

Infant/Newborn Information

How do I choose a pediatrician?

Choosing a pediatrician is an important part of the preparation for your newborn's arrival. Not only will the physician you choose for your infant be an important part of your child's life, but the parent's lives as well. Your pediatrician's guidance will provide expert information about your needs and the health of your child. Your pediatrician will care for your child from birth and for many, throughout their teenage years as well. A good pediatrician will be a wonderful resource for you!

Finding the right pediatrician for your family may not be an easy task. It is important to find a physician for your baby that makes your children feel at ease as they grow. The first steps in your search could be to talk to your friends, coworkers and neighbors. Who do they take their children to for medical care? Also, you can visit the American Academy of Pediatrics website (www.aap.org). You will find many useful tools to search for pediatricians in your area. It is important to look at the location of their offices. Many pediatricians prefer their newborn patients to live within 20-30 minutes from their office. It is important to note the initials "FAAP" after the physician's name. These credentials denote the practitioner has passed the American Academy of Pediatrics exam and is now a Fellow of the American Academy of Pediatrics. Your FAAP pediatrician is an expert in taking care of children! Once you have selected a few names, you are now ready to narrow your search for your best match.



Main Line Health System (MLHS) is dedicated to the health and well being of your family. You may visit the MLHS website (www.mainlinehealth.org) to learn more about any physician in the MLHS directory or you can call 1-866-CALL-MLH (1-866-225-5654) to discuss MLHS physician referrals.

Are there pediatricians that I can call and discuss questions that I may have before the baby arrives?

MLHS Birth and Beyond programs offers a "Getting Ready for Baby" class. This two-hour class will provide you with the opportunity to listen to a MLHS pediatrician and participate in a one-hour question and answer session. The second part of the program will discuss getting your home ready for your baby. To find out more, log onto www.mainlinehealth.org and click the "Maternity Services" tab for class schedules and location details. In addition, some pediatric offices will offer a 'Get Acquainted' or prenatal visit time for expectant/new parents.

What if the pediatrician I choose does not practice at the hospital that I will be delivering?

The Mainline Health System has patients from all over the region. Doctors choose which hospitals they are affiliated with. Don't worry! If your doctor cannot care for your baby in the hospital in which you deliver, a member of our pediatric staff will care for your baby during their newborn hospital stay. At discharge, we will provide documentation of your baby's hospital stay for you to take to your first pediatrician visit.

Some sample questions for your pediatrician

The Academy of Pediatrics recommends asking the following questions to your prospective pediatricians. We have created a printable checklist for use as a worksheet. Although this process is an investment of your time, finding the right pediatrician for your growing family will prove to be priceless.

Is the pediatrician's office accepting new patients? _____

Does the pediatrician's office accept your insurance plan? _____

How does the office handle billing and co-payments? _____

What are their office hours? _____

Do they have evening hours? _____

Do they have weekend hours? _____

How quickly will they see a child who is ill or experiencing a fever? _____

Is emergency coverage available 24 hours a day, 365 days a year? _____

What types of communication does the office provide? _____

Call in phone hours _____

Email _____

Website _____

Are there nurses available to answer questions or concerns during office hours? _____

Are there multiple office locations? _____

Is there access to public transportation at the office location? _____

Which hospital is the practice affiliated with? _____

Does the physician have experience in caring for a child of special needs? _____

Other topics to discuss:

Circumcision: _____

Is there an opportunity to meet the physicians and staff prior to the baby's arrival? _____

Sleep, immunization and infant feeding philosophies: _____



Shaken Baby Syndrome

Shaken Baby Syndrome or SBS is when a baby is “shaken” forcefully. The movement of the baby’s head back and forth can

cause bleeding and increased pressure on the brain. A baby’s neck muscles are not strong enough to tolerate this “whiplash” motion, and the brain is too fragile to handle it. SBS is one of the leading forms of child abuse. Many babies die. Many others have irreversible brain damage. Those who survive may be blind, have mental retardation, paralysis, seizure disorders, learning and speech disabilities or neck and back damage.

If you are a parent of a new baby, there may be times when you will become frustrated and maybe even angry when your baby cries. You may have tried everything to comfort him, but nothing seems to help. Sleep is hard to come by and you may find yourself at wit’s end. The number one reason that a baby is “shaken” is for “non-stop” crying.

If you are feeling as if you cannot deal with your baby’s crying and you have met the baby’s basic needs (clean diaper, fed, appropriate clothes, gently rocked, held, etc.) then stop, think and reach out for help if you need it. **DO NOT SHAKE YOUR BABY.** If you think your baby has been shaken... go to the emergency room.

Here is a list of things to think about if you become frustrated:

- REMEMBER – NEVER THROW OR SHAKE YOUR BABY NO MATTER WHAT.
- Take a breath.
- Close your eyes and count to 10.
- Put the baby down in his crib and leave for a few minutes to gain composure.
- Ask a friend, neighbor or family member to take over for a while.
- Give yourself a “timeout.”
- Do not pick the baby up until you feel calm.
- If you feel he is ill, call your healthcare provider right away or take him to the hospital.

If you or a caregiver has violently shaken your baby because of frustration or anger, the most important step you can take is to seek medical attention **IMMEDIATELY**. Do not let fear, shame or embarrassment keep you from doing the right thing. Getting the necessary and proper treatment without delay may save your child’s life.

Signs and symptoms of Shaken Baby Syndrome

- Irregular, difficult or stopped breathing
- Extreme crankiness
- Seizures and vomiting
- Tremors or shakiness
- Difficulty staying awake
- No reaction to sounds or acts lifeless

Helpful Resources

The National Coalition on Shaken Baby Syndrome

mail@dontshake.com

www.dontshake.com

1-888-273-0071 (toll free)

The Shaken Baby Alliance

info@shakenbaby.com

www.shakenbaby.com

1-877-6ENDSBS (toll free)

National Institute of Child Health

& Human Development

NICHDClearinghouse@mail.nih.gov

www.nichd.nih.gov

1-800-370-2943

The ARC

info@thearc.org

www.thearc.org

1-301-565-3842

Prevent Child Abuse America

mailbox@preventchildabuse.org

www.preventchildabuse.org

1-312-663-3520

Think First Foundation

thinkfirst@thinkfirst.org

www.thinkfirst.org

1-800-THINK-56

Sudden Infant Death Syndrome (SIDS)

Sudden Infant Death Syndrome (SIDS) is the sudden death of an infant under one year of age, which remains unexplained after a thorough investigation. One of the best ways to reduce the risk of SIDS is to place healthy infants on their backs when putting them down to sleep at nighttime or nap time. This is because recent studies have shown an increase in Sudden Infant Death Syndrome in infants who are positioned on their stomach to sleep. There is no evidence that sleeping on the back is harmful to healthy infants.

Additional tips to reduce the risk of SIDS:

- Place your baby on his back to sleep at nighttime and nap time.
- Place your baby on a firm mattress in a safety-approved crib. Do not place infants on waterbeds, sofas, mattresses or other soft surfaces. Pillows, comforters or sheepskins should not be used under the baby.
- Remove fluffy, soft or loose bedding from the sleep area. Pillows, quilts, comforters, sheepskins, pillow-like crib bumpers and stuffed toys should be kept out of the crib as they can cover your infant's head and airway.
- Keep your baby's head and face uncovered during sleep. Use sleep clothing with no other covering over the baby. If you do use a blanket, be sure the infant's feet are at the bottom of the crib, the blanket is no higher than the baby's chest, and the blanket is tucked in around the mattress to keep him safe.
- Do not smoke before or after the birth of your baby. Do not let others smoke around the baby.

- Don't let your baby become overheated during sleep. Keep the temperature of the baby's room so it feels comfortable for an adult. Dress your baby in as much or little clothing as you would wear.

Keep the following points in mind:

- Devices designed to maintain sleep position or to reduce the risk of rebreathing are not recommended since many have not been tested sufficiently for safety. None have been shown to reduce the risk of SIDS.
- Babies should be allowed supervised "tummy time" during awake periods to promote shoulder and muscle development and avoid flat spots on the back of the head.
- Keep your baby's sleep area close to, but separate from, where you and others sleep. Your baby should not sleep in a bed, on a couch or armchair with adults or other children, but he can sleep in the same room as you. If you bring the baby into bed with you to breastfeed, put him back in a separate sleep area, such as a bassinet, crib or cradle.
- Consider using a pacifier at naptime and bedtime. For breastfeeding infants, delay pacifier introduction until the baby is 1 month old to establish breastfeeding. For all babies offer a pacifier when putting down to sleep. Do not force a baby to take a pacifier. If the pacifier falls out of the baby's mouth, do not put it back into the mouth. Do not put any sweet solution on the pacifier. Pacifiers should be cleaned and checked often and replaced regularly.
- Share all of these important tips with babysitters, grandparents and other caregivers.

The information contained in this publication should not be used as a substitute for the medical care and advice of your healthcare provider. There may be variations in treatment that your healthcare provider may recommend based on individual facts and circumstances.

Main Line Health

Bryn Mawr Hospital
Lankenau Hospital
Paoli Hospital