



## 4 Month Visit

Name \_\_\_\_\_

Today's Date \_\_\_\_\_

Length \_\_\_\_\_ Weight \_\_\_\_\_

Head Circumference \_\_\_\_\_

% \_\_\_\_\_ % \_\_\_\_\_

% \_\_\_\_\_

### FEEDING:

- Whether breast or formula feeding, the number of feedings will likely decrease to 4-5 per day.
- Avoid giving your baby juice until at least 6 months of age.
- If your baby is primarily breast-fed, continue to give a Vitamin D supplement (such as D-Vi-Sol, 1 dropper daily).
- By 4-6 months of age, most babies lose their tongue-pushing reflex, and will be able to swallow solid food. Your baby's energy needs will also be increasing, so this is often a good time to introduce solid foods. Discuss this further with your healthcare provider.
- From the very start, help him or her develop good eating habits: sitting up, taking bites from a spoon, resting between bites and stopping when full.
- Start with infant rice cereal, as it is least likely to cause an allergic reaction. Mix it with breast milk or formula, and start with half a spoonful or less. Your baby will probably not eat much at first, since this is a very different experience for him or her.

- Once your baby is eating infant cereal routinely, gradually introduce new foods: other infant cereals, vegetables and fruits. Introduce a new food one at a time, waiting at least 3 days before starting another to make sure there are no allergic reactions (diarrhea, vomiting or rash).
- Follow your baby's cues to know when he or she is full. If your baby is turning his head away or crying, don't force him or her to finish a meal.

### ELIMINATION:

- There is a wide variety of normal stooling patterns, from several times a day to every few days. With the introduction of solid foods, the stools will become more solid, variable in color and have a stronger odor.

### SLEEP:

- Sleeping patterns tend to be more regular now. Many infants will sleep through the night and take 3 naps a day at this age.
- Put your baby to bed awake to help your baby learn to fall asleep on his or her own.
- Continue to place your baby on his or her back for sleeping.

## **TYPICAL DEVELOPMENTAL MILESTONES:**

- Holds head upright, may roll, may support weight on legs
- Reaches for objects; puts hands together and plays with hands
- Communicates with cooing (vowel sounds), may blow bubbles or make "raspberry" sounds
- May laugh or squeal; distinguishes primary caregivers from others

## **SAFETY:**

- Always use a rear-facing car-seat installed correctly in the back seat for travel.
- Never leave your baby unattended on a high surface, since rolling may start at 3-4 months old.
- Never hold a cup of hot liquid when holding your baby; infants often reach and grab and could get burned.
- Make sure your infant's toys are too big to swallow and do not have small detachable parts since your baby will likely put toys in his or her mouth routinely.

## **FURTHER READING:**

Caring for Your Baby and Young Child. Birth to Age 5 (AAP) or Your Child's Health (Barton Schmitt)  
The Nursing Mother's Companion (Huggins)  
What to Expect The First Year (Eisenberg et al.)  
[www.healthychildren.org](http://www.healthychildren.org)

## **DOSING OF ACETAMINOPHEN INFANT ORAL SUSPENSION (160 mg/5 mL):**

6-11 pounds = 1.25 mL (40 mg)  
12-17 pounds = 2.5 mL (80 mg)  
18-23 pounds = 3.75 mL (120 mg)

## **TODAY'S IMMUNIZATIONS:**

- Pentacel #2 (DaPT, IPV, HiB), Prevnar #2 and RotaTeq #2

## **WHAT'S NEXT?**

- Next check-up is at 6 months.
- Your baby will receive a physical exam and the Pentacel, Prevnar and RotaTeq vaccines. The influenza vaccine will also be given if it is fall/winter season.