Infants
Most infants need at least six to ten breast-feedings in a 24-hour period until solid feedings are well established.

Formula-Fed Infants
Most formula-fed infants take four to six bottles a day. At this age, 32-36 oz a day of formula is typical.

Solid Foods: When to Start
Non-milk baby foods are referred to as solid foods or solids. Solids may be started between four and six months of age, although most experts recommend closer to six months than four months. When to start solid foods has more to do with developmental readiness and nutritional needs rather than age. Many babies are content with exclusive breastmilk or formula until six months of age. Here are some common clues to help decide if your baby is ready to start solids:

- Increased appetite
- Improved head and neck control
- Increased interest in watching family members eating

Solid Foods: How to Start

Spoon-feeding
Babies are born with a tongue thrust reflex. Because of this reflex, a young infant will push her tongue against a spoon or anything else placed in her mouth. This reflex goes away around four months, allowing a baby to be fed with a spoon. Be careful not to interpret this reflex as your baby “not liking” a certain food.

Learning to be spoon-fed teaches your baby the process of eating and allows her to stop when full. At first you may need to at least partially breastfeed or give part of a bottle to take the edge off your baby's hunger immediately before attempting to spoon-feed. Use a spoon that will easily fit into your baby’s mouth and place a small amount of food on the spoon. Gently keep trying, even if at first your baby does not accept the spoon and turns her head. She will catch on.

Feeding your baby should be fun for both of you. If your baby absolutely refuses or is unable to spoon-feed after a few days then stop, go back to exclusive breast or bottle feeding for a while, then try spoon-feeding later. Try again in a few weeks. Once your baby becomes skilled at spoon-feeding, you may wait until after eating solid foods before breast or bottle feeding. As solid intake increases, milk intake will gradually decrease.

Increased appetite
One common clue that your baby is ready to start solids is an obvious increase in appetite. Your baby may start to feed more frequently. A single day or two of increased appetite may only mean a growth spurt, but a growth spurt that seems endless probably means that a milk-only diet is not enough and it is time for solids.

Avoid putting cereal in your baby’s bottle, unless directed by your physician. Contrary to popular belief, cereal in bottles does not help your baby sleep through the night. Sleeping through the night is actually stimulated by good sleep hygiene which includes having a sleep routine and teaching your baby to fall asleep without being held or being fed. Cereal in your baby’s bottle can lead to your baby being overfed.

Improved head control and neck strength
Your baby should be able to hold her head up well. Even cereal and strained baby foods should not be offered until a baby holds her head up well when propped to sit.

Interest in foods
Your baby may start to show an interest in food. She may start watching you intently as you eat. Some babies will even open their mouths as you eat. Remember, you are the most important person to establish healthy eating habits for your baby. Evidence shows that infants’ feeding patterns too often reflect our society’s poor dietary habits, including high intakes of high-fat and high-sugar items. It is critical that you evaluate what you are modeling for your child to eat, and try to model healthy eating habits.

Clues your baby is ready for starting food:
- Increased appetite
- Improved head and neck control
- Increased interest in watching family members eating

Your baby’s length, weight, head size, along with health screens and immunizations performed will be in the After Visit Summary (AVS) that your baby’s provider or nurse will give you at the end of the visit. You can also view this information on MyChartARC.com

Online Access: Day or Night
- View your child’s medical records.
- Book your child’s next appointment.
- Review your child's AVS (After Visit Summary)

— Enroll Today —
Visit MyChartARC.com
introducing foods does not change this. It is fine to puree your own cooked vegetables and fruits or use prepared or packaged baby foods. Do not add seasonings such as salt or sugar.

**Meats**

Meat introduction between four to seven months is helpful to reduce iron and zinc deficiency in breastfed babies.

**Water and Juice**

For the first six months, additional water is not necessary. Most babies will get all the fluid they need from breastmilk or formula. Juice is not recommended, except perhaps to occasionally help with constipation (ask your doctor about how much to give).

**Preventing Anemia**

Infants born at term have sufficient iron stores until four to six months of age. Babies and toddlers between the ages of six to 24 months are at risk of iron deficiency, especially breastfed infants. This is a period of rapid growth when newborn iron stores are depleted and dietary iron intake is frequently inadequate.

Starting at four months of age the American Academy of Pediatrics (AAP) recommends iron supplementation for breastfed infants. One can provide sufficient iron by giving either one ml a day of a multivitamin with iron, like Tri-Vi-Sol with Iron or Poly-Vi-Sol with Iron. This shouldn’t be too much of a change since your breastfed baby should be taking a vitamin D supplement already. Another way to supply iron to breastfed babies is to feed one to two servings (four tsp dry cereal each) of iron-fortified infant cereals or meats. Discuss options with your child’s doctor if you have questions. Formula-fed infants receive sufficient iron in formula and do not need iron supplementation.

**Safety**

**Falls**

Since your baby may be rolling over by now, never leave your baby on a changing table, bed, sofa or chair. If left unprotected, he will fall. Put him in a safe place such as a play yard (playpen) or crib when you cannot hold him. If he is in an infant seat, or stroller, make sure that he is buckled in properly. Infants can be intentionally “thrown” out of a car seat if the seat is picked up and the baby is not buckled in place properly.

**Childproofing Your Home**

The time to be sure your house is safe is before your baby is mobile. Put all medicines, poisons, cleaning supplies, and vitamins in locked cabinets. Plug up electrical outlets and be sure electrical cords are secured behind furniture so your baby will not pull on a cord, bite on it, or pull a lamp off a table. Put gates at the top and bottom of stairs. Close the doors to other rooms, especially bathrooms. Become accustomed to keeping books, magazines, newspaper, and wastebaskets out of your baby’s reach.

Keep the number to the Poison Center in your phone and posted on your refrigerator: 1-800-222-1222. If you ever suspect your child has swallowed or put any non-

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**What is Baby Led Weaning?**

This refers to a different plan of feeding your baby. Parents who choose baby led weaning often skip baby foods that are pureed and instead feed their baby soft table foods. Typically soft table foods are offered starting after six to seven months old. If you choose to do this, it is important that foods which could be choking hazards (round or hard foods) are not offered until you baby is past four years old and can tear and grind foods effectively. As with all feeding plans, it is important to offer a wide variety of fruits, vegetables, and meats or proteins.

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**Gauge the amount of solid food to feed your baby by your baby’s signs of hunger and fullness. An infant shows hunger by moving her head forward to reach the spoon and swiping the food toward her mouth. She can indicate that she’s full or doesn’t want food by blocking or closing her mouth, increasing attention to surroundings, turning away, or crying.**

**Frequency of meals**

One to two solid feedings a day are sufficient at this age. Although it is fine to wait until six months of age to start solids if your baby is content and growing well.

**Solid Foods: What to Start**

While there are many opinions about feeding babies, there is no clear medical evidence that introducing solid foods in any particular order has an advantage for your infant. Allergy experts no longer recommend avoiding certain foods like eggs, nut products, fish, or wheat until a year of age when these awakenings occur. You can help by making middle of the night contacts brief and boring. Try to discontinue middle of the night feedings. Try to resist the urge to rush in when you first hear your baby cry out during the middle of the night.

If the crying continues, go to the crib, pat him in a calming manner, but try not to pick him up. As soon as he calms down, return to your bed and let him fall back asleep. If he begins to cry again, wait a little longer before going back for another soothing visit. Discuss any concerns about sleep you may have with your baby’s provider.

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**Infant Cereals**

The traditional first food for most infants is single grain iron-fortified cereals. Infant cereals are iron-fortified and easy to digest. For many years families have offered rice cereal as a first food, often daily. The FDA has found variable levels of arsenic (a poison) in rice and rice products. Because of this, the American Academy of Pediatrics has recommended that babies and children eat foods that come from a wide variety of grains.

**Fruits and Vegetables**

It is not important whether or not you give fruits or vegetables first. Babies are born with a preference for sweets; the order of

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**Care of Your Child**

**Prevention of Sleep Problems**

Your baby should get between nine to 12 hours of sleep at night and one to four naps a day that last between 30 minutes and two hours.

As discussed in the two month visit newsletter, establish a soothing bedtime routine and place your baby to bed drowsy but not asleep. Your baby must learn to put himself to sleep. Learning to fall asleep without being rocked or fed to sleep is a skill that must be learned before being able to sleep through the night.

All babies, like the rest of us, have several partial awakenings each night. Soon after four months most babies learn how to self-soothe and fall back to sleep on their own
Development

Language
Your baby should be able to laugh and turn her head to voices. Some babies will even mimic sounds.

Social
Babies this age enjoy looking around and are entertained by direct social interaction.

Gross Motor (Movement)
Your baby should start rolling over soon. While on her stomach she should start raising her trunk and supporting herself with her wrists.

Fine Motor (Hand and Finger Skills)
Babies at this age reach out with both arms in unison. She may grasp a rattle well but will not reach out with one hand very well.

Suggestions for Play
- Sing to your baby and let her shake a rattle or other noise maker.
- Talk to your baby about the things you are doing throughout the day.
- Hold her on your lap and make interesting noises. See if she copies you.
- Hold her in front of a mirror and ask “who is that?” Point and call her by name.
- Read books together daily.

First Teeth
Your child's first teeth usually appear around six to eight months of age but there is a lot of variability. First teeth may appear as early as three to four months of age or as late as 12-15 months of age. Your baby will begin to drool and chew on objects even though first teeth are usually months away. Opinions on what this behavior represents and how painful teething actually is varies from physician to physician and parent to parent. If you choose to treat teething, use teething rings or cool cloths rather than medications that numb the gums.

The first teeth need proper cleaning. Clean the gums and first teeth with a soft wet washcloth or a soft infant toothbrush. As soon as your baby's first tooth appears, begin brushing with a smear of toothpaste with fluoride (the amount of a grain of rice). Dental cavities are caused by bacteria that can pass from parent to child. Do not share spoons or cups with your child and do not clean your child's pacifier in your mouth, as you can pass on early cavity-causing bacteria to your child.

Early Childhood Intervention (ECI) Programs:
If you believe that your child is delayed or has a condition that could lead to delays, please ask your doctor to refer you. You may also call 1-800-628-5115 or visit the ECI website at dars.state.tx.us/ecis for the ECI program closest to you.

Food in his mouth that may be poisonous, call the Poison Center. You can call 24 hours a day, seven days a week.

Car Injuries
Most injuries can be prevented by the use of a car seat. Make certain that your baby’s car seat is installed correctly. Read and follow the instructions that come with the car seat and the sections in the owner’s manual of your car on using a car seat correctly. Use the car seat every time your child is in a car. Your infant should ride in the back seat in a rear-facing car seat until at least two years of age. For questions about car safety seats you may also call the Safe Riders Program @ 1-800-252-8255 or 1-800-SEAT-CHECK (www.seatcheck.org).

Burns
At three to five months, babies will wave their fists and grab at things. Never carry your baby and hot liquids, such as coffee, or foods at the same time. You can’t handle both. To protect your family from tap water scalds, reduce the maximum temperature of your hot water heater to 120 F. If your baby gets burned, immediately put the burned area in cool water. Keep the burned area in cool water until he quits crying, then cover the burn loosely with a bandage or clean cloth and call your baby’s doctor.

To protect your baby from house fires, be sure that you have a working smoke alarm in your home. Change the batteries at least twice a year on dates that you’ll remember, like the days that time changes for Daylight Saving and Standard Time.

To prevent sunburn and reduce skin cancer risk as an adult, avoid direct sun exposure, especially from 10am to 4 pm. Use a wide brim hat to shield the face and cover arms and legs with lightweight clothing.

Smoking
If you or another family member is a smoker, one of the best ways to protect your family’s health is to quit smoking. Smoking increases your baby’s risk of respiratory illnesses, cancers, and SIDS.

Discuss Smoking Cessation with Your Family Physician:
Texas Tobacco Quit Line 1-800-QUIT-NOW (1-800-784-8669) quitnow.net/texas

Sleep On Your Back
To prevent possible suffocation and reduce the risk of Sudden Infant Death Syndrome (SIDS), your baby should always sleep on his back alone on a sleep surface separate from parents or siblings.

Never place your baby to sleep on the couch/sofa, water bed, bean bag, or anything that is soft enough to cover the face up and block the nose.

Do not use crib bumper pads. Bumper pads, especially soft, pillow-like pads, are suffocation risks.
Reading Suggestions and Resources

Websites

healthychildren.org
American Academy of Pediatrics | parenting website

healthychildren.org/growinghealthy
Dynamic interactive website to help encourage healthy habits for children 0 to five years of age.

vec.chop.edu
The Children's Hospital of Philadelphia | information on vaccines

cdc.gov/vaccines/parents/index.html
National Immunization Program

seatcheck.org
Information about car seats

ilca.org/i4a/pages/index.cfm?pageid=3337
Website to find lactation consultation

For Parents with iPhones:

KidsDoc Symptom Checker
HealthyChildren.org, by the American Academy of Pediatrics (AAP), offers this new interactive tool to help parents evaluate their child’s symptoms. The KidsDoc Symptom Checker allows parents to choose from a wide range of symptoms, then follow the symptom decision chart to determine the appropriate action to take, whether it be home care or a trip to the emergency room.

Available as an iPhone app called KidsDoc.

Books

Caring for Your Baby and Young Child, Revised Edition: Birth to Age 5
The American Academy of Pediatrics.

Baby 411: Clear Answers and Smart Advice for Your Baby’s First Year
Ari Brown, MD and Denise Fields.

Your Baby and Child: From Birth to Age 5
Penelope Leach

Infants and Mothers: Differences in Development
Terry Brazelton

Access to Care 24/7

24-Hr Appointment Scheduling
visit MyChartARC.com or ARCappointments.com

Appointments are easy at ARC. Call your clinic 24/7 to speak with a patient services representative or make an online appointment request. You can also book directly with your primary care doctor on ARC MyChart!

Same-Day & After Hours Care
call your ARC clinic and press “4”

Make an appointment for an illness or injury at an ARC clinic close to your home. Same-Day appointments are available to you days & nights, weekends, and holidays.

24-Hr Phone Nurse

call your ARC clinic and press “4”

Our 24-hr Phone Nurse is available at all ARC clinics to give you advice, reach an on-call physician, or make an appointment for you when you or a family member are ill.

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