



## Your 4-Month-Old Infant

### Feeding

- Breastfeed your baby on demand, about 5–8 times per day. Continue giving vitamin D to your breastfed (or mostly breastfed) baby.
- If you are using formula, it should be iron fortified. Feed on demand, typically about 5–7 ounces per feeding, or 28–32 ounces per day. By six months, some babies may drink up to 36 ounces per day.

### Introducing solids

- Most babies lose their tongue-thrust reflex by 4–6 months of age, and are able to swallow solid food. If your baby is watching others eat and can sit with support, he/she may be ready. If your baby is not ready until six months, that is also fine.
- Infant rice or oatmeal cereals are appropriate first foods. Mix with breast milk or formula and spoon-feed. Do not put cereal in the bottle. Eating from a spoon is a new experience for your baby; just a few bites is a meal in the beginning.
- Gradually introduce new pureed foods one at a time. Wait at least three days before starting each new food to make sure there are no allergic reactions (diarrhea, vomiting or rash).
- Avoid giving juice. Pureed foods are more nutritious than juice.
- Most babies eat one meal to start, advancing to three meals a day by 6–8 months. Encourage variety, and make mealtime fun. Follow your baby's cues. If your baby is turning his/her head away or crying, don't force him/her to continue eating.

### Elimination

- Normal stool patterns vary, from a few times a day to every few days. When solid foods are introduced, stools become more variable in color, odor, and consistency.
- Spitting up is very common. If your baby is content after feedings, and growing well, this is not a concern.

### Sleep

- Many babies are developing more regular sleep patterns. Some 4-month-olds can sleep through the night without being fed or held. About three naps per day is typical.
- To help your baby learn to fall asleep on his own, put him down while drowsy, but awake. Sleep training is possible at this age; we can help you think about your options.
- Continue to put your baby to bed on his back. Swaddling is no longer recommended.

### Development

- Continue to encourage tummy time. Your child may be rolling over. Encourage this developmental task by playing on the floor with your child.
- Jumpers, exersaucers, swings and bouncer chairs can be fun, but it is more important for your baby to spend time on the floor at this age.
- Do not buy a walker for your baby — they are dangerous (and illegal in Canada).
- Most 4-month-olds are able to vocalize, laugh, make eye contact and track, reach and grab objects, bear weight on legs and sit with support.
- Chewing and drooling may be evident, although teeth usually don't appear until 6–7 months or later. Teething toys are helpful. We do not recommend numbing teething gels.

### Safety

- Always use an infant car seat, rear-facing, in the back seat.
- To prevent burns, set your hot water heater no higher than 120° F, and never drink hot liquids while holding your baby.
- Never leave your baby unattended on a bed, sofa, changing table, or in the bathtub.
- Make sure your baby's toys are too big to swallow. For a list of toys that have been recalled visit [cpsc.gov](https://www.cpsc.gov).
- Avoid direct sun exposure by using clothing, hats and shade. Sunscreen (SPF 30 or higher) may be used on exposed areas.
- Shaking or spanking your baby may cause serious injury or death.

## Fever/Illness

- Fever is a common symptom in children, usually caused by the immune system's response to an infection. Any temperature over 100.4° F is considered a fever. Once you've identified a fever, you can treat it with acetaminophen to make your child more comfortable. Depending on other symptoms, it may be necessary to come to the office, or you may be able to manage it at home.
- More important than the number on the thermometer is how your child looks and acts. If your child is interactive after receiving acetaminophen, that is a good sign.
- Please call our office to report fever that lasts more than 2–3 days, or is accompanied by other concerning symptoms (decreased drinking, decreased urine output, labored breathing, or your child looks very ill to you).
- A rectal thermometer is the most accurate way to check a baby's temperature. Being prepared can help you cope with fever. Keep your thermometer handy, have acetaminophen and dosing information available, and take these with you when travelling.

## Disease prevention

We follow the vaccine schedule recommended by the American Academy of Pediatrics. If you have questions or concerns about vaccines, please visit [vaccine.chop.edu/parents](http://vaccine.chop.edu/parents).

## Reaching us

If you have concerns, please do not hesitate to call the office to speak to a nurse. Nurses return calls throughout the day. You may also leave a non-emergent message for your doctor or nurse practitioner, who will return your call by the end of the day. For emergencies, a doctor is on call when the office is closed.

## Resources

- A good website to bookmark for future reference is [healthychildren.org](http://healthychildren.org).
- We suggest having the Illinois Poison Control Center phone number handy: [800.222.1222](tel:800.222.1222).

## Today

Your baby will receive the Pentacel (DTaP, HiB, Polio), Prevnar and Rotateq vaccines.

## At the 6-month check-up

Your baby will receive the Pentacel (DTaP, HiB, and IPV), Prevnar and Rotateq vaccines.

### Acetaminophen Dosing Instructions (no ibuprofen until 6 months)

Every 4–6 hours and no more than 4 doses/day

Weight	Dose	Infant <b>OR</b> Children's suspension 160 mg/5 mL
6–11 lbs	40 mg	¼ tsp or 1.25 mL
12–17 lbs	80 mg	½ tsp or 2.5 mL