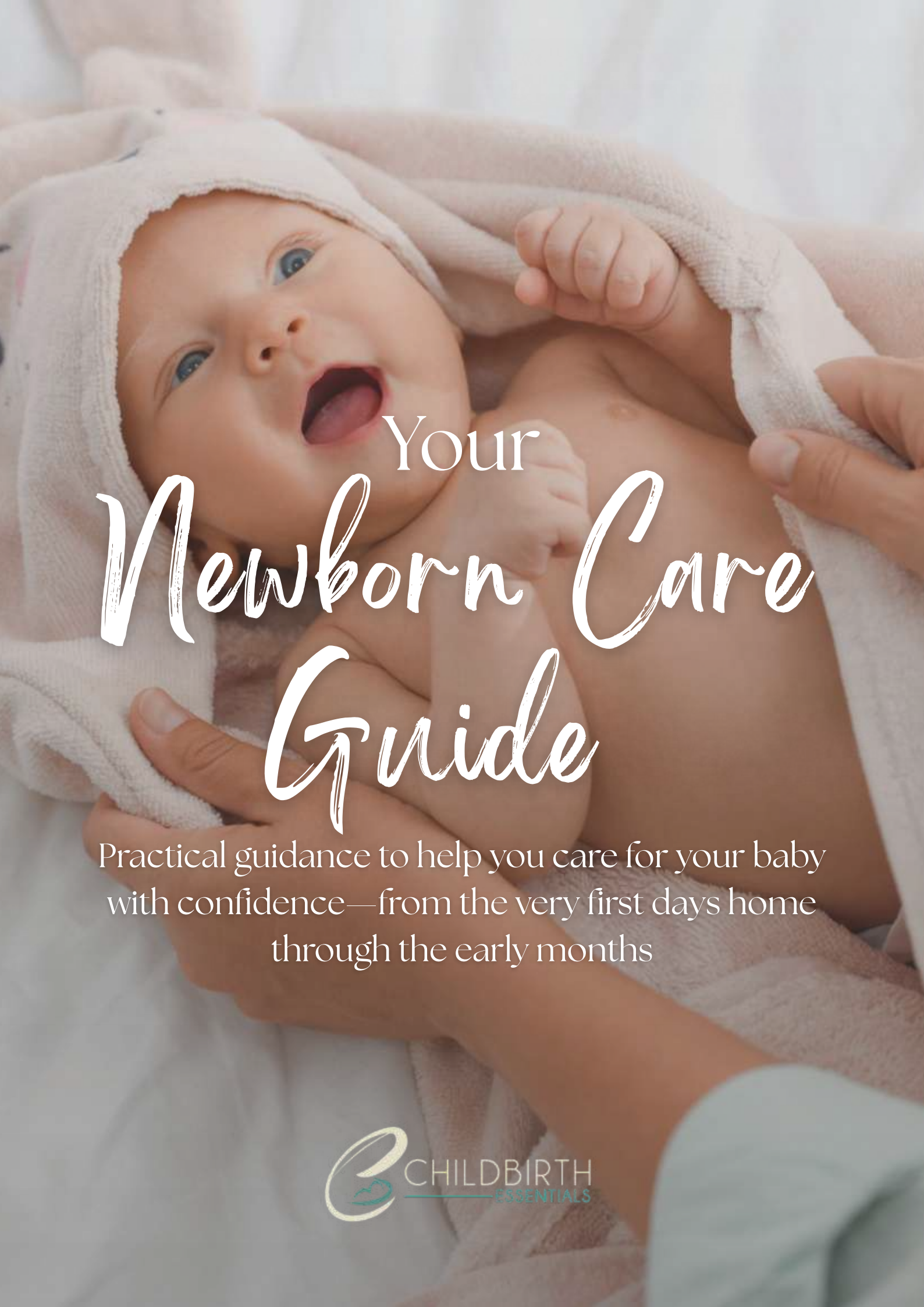




Your Newborn Care Guide

Practical guidance to help you care for your baby
with confidence—from the very first days home
through the early months

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This guide is provided for educational and informational purposes only. It is not intended to replace medical advice, diagnosis, treatment, or the guidance of your doctor, paediatrician, midwife, lactation consultant, or other qualified healthcare professional.

Every baby, parent, birth, and recovery experience is unique. The information in this guide is general in nature and may not apply to every situation. Always follow the advice of your healthcare provider, especially if your baby was born prematurely, has a medical condition, feeding difficulties, or requires specialized care.

If you are ever concerned about your baby's breathing, temperature, feeding, hydration, alertness, skin colour, vomiting, bleeding, signs of infection, or overall well-being, contact your healthcare provider immediately or seek urgent medical care.

Any product suggestions mentioned in this guide are provided for convenience and educational purposes only. They are not medical recommendations or endorsements. Always use baby products according to the manufacturer's instructions and follow current safe sleep, feeding, bathing, and newborn care guidelines in your country or region.

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Welcome & What to Expect

Welcome and congratulations
on the arrival of your baby.

The first weeks bring a big transition for your whole family. Your baby is learning how to live outside the womb, and you are adjusting to new roles, new rhythms, and new responsibilities as parents. This period is full of learning—for all of you.

It's completely normal to feel a mix of joy, uncertainty, and exhaustion. Every baby and family adjusts at their own pace. This guide is here to give both parents clear, simple information to help you understand what's normal, what to expect, and how to support your baby and yourselves during these early weeks.

What You Can Expect from Your Baby

YOUR NEWBORN IS NOT HERE TO FOLLOW A SCHEDULE YET. THEY ARE LEARNING HOW TO LIVE OUTSIDE YOUR BODY — TO REGULATE TEMPERATURE, BREATHE SMOOTHLY, FEED EFFECTIVELY, AND FEEL SAFE.

Here's what's completely normal in the early days:

1. | Feeding every 1-3 hours (sometimes more!)

2. | Sleeping in short bursts (2-4 hours at a time)

3. | Wanting to be held constantly – day and night

4. | Making squeaky or snorty noises

5. | Having irregular breathing patterns while sleeping

6. | Losing a bit of weight in the first days before regaining it



Don't worry — these behaviours don't mean something is wrong. They mean your baby is adjusting beautifully. The more comfort and closeness you can offer, the smoother this transition becomes.



Quote from a Childbirth Educator:

Your baby relies on close contact to feel safe in these early weeks. Comfort and responsiveness help support emotional regulation and security



Tip:

Keep your baby close — skin-to-skin, in your arms, or in a safe newborn carrier. This not only calms them but also helps regulate their heartbeat, temperature, and breathing.

What to Expect in the First Few Weeks

1. Emotional Changes (for all parents)

It's completely normal to feel a mix of joy, exhaustion, overwhelm, and uncertainty. Hormones, lack of sleep, and the intensity of caring for a newborn can create emotional ups and downs. Be gentle with yourselves and lean on each other. If feelings of sadness or anxiety become overwhelming or last longer than expected, reach out to your health provider.



2. Relationship Shifts

CARING FOR A NEWBORN REQUIRES TEAMWORK. MANY COUPLES NOTICE CHANGES IN COMMUNICATION, PATIENCE, AND INTIMACY DURING THE EARLY WEEKS.

Try to:

- Share nighttime duties when possible
- Be specific about what support you need
- Celebrate small wins together

This season is temporary, and partnership grows stronger through shared experiences.



3. The “Big Transition”

Everything in your family changes during this time—your identity, routines, priorities, and energy levels. Remember that adjustment takes time. You don't need to do everything perfectly; you just need to respond with love.



4. The Reality of Newborn Sleep

Newborn sleep is unpredictable in the first 6–8 weeks. Expect short stretches, frequent waking, and lots of contact naps. This is normal. Babies aren't meant to sleep long stretches yet—they rely on you to help regulate their bodies and feel safe.

The Fourth Trimester Explained

You've probably heard about the three trimesters of pregnancy — but there's a fourth one too, and it's just as important.

For your baby, this period is about adapting: learning to breathe, digest, feed, and sleep without the constant comfort of the womb.

The fourth trimester refers to the first 12 weeks after birth — a time when your baby is still adjusting to life outside the womb, and you are adjusting to life as a parent.



Quote from a Doula:

The fourth trimester isn't the end of the journey — it's the beginning of your new rhythm together.



Your Baby's World: Life Outside the Womb

Inside the womb, your baby lived in a world of warmth, constant movement, muffled sounds, and total safety. The outside world, in comparison, is bright, cold, quiet, and full of sensations. This change can be overwhelming for them — which is why newborns crave closeness, motion, and gentle sounds.

Tip:

When your baby cries, imagine they're saying, "I miss the womb." Offer the sensations they remember — warmth, movement, closeness, and gentle sound.

Here's what helps your baby feel "at home" during this transition:



Warmth

keep the environment comfortably warm and dress baby in one more layer than you're wearing.



Sound

soft shushing, white noise, or even your heartbeat calms them.



Feeding often

breast or bottle, frequent feeds make them feel secure and nourished.



Motion

gentle rocking, babywearing, or swaying mimics the soothing movements they felt inside you.



Touch

skin-to-skin contact provides familiarity, comfort, and regulation.



Smell

familiar scents, especially mom's natural smell, help babies feel safe and comforted.

The Science Behind the Fourth Trimester

Studies show that babies are born with immature nervous systems. They need roughly 12 more weeks of external regulation — meaning you help them stay calm, warm, and fed while their systems mature.

Your voice, your smell, your heartbeat, your touch — all of these literally shape your baby's brain. When you respond to their cries, you teach them safety and connection. Over time, this builds emotional resilience and trust.

— In simple terms: —

**Your baby doesn't
"learn to manipulate."**

They learn to trust.

Tip:

Responding quickly to your baby's needs doesn't spoil them — it strengthens their ability to self-soothe later on.

Welcome to Life with Your Newborn

The first few weeks with your baby will be unlike anything you've experienced before — **magical, messy, emotional, and deeply transformative**. The days may blur together, and that's okay. This is not about schedules or perfection; it's about bonding, healing, and adjusting to a brand-new rhythm as a family.

Your baby has just made one of the biggest transitions a human can make — from the cozy, dark, constant warmth of the womb to a bright, cool, noisy world filled with new sensations. You, too, have been through an enormous transition. Your body, hormones, and emotions are shifting rapidly as you recover from birth and begin your new role as a mother. This period is about connection, nourishment, and rest, not routines or expectations. Your only job is to get to know your baby and yourself in this new chapter.

It's a time of discovery:

You're learning about your baby, and your baby is learning about life outside the womb.

What's Normal in the First Weeks

HERE'S WHAT YOU CAN EXPECT — AND WHAT'S COMPLETELY NORMAL:

Frequent Feeding

Newborns have tiny stomachs and need to eat often — **usually every 2–3 hours, or 8–12 times in 24 hours**. This includes nights. Cluster feeding (feeding very frequently for several hours) is also normal and helps boost your milk supply.

Unpredictable Sleep Patterns

Newborns sleep a lot — **up to 16–18 hours a day** — but not in long stretches. Their sleep cycles are short, and they often wake for feeds or comfort. Don't worry about creating bad habits. Right now, you can't spoil your baby — you can only meet their needs.

Crying and Communication

Crying is your baby's only way to communicate at first. **They might cry because they're hungry, tired, overstimulated, cold, hot, gassy, or simply need comfort**. Over time, you'll begin to recognize their different cries and cues — it's like learning a new language.

Diaper Changes

Expect 8–12 diaper changes a day. In the first days, stools transition from dark meconium to mustard-yellow if breastfeeding (or tan if formula-fed). Diapering may feel overwhelming at first, but you'll soon become an expert!

Emotional Rollercoaster

You may feel euphoric one moment and tearful the next. Hormonal changes, sleep deprivation, and the intensity of new motherhood can make emotions unpredictable. **This is normal.** Be gentle with yourself and ask for help if you need it.

WHAT IS THE FOURTH TRIMESTER?

Bonding with Your Baby

Bonding doesn't always happen instantly — and that's perfectly okay. It's a process, built through touch, eye contact, feeding, and simple moments of closeness.

TRY:



Skin-to-skin time
(we'll talk more about this later)



Talking softly to your baby — your voice is their favorite sound



Making eye contact during feeds



Gently stroking their head or holding their tiny fingers

These small gestures strengthen attachment and help your baby feel safe and loved — the foundation for their emotional and physical development.



Doula's Note

"The first weeks aren't about routines or rules — they're about connection. Your baby doesn't need perfection; they need presence. Hold them close, breathe them in, and remind yourself that you're both learning together."

Sharon,

Doula & Childbirth Educator

Suggested Products for the First Weeks



Nursing pillow

supports feeding and relieves arm strain



Soft newborn wrap or carrier

keeps baby close while freeing your hands



Burp cloths and muslin blankets

for feeding, swaddling, and messes



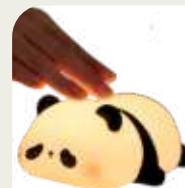
White noise machine

recreates the womb sound and helps baby settle



Bassinet or bedside sleeper

keeps baby safe and close at night



Night light with soft glow

convenient for nighttime feedings and diaper changes

Feeding Your Newborn

Nourishment, Connection, and Comfort

Feeding your baby isn't just about nutrition — it's one of the most powerful ways to bond and comfort your little one. Each feed is an opportunity for connection, communication, and closeness. Whether you're breastfeeding, formula feeding, or combining both, your baby is nourished by your love just as much as by milk.

In the first months, feeding can feel like the center of your world — and that's completely normal. Babies eat often, and the process may take time to learn. You and your baby are a team learning together. Be patient with yourself, trust your instincts, and know that **there's no single "right" way** to feed your baby — only the way that works best for you both.

How Often Should Your Baby Eat?

Newborns have very small stomachs — about the size of a marble at birth — which means they need to feed frequently.

Days 1-7:

every 2-3 hours

8-12 times
in 24 hours

Weeks 2-4:

every 2-4 hours,

sometimes more often
during growth spurts

At night:

every 2-4 hours

many newborns still
wake to feed

Some babies cluster feed — eating many times close together for a few hours — especially in the evenings or during growth phases. This is normal and temporary, even if it feels endless. Cluster feeding helps stimulate your milk supply and reassures your baby through closeness.

Understanding Hunger Cues

Feeding on demand — responding to your baby's cues rather than the clock — helps establish a strong feeding rhythm and keeps your baby content.

Early hunger cues:

- Stirring or waking
- Sucking on hands or fingers
- Rooting (turning head with open mouth)
- Lip smacking or small noises

Late hunger cue:

- Crying (if your baby is crying, try to calm them first before feeding)

Over time, you'll learn to recognize your baby's early signals and feed before they get upset, which makes feeding smoother and more relaxed for both of you.

Breastfeeding Basics

Breast milk is a complete, living food — uniquely designed for your baby's needs. It changes from day to day and even within each feed to provide the right balance of nutrients, antibodies, and hydration.

Positions to Try:

- 1 Hold your baby close, tummy-to-tummy.
- 2 Bring the baby to your breast (not the other way around).
- 3 Support your breast with your hand in a "C" shape and gently touch your nipple to your baby's upper lip.
- 4 Wait for a wide open mouth, then bring the baby in quickly for a deep latch.

A good latch usually feels like a strong tug, not pain. You should see your baby's chin touching your breast, lips flanged outward, and hear swallowing after a few sucks.

Tip:

Remind moms that what they eat can also affect their breast milk.

Positions to Try:

Try different positions until you find what's most comfortable.



Cradle hold

Football hold

great after
a C-section



Cross-cradle hold

Side-lying

perfect for nighttime
feeds and rest



Common Breastfeeding Concerns

Engorgement:

Breasts may feel hard and full when milk comes in around days 3–5. Feed often or express a small amount for relief.

Cracked nipples:

Usually from shallow latch — adjust position and use lanolin or breast milk to soothe.

Low supply worries:

Remember — frequent feeding increases supply. Most moms make exactly what their baby needs.

Clogged ducts:

Apply warm compresses, massage gently, and continue feeding on that side.

If you're struggling, reach out to a lactation consultant or postpartum doula early.

Small adjustments often make a big difference.

Formula Feeding

Formula feeding can also be a wonderful, nourishing experience. Hold your baby close, maintain eye contact, and feed slowly — just as you would with breastfeeding. This is called “paced bottle feeding.”



Tips for Formula Feeding:

1. Prepare formula exactly as directed (measure carefully and use safe water).
2. Always test milk temperature before feeding.
3. Hold the baby semi-upright, supporting their head.
4. Hold the bottle horizontally – not tipped – to slow the flow and allow pauses.
5. Stop when your baby turns away or loses interest; never force more milk.



Choosing Formula:

1. Most babies do well with cow's-milk-based formula.
2. If your baby has persistent gas, eczema, or fussiness, discuss options with your pediatrician (such as hydrolyzed or sensitive formulas).

Storage Guidelines:

1. Prepared formula can stay at room temp for up to 2 hours.
2. Refrigerate unused formula for up to 24 hours.
3. Never reheat or reuse leftover milk from a used bottle.

Combining Breast and Bottle

Some families choose to do both — that's completely fine! Combination feeding allows flexibility while maintaining connection and nutrition.

If you want to preserve your milk supply, pump when you skip a breastfeed, and use paced bottle techniques to avoid overfeeding.

How to Tell If Baby Is Getting Enough

Pumping Basics & Milk Storage

Whether you are exclusively pumping, combining breast and bottle, or building a small freezer stash, pumping can be a helpful tool for many families.

When to Start Pumping

- **Anytime in the first few weeks**
if you want to introduce a bottle later
- **After breastfeeding is established**
(usually around 3–4 weeks)
- **Anytime**
if baby is missing a feeding, sleeping longer stretches, or you need extra stimulation



Types of Pumps



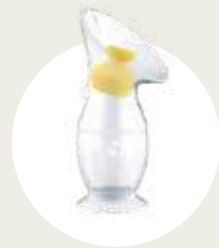
Electric pumps:

quickest and most efficient



Manual pumps:

great for occasional use or travel



Silicone collectors:

catch let-down while feeding on the opposite breast

How Long to Pump

- **10–20 minutes per session**
- Double pumping saves time and increases output

Note:

Baby should always be the priority, pump after a feed. You often have the most milk after your morning feed, so will get the most pumped milk at that time of day.

Milk Storage Guidelines

(Aligns with Health Canada recommendations)

Freshly pumped milk

Label every bag with date + amount.

Room temp
20–25°C

4 hours

Fridge
4°C

4 days

Freezer
–16 –24 °C

6 months best

up to 12 months acceptable



Thawed milk:

- Use within 24 hours
- Never refreeze

Warming milk:

- Use warm water bath, not microwave
- Swirl gently, don't shake

You can relax when you see:



At least 6 wet diapers a day
by the end of week one



3–4 bowel movements per day
(may vary later)



Steady
weight gain

If your baby seems sleepy and isn't feeding well, contact your healthcare provider.

Growth Spurts & Cluster Feeding

Expect growth spurts at around 2 weeks, 6 weeks, and 3 months. Your baby may feed much more often and seem fussier — it's temporary! These phases last a few days and help your baby grow and your milk supply adjust.



Doula's Note

Feeding your baby is not just about calories — it's a relationship. You're building trust every time you respond to their hunger, comfort them at your chest or in your arms, and offer your warmth. The way you feed doesn't define you as a mother — your love does.

Sharon,

Doula & Childbirth Educator

Quick Feeding Tips

Tip #1:

Keep your water bottle filled — hydration supports milk production and overall recovery.

Tip #2:

Have a cozy feeding corner: a supportive chair, nightlight, and snacks make feeds easier.

Tip #3:

Track feeds with an app or notebook if it helps you notice patterns.

Tip #4:

Try breast compressions to encourage milk flow during feeds.

Tip #5:

Burp halfway through and after feeding to reduce gas.



Suggested Products for Feeding

For Breastfeeding:

1. Nursing pillow (Boppy, My Brest Friend)
2. Nipple balm (lanolin or organic coconut oil)
3. Breast pads (disposable or washable)
4. Haakaa or silicone milk collector
5. Nursing bras and tanks
6. Reusable water bottle

For Formula Feeding:

1. Bottles with slow-flow nipples (Dr. Brown's, Philips Avent)
2. Bottle brush and sterilizer
3. Formula dispenser container
4. Insulated bottle bag for outings

For Pumping Moms:

1. Electric or manual breast pump
2. Milk storage bags or reusable containers
3. Pumping bra (hands-free)
4. Cooler bag for milk transport



Reassurance for Mom

Feeding can be emotional — it's one of the most personal aspects of motherhood. Some days will go smoothly, others will feel endless. You're not failing if you struggle. Every mother has moments of doubt. What matters most is that your baby is loved, fed, and comforted. Breathe, slow down, and enjoy these quiet moments — this is where connection begins.

Burping, Spit-Up & Gas

Feeding your baby is only the beginning of the digestive journey. **After every meal, those tiny bellies often need help releasing swallowed air.** Burping, managing spit-up, and easing gas are everyday parts of newborn care—and learning a few simple techniques will keep your baby (and you) far more comfortable.



Quote from a Doula:

Burping is less about perfect technique and more about patience.

A calm parent and gentle rhythm work better than any special gadget.



Why Burping Matters

Newborns swallow air while sucking and have immature digestive systems. That trapped air can make them squirm, grunt, or cry after feeding. Burping removes those bubbles before they turn into painful pressure.

When to Burp

Breastfed babies:

usually midway through and after each feeding (when switching breasts).

Bottle-fed babies:

every 60–90 mL (2–3 oz) and at the end of the feed.

Fussy feeders:

pause every few minutes to help them release air.



Signs Your Baby Needs a Burp

1. Squirming, arching, or pulling off the breast/bottle
2. Fussing during a feed
3. Clenched fists or kicking legs
4. Spitting up milk right after swallowing

Three Tried-and-True Burping Positions

You can experiment to find what feels best for you and your baby.



Over-the-Shoulder

- Hold baby upright with their head resting on your shoulder.
- Support the head and neck with one hand, pat or rub gently on their upper back with the other.
- Use a burp cloth on your shoulder—milk sometimes follows the burp!

Sitting on Your Lap

- Sit baby sideways on your thigh, supporting the chest and head with one hand.
- Lean baby slightly forward and gently pat or circularly rub their back.
- This works well for smaller newborns or babies with reflux.



Tummy-Across-Lap

- Lay baby face-down across your legs so the tummy rests on your thigh.
- Make sure the head is higher than the chest.
- Rub or pat gently; the gentle pressure on the tummy can help release trapped gas.

Tip:

Sometimes rubbing in slow circles from the base of the spine up toward the shoulders works better than patting. Follow your baby's cues.

Understanding Spit-Up



A small amount of milk coming back up after a feed is completely normal.

The muscle that closes the top of the stomach (the lower oesophageal sphincter) is still developing, so milk sometimes flows back easily.

Normal Spit-Up

1. A few teaspoons or a tablespoon of milk
2. Happens within minutes after feeding
3. Baby remains comfortable and happy afterward

When to Call the Doctor

1. Projectile or forceful vomiting
2. Green or bloody fluid
3. Poor weight gain
4. Signs of dehydration (dry mouth, fewer than 6 wet diapers a day)

Tip:

Keep baby upright for 20–30 minutes after feeds, and avoid tight waistbands or immediate vigorous movement.

Gas: Why It Happens & How to Help

Gas is simply swallowed air or partially digested milk producing bubbles in the intestines. Newborns often struggle to pass gas because their abdominal muscles are weak.

Common Causes

1.

· Swallowing air while feeding or crying

2.

· Overactive let-down or fast bottle nipple flow

3.

Immature gut adjusting to digestion

Soothing a Gassy Baby



1 Bicycle Legs

Lay baby on their back and gently pedal their legs.



2 Tummy Massage

With warm hands, move clockwise in small circles around the belly button.



3 Upright Hold (Colic Hold)

Hold baby upright or tummy-down to help gas move.



4 Tummy Time

Short, supervised tummy sessions help move gas bubbles.



5 Warm Compress

A warm (not hot) washcloth over the belly can relax muscles.



6 Burp Often

Even between feeds if baby seems uncomfortable.



Quote from a Childbirth Educator:

Gentle movement can help relieve gas by encouraging digestion.

Extra Comfort Techniques



White noise or heartbeat sounds

Calm the nervous system, which can reduce crying linked to gas.

Pacifier sucking

Promotes relaxation and swallowing that can ease pressure.

Gentle rocking or swaying

Rhythmic motion soothes the gut.

Babywearing

The upright position helps air rise naturally.

Bottle-Feeding Tips to Reduce Gas



1

Choose **slow-flow** nipples to prevent gulping.



2

Hold the bottle **horizontally**, keeping the nipple full of milk.



3

Try paced bottle-feeding: **allow pauses** every few sucks so your baby can breathe and rest.



4

Don't **shake** formula vigorously; stir or swirl to reduce air bubbles.

Tip:

If baby consistently seems uncomfortable after bottles, experiment with different nipple shapes or an anti-colic bottle system.

Burping & Gas Routine (Step-by-Step)

1.

Feed baby calmly; avoid distractions and bright lights.

2.

Halfway through, pause and burp.

3.

After feeding, hold upright for 15–30 minutes.

4.

If fussiness continues, try gentle leg bicycles or tummy rub.

5.

Log any patterns—time of day, type of feed—to discuss with your provider if issues persist.



Suggested Products

1.



Burp cloths:

large, absorbent
muslin or flannel
(you'll need many).

2.



Slow-flow bottles:

Dr. Brown's Anti-Colic,
Philips Avent Natural
Response, or Como Tomo.

3.



Gas-relief tools:

simethicone drops
(as approved by your doctor),
warm belly pack, or baby
massage oil.

4.



Waterproof bibs and extra onesies

for easy cleanup.

5.



Reflux wedge

(only for supervised
upright resting, not
unsupervised sleep).

6.



Baby feeding pillow:

supports an upright
feeding position to reduce
gas and reflux.

Quick Tips Recap

1. Burp during and after every feed.
2. Keep baby upright for at least 20 minutes post-feeding.
3. Avoid bouncing right after meals.
4. Check nipple flow if bottle-feeding.
5. Gentle tummy pressure and motion help move trapped air.
6. A calm parent = a calmer baby; babies sense tension.



Doula's Note

"Gas and spit-up are part of the newborn story. Don't let them discourage you. With time, your baby's digestion matures and these episodes fade. Keep the burp cloths handy and remember: you're doing it right."

Sharon,

Doula & Childbirth Educator

Diapering Essentials



Diapering is one of the most frequent (and surprisingly bonding!) parts of newborn care.

In the first few weeks, you'll change 8–12 diapers a day — that's over 70 a week!

While it might feel endless at first, these small moments are opportunities for connection, comfort, and care.

The Basics of Diapering

HOW OFTEN TO CHANGE

Newborns:

Every 2–3 hours or as soon as the diaper feels wet or soiled.

At night:

You can change during or after nighttime feeds, depending on wetness and baby's comfort.

After every poop:

Always change right away to prevent rashes.

Babies are born with delicate skin that can easily become irritated, so frequent, gentle changes are key to keeping them comfortable.

Tip:

Keep one diaper basket in your main baby area and one near your bed. You'll thank yourself during nighttime changes.

Diapering Setup — Create a "Changing Station"

You'll need a clean, comfortable area with all supplies within reach. Whether it's a full changing table or a portable basket, the goal is organization and safety.

YOUR DIAPERING ESSENTIALS BASKET:

1. Diapers (cloth or disposable)
2. Extra outfit or onesie (accidents happen!)
3. Diaper cream or ointment (zinc oxide or barrier-based)
4. Unscented baby wipes or soft cotton pads
5. Hand sanitizer or nearby sink
6. Plastic or reusable wet bag for soiled diapers
7. Changing pad or waterproof mat



How to Change a Diaper (Step-by-Step)



1 Prepare everything first.

Never leave your baby unattended, even for a second.



2 Lay your baby safely

on the changing surface and secure them with one hand.



3 Undo the diaper

and gently lift baby's legs by the ankles.

4 Wipe front to back

(especially for baby girls) using a gentle, fragrance-free wipe or warm water on cotton pads.



5 Let the area air dry

for a few seconds before putting on a new diaper.

6 Apply a thin layer of barrier cream

if redness appears or for overnight protection.



7 Slide the clean diaper under,

making sure the waistband sits just below the belly button.

8 Fasten snugly but not tight

you should be able to fit two fingers between the diaper and baby's tummy.

Tip:

Keep a small towel handy for little surprises — newborn boys often pee mid-change!



Baby Girl vs. Baby Boy Diapering



For Baby Girls: _____

1. Always wipe front to back to prevent bacteria from spreading.
2. You may notice a small white discharge or light blood-tinged mucus — this is normal due to maternal hormones and should resolve in a few days.

For Baby Boys: _____

1. Cover the penis with a wipe while changing to avoid unexpected "fountains."
2. Clean around, not inside, the foreskin — never retract it.
3. Point the penis downward before fastening the new diaper to prevent leaks.



What's Normal in Diaper Output

Age	Wet Diapers	Poopy Diapers	Stool Colour
Day 1-2	1-2	1-2	Black or dark green (meconium)
Day 3-4	3-4	2-3	Greenish-brown
Day 5+	6-8+	2-5	Mustard-yellow (breastfed) or tan (formula-fed)



By the end of the first week, your baby should have **at least 6 wet diapers and 3-4 poops per day**. If you notice very few wet diapers, dark urine, or persistent constipation, contact your healthcare provider.

Preventing Diaper Rash

Newborn skin is sensitive and easily irritated. To keep diaper rash away:

1. Change diapers frequently.
2. Let the area air dry before putting on a new one.
3. A barrier cream isn't usually necessary unless a rash is present.
4. Avoid scented wipes or powders.
5. Give your baby a few minutes of "diaper-free time" daily to let their skin breathe.



However, during the first 1-3 days, while your baby is passing sticky meconium,

apply a thin layer of Vaseline after each diaper change — it makes cleaning much easier.



If a rash develops:

- Keep the area clean and dry.
- Apply a thick layer of cream at every change.
- If it worsens or looks infected (red spots, blisters, or oozing), see your doctor.

Suggested Diapering Products



Changing Pads:

Keekaroo Peanut, waterproof mats, or travel foldables.



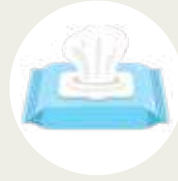
Diapers:

Pampers Pure, Huggies Special Delivery, Seventh Generation, or reusable cloth sets.



Creams:

Penaten, Desitin, Weleda Calendula, or Earth Mama Balm.



Wipes:

WaterWipes, Aleve Naturals, or reusable cotton rounds with warm water.

Other Must-Haves:



Diaper pail or wet bag



Disposable diaper sacks for outings



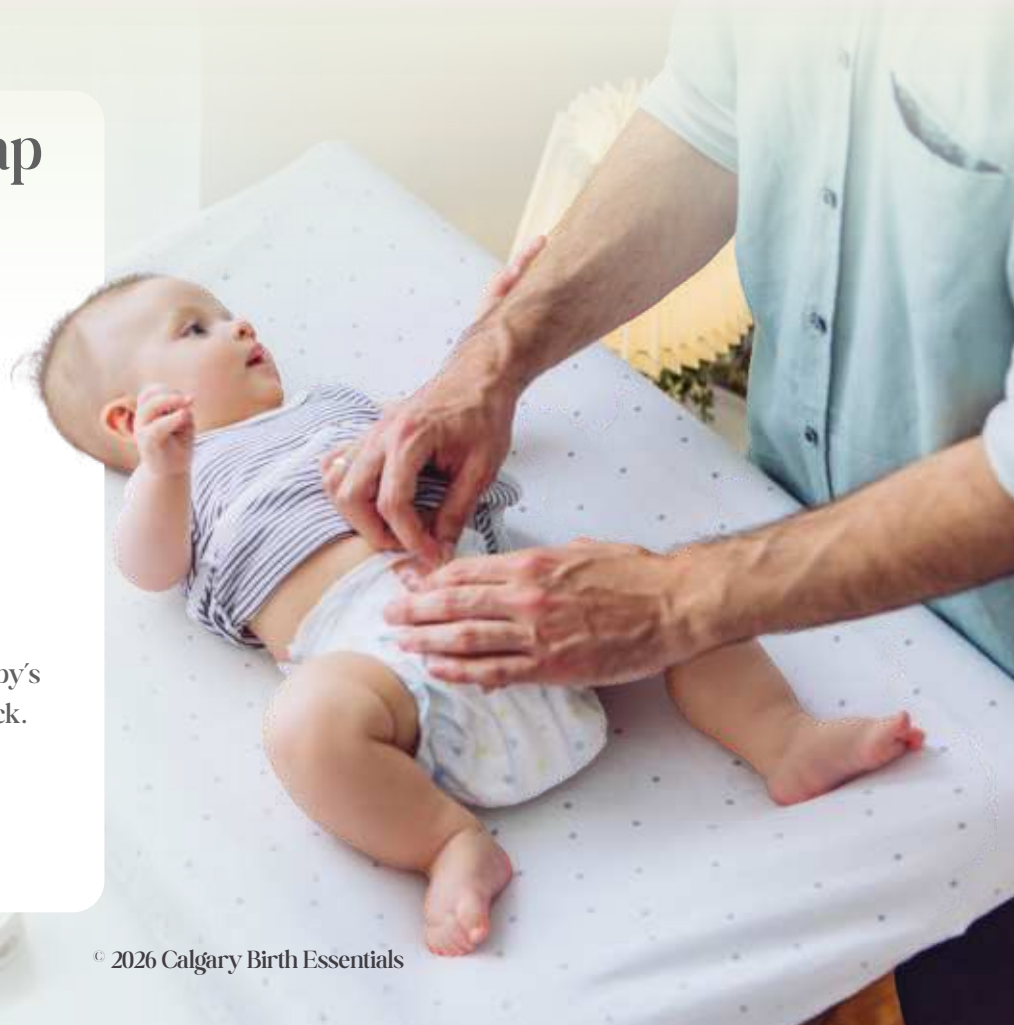
Portable changing mat



Extra outfits

Quick Tips Recap

- Always keep one hand on your baby during changes.
- Wipe front to back.
- Let skin air dry.
- Apply thin barrier cream for protection.
- Track diaper count to ensure baby's feeding and hydration are on track.
- Stay calm – babies sense your energy.



Bathing & Umbilical Cord Care



Bath time can feel a little intimidating at first, but with the right guidance, it quickly becomes one of the sweetest parts of your day. The soft water, gentle touch, and calm environment help your baby relax — and it gives you another beautiful opportunity for bonding.

In the first weeks, bathing is less about “cleaning” and more about **comfort and connection**. Babies don’t get very dirty, and their sensitive skin benefits from less frequent washing. The focus should be gentle care and keeping your baby warm and secure.

When & How Often to Bathe

1

• Wait at least 24 hours after birth before the first bath to allow the protective vernix (the creamy white layer on your baby’s skin) to absorb — it keeps skin soft and prevents infection.

2

Until the **umbilical cord stump** has healed and fallen off (usually by 4-10 days), give your baby **sponge baths only** — no submersion in water.

3

After the cord falls off, you can transition to regular baths. **Bathing your baby every 3-4 days is usually recommended**. Daily baths aren’t necessary and can dry your baby’s skin.

4

In between baths, **wash your baby’s face, neck folds, hands, and diaper area daily using a soft, damp cloth**. It’s also recommended to gently wipe the gums and mouth with a wet cloth every day.



Tip:

Choose a time when your baby is calm, not too hungry, and not immediately after a feeding

Preparing for Bath Time

Babies lose heat quickly, so preparation is key. Have everything ready before you start to keep your baby safe and warm.

You'll Need:



A clean, soft towel
(hooded if possible)



A small cup for rinsing



Washcloths or cotton pads



Baby bathtub or
sink insert



Mild, fragrance-free baby
soap and shampoo



Clean diaper and outfit
for after



Optional:

**bath thermometer (ideal water
temperature is 37°C / 98.6°F)**



**37°C
98.6°F**

Setting Up:

1. Make sure the room is warm – around 25°C (77°F) or warmer.
2. Check water temperature with your wrist or elbow – it should feel comfortably warm, never hot
3. Fill the tub or sink with about 2 inches (5 cm) of warm water.
4. Keep one hand on your baby at all times for safety.



Doula Reminder:

“Confidence comes with practice. The first few baths might feel awkward – that’s normal. You’ll find your rhythm quickly.”



Step-by-Step: Sponge Bath (Before Cord Heals)



- 1 Choose a warm, draft-free spot.**
Lay your baby on a towel or soft surface.
- 2 Undress baby,** keeping the diaper on until you're ready to clean the bottom.
- 3 Use a warm, damp washcloth or cotton pad** to gently clean the face first — no soap yet.

- 4 Wipe eyes from inner corner** to outer corner with a fresh section of cloth for each eye
- 5 Clean the neck, arms, chest, and hands,** then move down to legs and feet.
- 6 Unfasten the diaper last** and clean the diaper area gently (front to back).



- 7 Avoid getting the umbilical cord stump wet.**
- 8 Pat dry thoroughly,** especially in folds and creases.
- 9 Dress baby in a clean outfit,** wrap them in a soft towel, and enjoy those cuddles.



Tip:

You can place your baby on your chest afterward for a few minutes of skin-to-skin — it helps them warm up and regulate their breathing after a bath.

Step-by-Step: Full Bath (After Cord Falls Off)

Once the cord stump has healed and the navel area is dry, you can give your baby their first “real” bath.



Before you put your baby in the tub:

- 1 Keep your baby wrapped in a warm towel.
- 2 Gently clean their face, ears, under the chin, gums, inside the cheeks, and tongue with a warm, damp cloth (no soap).
- 3 Wash their hair while they are still swaddled in the towel – for example, over a small basin or by gently pouring a little warm water over their head. Pat their hair dry and wrap their head in the towel to keep them warm.

Tip:

After the bath, apply a small amount of gentle baby moisturizer or coconut oil if your baby's skin feels dry.

Then place your baby in the tub:



- 4 Fill the tub with 2–3 inches (5 cm) of warm water.
- 5 Gently wash their body, leaving the diaper area for last. Use a small amount of mild baby soap if needed, and rinse thoroughly.
- 6 Lift your baby out slowly, supporting their head, and wrap them immediately in a warm towel.
- 7 Keep a firm but gentle grip. Babies are slippery when wet!
- 8 Hold your baby securely — one hand supporting the head and neck, the other guiding their bottom into the water.

“

Quote from a Childbirth Educator:

“Talk to your baby as you bathe them — describe what you’re doing. Your calm voice teaches them that the world is safe.”

Umbilical Cord Care

Your baby's umbilical cord stump is what remains after the cord is cut at birth. It usually looks gray, brown, or black as it dries out, and will fall off naturally within **7–14 days**.

How to Care for It:

1.

Keep it clean and dry.

2.

Avoid covering it with tight clothing.



3.

Do not pull it off, even if it looks like it's hanging by a thread – it will fall off on its own.

4.

Avoid alcohol wipes – just use plain water if cleaning is needed.

5.

Fold diapers down so the stump is exposed to air and stays dry.



If the stump gets wet (from pee or sponge bath water), gently pat it dry with a soft cloth.

Signs of Healing

- 1 The stump shrivels, darkens, and eventually falls off.
- 2 A few drops of dried blood or yellowish discharge during healing are normal.



When to Call Your Doctor

- Foul odour or pus
- Redness, swelling, or warmth around the belly button
- Stump still attached after 3 weeks
- Bleeding that soaks through clothing or gauze

After-Bath & Cord Care Tips

Tip #1:

Prepare everything before starting the bath — once your baby is in the water, you won't want to step away

Tip #2:

Use towels with a hood — they dry your baby faster and keep them warm.

Tip #3:

Bath time doesn't have to be daily — 2–3 times per week is perfect for healthy skin.

Tip #4

Add fun gradually — singing softly or play calming music to make it a positive experience.

Tip #5:

Always end with cuddles or skin-to-skin — it's the coziest part of bath time.

Tip #6:

Always check the water temperature with your elbow or a thermometer — it should feel warm, not hot (around 36–37°C).

Suggested Products

For Bathing:



Baby bathtub or sink insert
(Angelcare, Puj, or Stokke Flexi Bath)



Mild, fragrance-free baby wash
(Weleda, Mustela, or Earth Mama)



Bath thermometer



Hooded towel and washcloths



Baby shampoo or 2-in-1 wash



Natural baby moisturizer or organic coconut oil

For Umbilical Cord Care:



Cotton pads or sterile gauze



Alcohol-free cleansing wipes (for occasional cleaning)



Fold-down newborn diapers



Soft, breathable onesies (nothing tight on the belly)

Swaddling, Clothing & Temperature

Swaddling and dressing your baby aren't just about comfort or cuteness — they're about helping your baby feel safe, secure, and warm enough to thrive.

In the womb, your baby was surrounded by constant warmth and gentle pressure. Swaddling mimics that familiar feeling, helping ease the transition into the outside world.



Why Swaddling Helps

Swaddling provides:

1

Comfort & calm:

Mimics the snug feeling of the womb.

2

Better sleep:

Babies often sleep longer and more soundly when swaddled correctly.

3

Reduced startle reflex:

Prevents jerky limb movements that can wake them.

4

Easier soothing:

Helps fussy babies settle faster.



Tip:

Swaddling is most helpful for newborns up to around 8 weeks — once your baby shows signs of rolling, it's time to transition out of the swaddle for safety.

How to Swaddle Safely

Swaddling should always be snug around the arms and loose around the hips to prevent overheating or hip dysplasia.

Step-by-Step:

Secure arms + hip-safe, stays in place

Prepare the blanket

Fold the blanket into a wide rectangle and lay it flat with the long edge at the top.



Position your baby

Place your baby on the blanket with:

- a. shoulders aligned to the top edge,
- b. head above the blanket,
- c. arms straight down along their sides.



Wrap the first side

Pull one side of the blanket firmly across the chest and arm, wrap it around the body, and tuck it under the back.



Wrap the second side:

Pull the opposite side across the chest and arm, wrap it around, and tuck it securely under the back.



Fold the bottom up

Lift the bottom flap over the legs and belly. Keep hips loose and free to move. Fold the top edge of this flap downward to create a small lip (cuff).



Secure the final flap

Bring the remaining small corner around the body and tuck it into the lip from Step 5



Doula Reminder:

"A safe swaddle never restricts the hips. Your baby should be able to bend their legs naturally – tight legs can cause hip problems later." Never swaddle with baby's arms over the chest or face, and always place baby on their back to sleep.

Types of Swaddles

Every baby (and parent) finds their favourite!

	Type	Description	Best For	
1	Traditional Muslin Blanket	Large, breathable cotton square you fold manually	Custom fit, affordable, multi-purpose.	
2	Velcro/Zip Swaddles	Ready-made pouches with adjustable flaps.	Quick, foolproof, great for nighttime.	
3	Arms-Up Swaddles	Allows baby's hands near face while keeping body snug.	Babies who self-soothe by touching their face.	
4	Sleep Sacks (Post-Swaddle Stage)	Wearable blankets with free arm movement.	Transition after 8 weeks or when baby rolls.	

Tip:

If your baby fights being swaddled, try one arm out — some babies like a little freedom.

Why We Swaddle

Swaddling provides gentle containment that helps your newborn feel calm and secure. It mimics the snug environment of the womb, reduces the startle reflex, promotes better sleep, and can help soothe fussiness

When to Stop Swaddling

Stop swaddling when your baby shows signs of rolling—usually between 8–12 weeks. Some babies roll earlier, so watch your baby closely. Once rolling starts, switch to a transitional sleep sack with arms out.

Understanding Baby Temperature

Newborns can't regulate their body temperature as well as adults. Keeping them warm — but not overheated — helps with sleep, feeding, and growth.

Ideal Room Temperature:

Daytime:

22–24°C
(71–75°F)

Nighttime:

20–22°C
(68–72°F)



Tip:

Use a room thermometer to monitor temperature and dress accordingly.



Signs Your Baby Is Too Cold:

Cool chest or back

Mottled (bluish) skin

Lethargy or poor feeding



Signs Your Baby Is Too Hot:

Sweaty neck or damp hair

Flushed cheeks

Rapid breathing

Restlessness

If you notice signs of overheating, remove a layer and cool the room slightly.

Swaddling & Sleep Safety

Safe swaddling and temperature go hand in hand.

Always place your baby on their back to sleep.

- 1 Keep the crib free of loose blankets, pillows, or toys.
- 2 Use a firm, flat mattress with a fitted sheet only.
- 3 Stop swaddling when your baby starts showing signs of rolling (around 8 weeks).

Suggested Products

Swaddles & Sleepwear:

1

Love to Dream
Swaddle Up

2

Halo
SleepSack

3

Aden + Anais
Muslin Blankets

4

Woombie or
Ollie Swaddle

Clothing Essentials:

1

Kyte Baby
bamboo sleepers

2

Magnetic Me or ZippyJamz
sleepers (easy nighttime changes!)

3

Burt's Bees cotton
onesies

Temperature Tools:

1

GroEgg or
Frida Room
Thermometer



2

Portable fan or
humidifier for
room comfort



Quick Tips Recap

1. One extra layer than you wear = perfect warmth.
2. Check baby's chest, not hands, to gauge temperature.
3. Stop swaddling when rolling begins.
4. Keep hips loose when swaddled.
5. Always place baby on their back for sleep.
6. Choose breathable natural fabrics for all clothing.



Doula's Note

"Swaddling and dressing your baby isn't about rules – it's about rhythm. You'll learn exactly what your baby likes: the texture they love, the warmth that settles them, the little rituals that bring peace. Trust yourself – you're already learning their language."

Sharon,

Doula & Childbirth Educator

Skin-to-Skin Bonding

Skin-to-skin means placing your diaper-only baby directly on your bare chest and covering both of you with a blanket for warmth. Any parent or caregiver can do it.

This simple practice helps your newborn adjust to life outside the womb and supports their physical and emotional development.



Benefits of Skin-to-Skin

For Baby

- ✓ Regulates body temperature
- ✓ Stabilizes heart rate and breathing
- ✓ Reduces stress hormones
- ✓ Supports healthy brain development
- ✓ Promotes better sleep
- ✓ Encourages feeding and natural latching
- ✓ Strengthens immunity

For Parents

- ✓ Boosts bonding and confidence
- ✓ Reduces stress and anxiety
- ✓ Supports milk production
- ✓ Helps you learn your baby's cues



Frequency:

There is no such thing as “too much.” Even 10–20 minutes can help.

When to Do Skin-to-Skin



Right after birth:

The first “golden hour” helps calm baby, promote bonding, and support feeding.



At home:

Anytime—especially after feeds, before naps, or during fussy periods.



NICU or premature babies:

Extended skin-to-skin (kangaroo care) improves oxygen levels, growth, and connection.

How to Do Skin-to-Skin Safely

1. Choose a warm, quiet space.
2. Place your baby (wearing only a diaper) upright on your bare chest.
3. Cover both of you with a blanket or robe.
4. Hold your baby securely and stay awake and alert.
5. Aim for 20–60 minutes per session.



Safety Tips

1

Always stay fully awake.
If you feel sleepy, place
your baby on their back in
a safe sleep space.

2

Keep your baby's airway
clear—avoid deep slouching
or reclined positions.

3

Partners can do skin-to-
skin too—babies learn your
scent and voice.

Skin-to-Skin for Partners

Partners can offer skin-to-skin immediately after birth or anytime at home. Benefits include:

1. Improved baby temperature and breathing regulation
2. Increased parental oxytocin (calm + bonding)
3. Confidence in caregiving

Common Concerns

**"Will my baby
get cold?"**



No—your chest naturally
warms or cools to the
perfect temperature.

**"Can I do it after
a C-section?"**



Yes. Ask staff to help
position your baby
safely.

**"What if my baby
falls asleep?"**



That's normal. When
you're ready, place them
in their crib while drowsy.

Helpful Items

1. Soft blanket
2. Robe or wrap-style top
3. Kangaroo-care shirt or baby wrap
4. Nursing pillow (for longer sessions)
5. Warm room temperature



Summary

Skin-to-skin helps regulate your baby's body, supports feeding, enhances bonding, and calms both of you. Do it as often as you like, for as long as it feels good, while always staying awake and watching baby's airway.

Crying: Reasons & Solutions



Every newborn cries — sometimes softly, sometimes with full-body passion. It's their only language, their way of saying, "I need something."

Crying can feel stressful, especially when you're tired and unsure what's wrong, but it's also your baby's first form of communication. Over time, you'll learn to recognize different cries and respond with confidence

Why Babies Cry

Newborns cry for many reasons, and sometimes for no clear reason at all. On average, healthy babies may cry up to 2–3 hours a day during the first few months — especially in the evenings.

Common Reasons for Crying

Hunger

The most common reason! Look for early cues like rooting, sucking on hands, or smacking lips.

Tiredness

Babies can easily become overtired and need help settling.

Discomfort

Wet diaper, gas, tight clothing, or being too hot/cold.

Overstimulation

Too much noise, light, or activity.

Need for closeness

Babies crave contact; they're wired to be held.

Burping or gas

Trapped air can cause fussiness or squirming.

Temperature change

Babies may cry when clothes are removed or during diaper changes.

Pain or illness

A cry that's high-pitched, weak, or different from usual may signal something more serious.



Babies often have a "fussy hour" in the evening (called the witching hour). This is normal and usually passes by 3–4 months.

The Emotional Side of Crying

Crying is not just about needs — it's also a way for babies to release tension.

In the womb, they were constantly soothed. Now, every sound, texture, and sensation is brand new. Crying helps them adjust to this overstimulating world.

Remember:

Your calm presence is more powerful than perfect technique. You can't always stop the cry — but you can help your baby feel safe through it.



Quote from a Childbirth Educator:

"You don't have to silence the cry — you just have to soften the moment."

The 5 Most Common Reasons & How to Help

Dirty or Wet Diaper

Signs: Fidgeting, fussing, or crying after feeds.

Solution: Check diaper first — often the simplest fix!

Hunger

Signs: Rooting, smacking lips, turning head side to side, hand to mouth.

Solution: Offer a feed before baby gets too upset. Feeding on early cues makes it smoother for both of you.

Fatigue

Signs: Yawning, rubbing eyes, arching back, turning head away.

Solution: Swaddle, dim lights, reduce noise, and rock gently. Babies need help transitioning from awake to asleep.

Gas or Discomfort

Signs: Squirming, drawing knees up, crying after feeding.

Solution: Burp during and after feeds, use bicycle legs or tummy rubs, keep baby upright after feeding.

Need for Comfort or Connection

Signs: None obvious — baby just wants to be held.

Solution: Skin-to-skin, gentle rocking, shushing, or wearing your baby in a wrap.

Tip:

Responding quickly doesn't spoil your baby — it builds trust and emotional security.

When Crying Peaks

Around 2–6 weeks, crying tends to increase — this is part of normal newborn adjustment.

Most babies outgrow this phase by 8–12 weeks as their nervous systems mature and they learn other ways to communicate.

During this phase:

Try motion (stroller, babywearing, or car rides).

• Reduce stimulation — turn off bright lights or TV.

Hold your baby skin-to-skin.

Stay calm and regulate yourself — babies sense your stress

Play white noise — it mimics the womb and calms the brain.

Feed on demand — growth spurts can cause extra fussiness.

Calming Techniques

Sometimes babies cry even when all their needs are met. That's okay — soothing is a learned skill for both of you.

Gentle Soothing Techniques

1.

Swaddle

Wrap snugly with arms in, hips loose.

2.

Side/Stomach position (for soothing only)

Hold baby on their side or tummy in your arms, never for sleep.

3.

Shush

Use a gentle “shhhh” sound near the ear or a white noise machine.

4.

Swing

Rock or sway gently; rhythmic motion reminds them of the womb.

5.

Suck

Offer breast, bottle, or pacifier for comfort.

Combine these steps for powerful calming results — especially during evening fussiness.



Doula Reminder:

“Crying is communication, not a challenge. When you respond, you’re shaping trust, connection, and calm for both of you.”

Comfort Strategies to Try

Situation	Try This
Baby cries after feeding	Burp or keep upright for 15–20 minutes
Crying during diaper change	Warm the wipes, talk softly, swaddle afterward
Fussy evenings	Dim lights, white noise, rhythmic rocking, skin-to-skin
Seems overstimulated	Go to a quiet room, lower your voice, reduce touch
Needs extra closeness	Use a wrap carrier or kangaroo-style cuddle

Tip:

Movement and sound work best together — rock while gently humming or saying “shhhh.”

When Nothing Seems to Work

Some babies experience a period of “purple crying” — intense crying that comes and goes for no clear reason.

1

Always check the basics (hunger, diaper, pain, temperature), then focus on comfort.

2

It’s normal and temporary, not a sign of something wrong.

3

If you ever feel overwhelmed, it’s okay to put your baby safely in their crib and take a short break.

Seek help if:

1. Crying is high-pitched, constant, or sounds painful.
2. Baby refuses to feed or has fewer wet diapers.
3. Crying is accompanied by fever, vomiting, or lethargy.



Doula Reminder:

“It’s okay to step away. A few deep breaths can reset both of you. Calm energy soothes better than perfection.”

Helpful Tools for Soothing



1

White noise machine or app
(constant, low-pitched sound)



2

Swaddles or
sleep sacks



3

Baby wrap or carrier
for closeness



4

Pacifiers (orthodontic
or newborn-specific)



5

Rocking chair or yoga ball
for gentle motion



6

Warm bath before bedtime
(when baby enjoys it)

Tip:

Keep the environment consistent — babies thrive on predictable cues of warmth, motion, and voice.

“

Doula's Note

“Every cry is a story. Sometimes it's hunger, sometimes it's exhaustion, sometimes it's simply the need to feel your heartbeat again. When you respond with calm and love, you're not just stopping the tears — you're building your baby's sense of safety in the world.”

Sharon,

Doula & Childbirth Educator

Sleep & Safe Sleep Guidelines

Sleep is one of the biggest adjustments for new parents — and one of the most misunderstood topics.

Newborns sleep a lot, but not all at once. Their patterns are different from ours, and that's okay. Understanding what's normal and how to create a safe, soothing sleep environment will help your whole family rest easier.



Understanding Newborn Sleep

In the first months, babies don't have a circadian rhythm yet — meaning they don't distinguish between day and night.

They wake frequently for food, comfort, and closeness.

Your baby's sleep will slowly become more predictable between 8–12 weeks.

What's Normal:

1

Total sleep:
14-17 hours in 24 hours

2

Sleep in short
stretches: 2-4 hours at a time

3

Night waking for feeds:
every 2-3 hours (sometimes more)

4

Active sleep: twitches, noises, grunts — this
is normal and doesn't mean they're awake

Tip:

Think rhythm, not routine. At this stage, your baby's sleep follows needs — not schedules.

The Difference Between Day & Night Sleep

In the womb, your baby slept whenever you moved — your motion soothed them.
At night, when you rested, they often kicked and wiggled.
Now, they need help learning the difference.

To Encourage Day/Night Awareness:



Daytime:

Keep lights bright and voices normal; feed and play near a window.



Nighttime:

Dim lights, whisper, move slowly, and limit interaction to feeding and diapering.

Use consistent cues —
the same words, music, or
white noise at bedtime.



Doula Reminder:

“Consistency creates calm. Over time, your baby will link certain sounds and sensations with sleep.”

Safe Sleep Essentials (ABC Rule)

The safest sleep environment is simple and minimal.
Follow the ABC rule — Alone, on their Back, in a Crib.



Safe Sleep Checklist



Back to sleep for every nap and night.



Firm, flat sleep surface — crib, bassinet, or approved sleep space.



Fitted sheet only — no pillows, blankets, bumpers, or toys.



Room share, don't bed share — keep the baby's sleep space in your room for the first 6–12 months.



No smoking, alcohol, or overheating around the sleep space.



Pacifiers at sleep time can reduce SIDS risk (once feeding is well established)

Never:



Put baby to sleep on couches, armchairs, or adult beds.



Let baby sleep in swings or car seats for long periods.



Add wedges or sleep positioners inside the crib.

Tip:

The simpler the sleep setup, the safer it is.

How to Create a Calm Sleep Environment

The Ideal Sleep Setting:

A consistent, cozy bedtime space helps your baby’s body recognize it’s time to rest.



Room temperature 20-22°C (68-72°F)	Baby swaddled or in a wearable sleep sack	Dim, warm lighting
Continuous white noise (see previous section)	No strong scents, no bright night lights	Firm mattress, fitted sheet only



Quote from a Childbirth Educator:

“Think womb-like: warm, dark, rhythmic, and simple. That’s what feels safe to your baby.”

Common Sleep Patterns by Age

Age	Awake Time	Typical Sleep Stretches	Notes
0-4 weeks	30-45 mins	2-3 hrs	Sleep is random, driven by feeding
1-2 months	45-60 mins	2.5-4 hrs	Starts to stay awake longer
2-3 months	60-90 mins	3-5 hrs (sometimes longer at night)	Beginning of early rhythms



When in doubt — if baby’s been awake for about an hour, it’s probably nap time.

Gentle Sleep Cues & Wind-Down Routine

Newborns love predictable transitions.

A short, consistent wind-down before naps or bedtime signals that sleep is coming.

Example:

- ✓ Dim lights
- ✓ Fresh diaper
- ✓ Swaddle or sleep sack
- ✓ Rock or cuddle until drowsy
- ✓ Soft voice or lullaby
- ✓ Feed
- ✓ White noise on

You can do a lighter version for naps and a fuller one for bedtime.



Doula Reminder:

“Babies fall asleep best in arms – not because they’re spoiled, but because it feels safe. Independence comes later.”

Helping Your Baby Sleep Better



1. Watch for early sleep cues (yawning, rubbing eyes, staring off).
2. Use motion and sound – gentle rocking, white noise, or swaddling
3. Keep naps short and flexible; focus on total sleep, not the clock.
4. Feed well during the day – full bellies help longer night stretches
5. Avoid overtiredness – once babies get past that point, falling asleep becomes harder.

Tip:

A well-rested baby sleeps better. Overtiredness causes more crying and restless sleep.

Nighttime Feeds & Survival Tips

Keep lighting dim and movements slow.

Avoid talking or playing during night feeds.

Use white noise to help both of you settle back to sleep faster.

Practice safe feeding positions if you nurse in bed – then return baby to their sleep space.

Prep diaper supplies beside the bed for quick, quiet changes.

Remember:

Night wakings are not setbacks — they're part of healthy development

Suggested Products for Safe Sleep

Sleep surfaces:

Halo Bassinet, BabyBjörn Cradle, or standard crib with firm mattress.

Swaddles & Sleep Sacks:

Halo, Love to Dream, Kyte Baby, or Nested Bean.

White Noise Machines:

Hatch Rest, Yogasleep Dohm, Frida 2-in-1.

Room Thermometer:

GroEgg, FridaBaby Humidifier/Thermometer Combo.

Wearable Monitors

Owlet Dream Sock, Nanit (for reassurance, not necessity)

Blackout Curtains

Hatch Rest or similar



Quick Tips Recap

- Always place baby on their back for sleep.
- Keep crib clear – no loose blankets or toys.
- Share your room, not your bed.
- Dress baby in breathable layers – not too hot or cold.
- Watch awake windows, not the clock.
- Establish a consistent bedtime rhythm.
- Remember: short stretches are normal in the early months.



Doula's Note

“Sleep in the newborn stage isn't a test – it's a team effort. You're learning each other's rhythms, not training or fixing anything. The more you lean into connection and trust, the more rest you'll both find.”

Sharon,

Doula & Childbirth Educator

Establishing a Gentle Routine

In the early weeks, life with a newborn feels beautifully unpredictable.

Days blur into nights, and your main focus is feeding, soothing, and resting. But as your baby grows, gentle patterns naturally begin to form — feeding times stretch out, naps fall into rhythm, and you start noticing familiar cues. This section isn't about rigid scheduling. It's about creating a calm, flexible rhythm that supports your baby's needs and gives you a sense of flow.



Quote from a Doula:

"Routine isn't about control — it's about comfort. Babies thrive on knowing what's coming next, and so do parents."

Why Gentle Routines Matter

A GENTLE DAILY RHYTHM HELPS YOUR BABY:

1

Feel secure

they begin to recognize patterns.

2

Sleep better

predictability reduces overstimulation.

3

Feed more efficiently

hunger and tiredness become easier to anticipate.

4

Build trust

consistent care creates emotional safety.

And it helps you feel grounded — even when the day doesn't go perfectly.

Tip:

Babies don't need a clock; they need consistent signals that help their bodies learn when it's time to eat, play, or rest.

When to Start

For the first 6–8 weeks, follow your baby's cues — feed on demand, sleep when possible, and focus on bonding.

Around 2–3 months, you can begin introducing gentle consistency:

1

Morning wake-up
around the same time

2

Similar nap
patterns

3

Evening wind-down
routine



Doula Reminder:

“Routine grows with your baby — it doesn't start on day one.
Watch your baby, not the clock.”

Key Components of a Gentle Routine

1. | Eat – Play – Sleep Cycle

This simple flow works beautifully for many babies:



It helps your baby:

Learn that feeding isn't just for falling asleep.

Develop healthy sleep associations.

Enjoy small awake windows with interaction and stimulation.

Example for a 2-Month-Old:

Repeat 5–6 times per day.

1

Feed
(20–30 min)



2

Play (talk, tummy time, cuddles
(45–75 min)



3

Sleep
(1–2 hours)

ESTABLISHING A GENTLE ROUTINE

2. | Morning Routine

START THE DAY WITH LIGHT, SOUND, AND CONNECTION:



**Open curtains
to signal daytime.**



**Change baby's
diaper and clothes.**



**Feed and talk gently
to set a positive tone.**

3. | Evening Routine

BEDTIME DOESN'T NEED TO BE STRICT — IT'S ABOUT CUES
THAT SAY "THE DAY IS ENDING."



Dim lights



Gentle bath or wipe-down



Quiet feed



Soft music or white noise



Cuddles and lullaby



Swaddle or sleep sack

Tip:

Consistency matters more than timing — repeat similar steps nightly so baby learns what comes next.

Sample Gentle Daily Rhythm (2–3 Months Old)

Time	Activity
7:00 am	Wake, feed, cuddle
7:45 am	Play (talking, singing, tummy time)
8:30 am	Nap
10:00 am	Feed
10:30 am	Walk or sensory play
11:15 am	Nap
1:00 pm	Feed
1:45 pm	Play or outing
2:30 pm	Nap
4:00 pm	Feed
5:00 pm	Short nap or cuddle time
6:00 pm	Feed, calm play, bath
7:00 pm	Bedtime routine, final feed
7:30–8:00 pm	Night sleep begins
Overnight	Feeds every 3–4 hours as needed



Doula Reminder:

“Don’t chase the schedule – let it evolve. Gentle rhythm builds trust, not pressure.”

Reading Your Baby's Cues

Your baby's body **gives signals** before they get upset — learning these cues helps you stay ahead of fussiness.



Sleep Cues:

- Yawning
- Glazed eyes
- Rubbing face or ears
- Turning head away
- Sudden quietness

Hunger Cues:

- Rooting or turning toward you
- Sucking on hands
- Smacking lips
- Fussing before crying

Overstimulation Cues:

- Looking away
- Frowning or arching back
- Flailing arms or kicking

Tip:

Early response keeps your baby calm — waiting until they cry makes soothing harder.

Keeping It Flexible

Some days won't go as planned — that's completely normal. Growth spurts, teething, and developmental leaps can disrupt routines.

Instead of strict timing, think in patterns:

1

• "Feed, play, sleep" repeats every 2-3 hours.

2

Nap lengths and feeds may shift, but the flow stays

3

Adjust wake windows as your baby grows.



Quote from a Childbirth Educator:

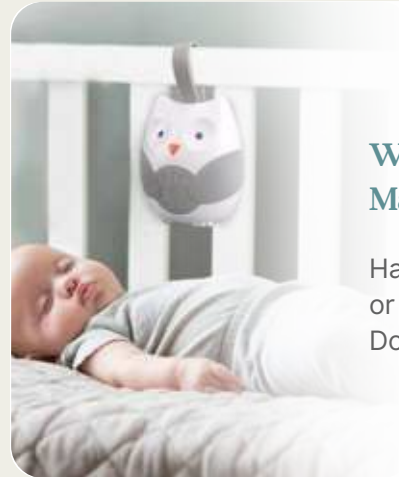
"Flexibility is the secret. Babies don't read schedules — they read energy."

Suggested Products & Tools



Baby Tracker Apps:

Huckleberry, Glow Baby, or Baby Daybook (track feeds, sleep, and diapers).



White Noise Machine:

Hatch Rest or Yogasleep Dohm.



Swaddles/ Sleep Sacks:

Halo, Love to Dream.



Soft Carrier or Wrap:

Moby, Ergobaby, Baby K'tan.



Blackout Curtains:

To support naps in bright rooms



Room Thermometer & Humidity Control:

GroEgg or FridaBaby — helps maintain a safe and comfortable sleep environment

Quick Tips Recap

1. Start gentle routines around 6-8 weeks.
2. Follow the Eat-Play-Sleep rhythm, not rigid times.
3. Watch baby's cues to guide timing.
1. Keep mornings bright, nights calm.
2. Repeat consistent bedtime cues.
3. Stay flexible — babies grow fast and routines evolve.

Tummy Time & Motor Development



Your baby's first workouts don't happen in a gym — they happen right on your floor.

Tummy time is one of the most important and simplest ways to support your baby's physical development. It strengthens the muscles they'll soon use to roll, crawl, sit, and explore the world. Think of it as “baby yoga” — small sessions of practice that build strength, coordination, and confidence day by day.

Why Tummy Time Matters

WHEN YOUR BABY LIES ON THEIR TUMMY, THEY ENGAGE THEIR:

Neck and shoulder muscles
(to lift their head)

Arms and hands
(for pushing and reaching)

Hips and legs
(for balance and crawling readiness)

Core and back muscles
(for stability)

It also helps:

1. Prevent flat spots on the back of the head (positional plagiocephaly).
2. Strengthen vision and body control.
3. Improve motor coordination and sensory awareness.
4. Build the foundation for gross motor milestones like rolling, crawling, and sitting.

Tip:

Babies who get regular tummy time are often more coordinated and confident as they grow.

When to Start

For the first 4 weeks, tummy time can be done right on your body—on your chest, shoulder, or in babywearing. Traditional floor tummy time can feel challenging for brand-new babies, and that's normal. Aim for short, frequent sessions of chest-to-chest tummy time in this early stage.

You can begin tummy time as soon as your baby comes home from the hospital — even on day one!

Start small — just 2–3 minutes, 2–3 times per day, gradually increasing as your baby grows stronger.

How to Do Tummy Time Safely

Step-by-Step:

1

Choose a soft, clean surface. A blanket on the floor, playmat, or firm bed works well.

2

Lay your baby on their tummy while they're awake and alert.

3

Stay close and interact. Get down on their level — talk, sing, or make eye contact.

4

Always supervise. Never leave your baby unattended on their tummy.

5

Start short, frequent sessions throughout the day.

6

Use toys or mirrors for engagement.

Tip:

Babies love faces! Lay down facing your baby — your expression and voice encourage them to lift their head and engage.



Creative Tummy Time Positions

NOT ALL TUMMY TIME HAS TO BE ON THE FLOOR. TRY THESE GENTLE ALTERNATIVES:

1

Chest-to-Chest

Lay back and place your baby tummy-down on your chest. Talk or hum softly — they'll lift their head to

see your face.



2

Tummy Time on a Pillow

Roll a towel or use a small tummy-time pillow under their chest for support. (Use only when supervised.)



3

Lap Time

Place your baby across your thighs, tummy down. Pat their back and talk — this is great for gassy or fussy babies.



4

Babywearing "Mini Workout"

Carriers keep babies upright, strengthening neck and back muscles in a gentle way.



Quote from a Childbirth Educator:

"The best tummy time is the one your baby enjoys — variety keeps it fun and builds confidence."

How Much Tummy Time is Enough?

Age	Daily Tummy Time Goal	What It Looks Like
0-2 weeks	1-2 minutes, a few times daily	On your chest or lap
2-4 weeks	5-10 minutes total per day	Short floor sessions
1-2 months	20-30 minutes total per day	Several short sessions
3 months	45-60 minutes total per day	Longer playtime stretches

Tip: Break it up — a few minutes after every diaper change or nap adds up!

Toys & Tools That Help

1 Mirror:

Babies love looking at their reflection — encourages lifting and engagement.



2 Soft crinkle toys:

Stimulate sound and touch.



3 High-contrast cards or books:

Perfect for newborn vision (black, white, red).



4 Tummy-time mats:

Non-slip and easy to clean.



5 Rattle or music toy:

Use sound to guide their gaze and movement.



Tip:

Move toys side to side slowly — this strengthens neck control and helps your baby practice visual tracking.

Milestones & Motor Development

Age	Typical Motor Skills	What to Encourage
1 month	Lifts head briefly, turns to one side	Gentle tummy time daily
2 months	Holds head up for a few seconds	Offer chest or floor tummy time
3 months	Lifts head and chest using forearms	Place toys in front during play
4-5 months	Rolls front-to-back	Encourage reaching and side play
6 months	Pushes up fully, begins to pivot	Expand play area and time



Doula Reminder:

"Milestones are guides, not grades. Every baby unfolds at their own perfect pace."

Tips for Success

1
Try tummy time after a nap,
not right after a feeding.

2
Use your voice and expression
to make it interactive

3
Do short, frequent sessions –
consistency beats duration.

4
Celebrate small wins –
every lift builds strength.

5
Never force it – babies
progress through comfort and
curiosity, not pressure.

6
Follow your baby's cues –
stop when they show signs of
fatigue or fussiness.

Suggested Products

Tummy Time Play Mats:

Lovevery Play Gym, Skip Hop
Silver Lining, Fisher-Price
Deluxe Gym.

Mirrors & Toys:

Manhattan Toy Wimmer-
Ferguson Mirror, Sassy
Tummy Time Floor Mirror.

Books:

Look Look! by Peter
Linenthal or Baby Sees
Black and White.

Support Pillow:

Boppy Tummy Time or
Infantino Prop-A-Pillar.

Baby Carrier:

Ergobaby Embrace,
BabyBjörn Mini.

Sensory Toys:

Sassy Baby, Manhattan Toy,
Lamaze, Tiny Love.

Play & Connection



For your baby, play is love in motion.

It's how they learn, connect, and feel seen. Every smile, sound, and interaction builds the foundation for trust and emotional intelligence.

At this stage, play isn't about toys or structure — it's about tuning in to your baby's curiosity and responding with warmth and joy.

Tips for Success

PLAY BUILDS:

Emotional connection

Strengthens attachment and sense of safety.

Language learning

Through tone, rhythm, and repetition.

Physical growth

Builds coordination and muscle control.

Cognitive development

Encourages curiosity, memory, and problem-solving.

Social understanding

Helps your baby learn turn-taking and empathy.

Sensory development

Stimulates vision, touch, and early sensory processing.

Tip:

When you respond to your baby's play signals, you're teaching them that communication goes both ways — that their voice matters.

The Power of Connection Through Play

Connection doesn't require extra time — it happens in ordinary moments.



When you smile back at your baby's grin, you're wiring emotional intelligence.



When you imitate their sounds, you're building language.



When you play peekaboo, you're teaching trust and anticipation.

Simple Ways to Play Every Day



1. Face-to-Face Play

- Lay your baby on your lap or chest and talk softly.
- Mimic their sounds — “ah,” “oo,” “oh!”
- Smile, raise your eyebrows, open your mouth wide — babies love animated expressions



2. Peekaboo

- Hide your face behind your hands or a cloth and pop out with a smile.
- It teaches your baby about object permanence — the concept that things (and people) still exist even when unseen.



3. Sing Together

- Use nursery rhymes, soft lullabies, or even songs you love.
- Clap gently or move their hands to the rhythm.
- The combination of music and movement boosts brain development and bonding.



4. Gentle Movement Games

- Rock side to side, bounce on your knees, or slow dance.
- Narrate what you're doing: “Up we go! Down we go!”
- Helps develop vestibular (balance) and body awareness.



5. Reading Time

- Read short, rhythmic books.
- Point to pictures, describe colors, or mimic animal sounds.
- Let your baby touch and explore board books.

Tip:

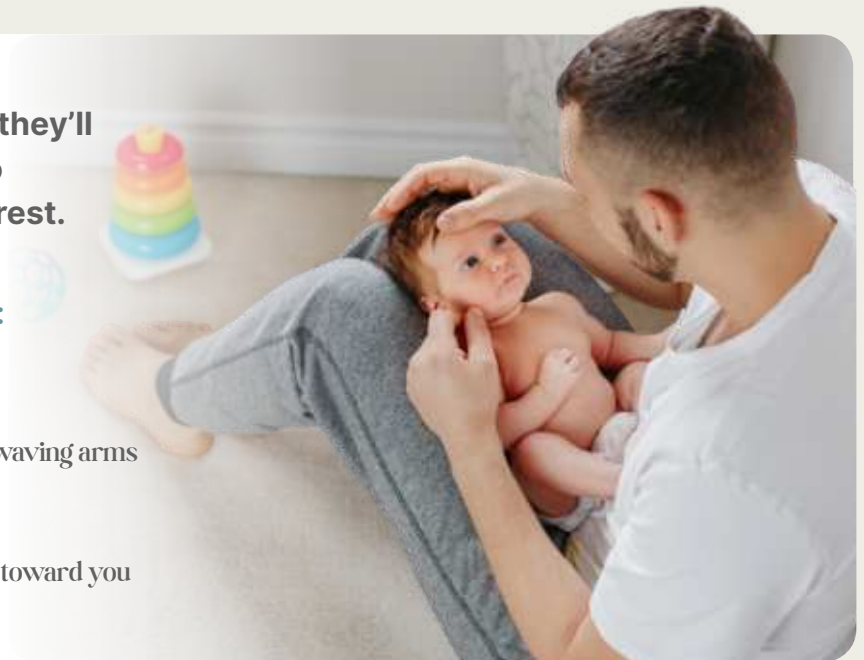
Babies learn best through repetition — doing the same fun activity daily helps them feel secure and engaged.

Follow Your Baby's Lead

Your baby will guide you — they'll show when they're ready to engage or when they need rest.

Signs Your Baby Wants to Play:

- 1 Alert and bright eyes
- 2 Smiling or cooing
- 3 Kicking legs, waving arms
- 4 Turning head toward you



Signs They Need a Break:

1. Turning head away
2. Frowning or yawning
3. Arching back or fussing

Types of Play for the First 3 Months

Type of Play	Example	What It Teaches
Visual Play	Mirrors, high-contrast cards	Focus and tracking
Auditory Play	Singing, rattles, shushing	Sound recognition
Tactile Play	Touching fabrics, massage	Sensory awareness
Social Play	Smiling, cooing, peekaboo	Emotional bonding
Movement Play	Dancing, gentle rocking	Coordination and balance

Tip:

Babies learn more from you than from any toy — your expressions, rhythm, and tone are the ultimate sensory experience.

Making Playtime Special

Even short moments of mindful connection make a difference.
Try creating small “rituals” throughout your day:



**Morning cuddle
and song.**



**Midday tummy time
with a favorite toy**



**Evening lullaby and
story after bath.**

These tiny moments, repeated daily, give your baby a sense of safety and predictability — the roots of secure attachment.



Quote from a Doula:

“You don’t need hours of play – you need presence. Ten minutes of full attention means more than an hour of distraction.”

Suggested Toys & Tools



Soft Rattles:

Manhattan Toy Winkel, Hape Rattle & Roll.



Mirrors:

Sassy Tummy Time Mirror, Skip Hop Discover Mirror.



Books:

Goodnight Moon, Baby Faces, Brown Bear.



Play Mats:

Lovevery Gym, Tiny Love Gymini.



Music Toys:

Soft plush toys with gentle melodies.



Textures:

Fabric cubes, crinkle cloths, or soft scarves for sensory exploration



Rotate toys weekly to keep things interesting — babies thrive on both novelty and familiarity.

Common Newborn Illnesses & When to Call the Doctor

Every new parent worries the first time their baby sneezes, coughs, or feels warm. It's completely natural to be alert — your baby is still adjusting to life outside the womb, and their immune system is just beginning to learn how to protect them.

Most newborn issues are mild and temporary, but it's important to know what's normal, what's not, and when to call your healthcare provider.



Quote from a Doula:

"Knowing what's normal doesn't take away the worry — it gives you the confidence to care with calm."

Common Newborn Conditions (Usually Normal)

1. Sneezing & Hiccups

Completely normal! Babies sneeze to clear their tiny nasal passages and often get hiccups after feeding.

What to do:

No treatment needed. Burp after feeds and keep baby upright for a few minutes.

2. Spitting Up / Mild Reflux

Most babies spit up small amounts of milk after feeding. Their digestive system is still developing.

What to do:

Burp often, keep upright after feeding, and avoid overfeeding.

✂ Call your doctor if:

Spit-up is forceful, green, bloody, or accompanied by poor weight gain.

3. Cradle Cap (Seborrheic Dermatitis)

Yellow, scaly patches on the scalp. Common and harmless.

What to do:

Apply a bit of baby oil before a bath, gently brush with a soft baby brush, and wash regularly.

✂ **Call if:** The area becomes red, cracked, or swollen.

4. Baby Acne

Small red or white bumps on the cheeks, forehead, or chin, often appearing in the first few weeks.

What to do:

Keep the skin clean and dry, avoid lotions or harsh soaps. It fades within weeks.

✂ **Call if:** Pimples ooze or spread widely.

5. Dry Peeling Skin

Especially on hands and feet after birth. This is normal as baby sheds the outer skin layer.

What to do:

Apply mild, fragrance-free baby lotion if needed. Avoid over-bathing.

6. Blocked Tear Ducts

Watery eyes or mild discharge are common in newborns.

What to do: Gently massage the inner corner of the eye with a clean, warm cloth once or twice a day.

✂ **Call if:** The eye becomes red, swollen, or pus appears.

7. Diaper Rash

Red or irritated skin in the diaper area from moisture or friction.

What to do: Keep area clean and dry, change diapers frequently, use barrier cream (zinc oxide).

✂ **Call if:** Rash spreads, blisters, or oozes.

8. Nasal Congestion

Babies breathe through their noses and may sound “snuffly.”

What to do: Use a saline spray or drops, and a bulb syringe to gently clear mucus.

✂ **Call if:** Baby struggles to breathe, feed, or sleep due to congestion.

Common Minor Illnesses



1. Colds (Viral Infections)

Mild congestion, sneezing, or coughs can happen even in young babies.

What to do:

Use saline drops, suction, keep baby hydrated, and run a cool-mist humidifier.

✂ **Call if:** Baby under 3 months has a fever (100.4°F / 38°C or higher) — always contact your doctor immediately.

2. Jaundice

Yellowing of skin or eyes caused by bilirubin buildup is common in the first week.

What to do:

Mild jaundice often clears as baby feeds more and poops frequently.

✂ **Call if:** Jaundice deepens, spreads after day 5, or baby is lethargic or feeding poorly.

3. Constipation

Breastfed babies may go several days without pooping — this can be normal if stools are soft. Formula-fed babies should poop daily.

What to do: Ensure adequate feeding and gentle tummy massages.

🚩 **Call if:** Baby strains hard, stools are dry pellets, or there's blood.

4. Diarrhea

Watery stools can indicate infection or feeding sensitivity.

What to do: Keep baby hydrated and monitor diaper output.

🚩 **Call if:** Diarrhea is persistent, contains mucus or blood, or baby shows signs of dehydration (dry lips, few wet diapers).

5. Thrush (Oral Candida Infection)

White patches in the mouth that don't wipe away easily.

What to do: Contact your doctor — antifungal treatment may be needed. Sterilize bottles and pacifiers daily.

6. Diaper Yeast Infection

Bright red rash with small red dots around it.

What to do: Use antifungal cream as prescribed, keep area dry, and change diapers often.

Signs You Should Call Your Doctor

Trust your instincts. You know your baby best.
Always contact your healthcare provider if you notice:

**"If something feels wrong, you don't need permission to call your doctor.
A calm check-in is always better than silent worry."**

🚩 **Fever:**

- Any temperature $\geq 100.4^{\circ}\text{F}$ (38°C) in a baby under 3 months
- Persistent low-grade fever or chills

🚩 **Feeding issues:**

- Refusal to feed or weak sucking
- Vomiting more than twice after every meal

🚩 **Dehydration:**

- Fewer than 6 wet diapers in 24 hours after day 5
- Dry mouth, sunken soft spot, or lethargy

🚩 **Behavior changes:**

- Extreme sleepiness or unusual irritability
- Persistent crying that doesn't ease with comfort

🚩 **Breathing problems:**

- Fast, labored, or noisy breathing
- Blue tint around lips or nails

🚩 **Rash or infection:**

- Rash with fever, blisters, or swelling
- Umbilical cord area red, swollen, or oozing

🚩 **Other urgent symptoms:**

- Seizure-like movements
- Persistent vomiting (especially green or with blood)
- Baby feels floppy or unusually limp

Emergency Situations — Call 911 (or local emergency number) if:

BABY IS STRUGGLING TO BREATHE OR STOPS BREATHING.



Lips, tongue, or
face turn blue.



Baby is unresponsive,
limp, or won't
wake up.



There is significant
bleeding or suspected
head injury.



Baby has a seizure
lasting more than
a few seconds.

Tip:

Keep your pediatrician's phone number, after-hours clinic, and emergency contact list on your fridge and saved in your phone.

Home Health Essentials



•Digital thermometer (rectal
preferred for newborns)



•Baby-safe nail
clippers



Nasal saline spray
and suction bulb



First aid kit with baby
acetaminophen (use only as directed
by your doctor)



•Cool-mist
humidifier



Contact list:
Pediatrician, local nurse helpline,
and emergency line



Doula's Note

"Your baby's health will have little bumps — a sneeze, a rash, a fever. Most of these moments pass quickly, and each one teaches you something new about being their parent. Stay observant, stay calm, and trust your instincts — they're stronger than you realize."

Sharon,

Doula & Childbirth Educator

Tips from a Doula

Every baby, every birth, and every parent's journey is unique.



Quote from a Doula:

“Babies don’t need perfect parents — they need present ones.”

Feeding & Nourishment

1.

Feed the baby, feed yourself.

A nourished parent makes a nourished baby. Keep snacks and water nearby.

2.

Don’t watch the clock — awatch the baby.

Feed on demand. Those early cluster feeds build supply and connection.

3.

Use feeding time for stillness.

Take deep breaths. Stroke your baby’s hair. Whisper your gratitude.

4.

If feeding hurts, get help early.

Pain isn’t something to “push through” — lactation consultants and doulas exist for this reason.

Connection & Bonding

1.Babywear often.

Carriers and wraps create closeness while freeing your hands.

2.Talk, sing, and smile.

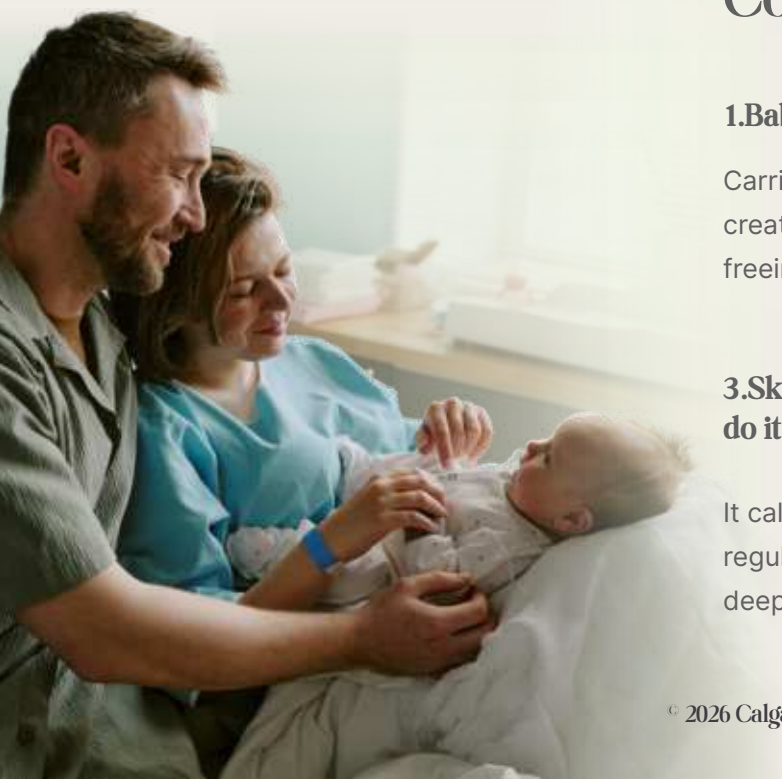
Your voice is their anchor — they’ve known it since the womb.

3.Skin-to-skin is magic — do it often.

It calms baby’s heart rate, regulates temperature, and deepens connection

4.Be in the moment, not the milestone.

Babies don’t need us to perform — they need us to be.



Frequently Asked Questions

New parents often have the same thoughts at 3 a.m. — “Is this normal?”

This section gathers the most common questions doulas hear every week, so you don't have to search the internet or second-guess yourself.



Quote from a Doula:

“There’s no such thing as a silly question — only the chance to feel calmer once it’s answered.”

Feeding Questions

Q: How often should my newborn eat?

Most newborns feed every 2–3 hours (8–12 times a day). Some days they'll feed more frequently, especially during growth spurts. Follow your baby's hunger cues — rooting, sucking hands, fussing — not the clock.



Q: How do I know if my baby is getting enough milk?

Signs your baby is feeding well include:

- At least 6 wet diapers per day after day 4–5
- 3–5 poopy diapers per day (stool may vary over time)
- Baby appears relaxed and content after feeds
- Audible swallowing during feeding
- Steady weight gain over time

Breastfed babies typically have mustard-yellow, seedy stools, while formula-fed babies often have tan or brown stools.

If you're unsure about feeding or diaper output, reach out to a lactation consultant or your healthcare provider for support.

Q: Is it okay to give formula even if I'm breastfeeding?

Absolutely. Combination feeding is common. The goal is a fed, thriving baby and a calm, supported parent — not perfection



Sleep Questions

Q: My baby only sleeps on me. Is that normal?

Completely normal! Babies crave closeness — it reminds them of the womb. Practice safe contact naps or use a baby carrier during the day, and place baby on their back to sleep when unattended.

Q: When will my baby start sleeping longer stretches?

Around 3–4 months, many babies start sleeping 4–6 hour stretches at night. Every baby is different — focus on safe sleep and consistent bedtime cues, not strict schedules.

Q: Should I wake my baby to feed at night?

In the first few weeks, yes — especially if baby hasn't regained birth weight. Once your pediatrician confirms healthy growth, you can let baby wake naturally.

Crying & Soothing Questions

Q: My baby cries even when feed and changed – what's wrong?

- **Crying is communication. Check for:**
- Gas or trapped air (try burping or gentle tummy massage)
- Overstimulation (dim lights, use white noise)
- Need for closeness (skin-to-skin or swaddle)
- If baby can't be soothed after 30–40 minutes and cries inconsolably, consult your doctor.

Health & Hygiene Questions

Q: How often should I bathe my baby?

2–3 times a week is plenty. Too much bathing can dry newborn skin. In between, use warm washcloth “top-and-tail” cleanups.



Q: The umbilical cord looks dry and dark – is that normal?

Yes — it's healing! Keep it dry, avoid pulling, and let it fall off naturally within 1–2 weeks. Call your doctor if it becomes red, oozes pus, or smells foul.



Q: What temperature should the room be for my baby?

Aim for 20–22°C (68–72°F). Dress baby in one more layer than you're wearing, and use a sleep sack instead of loose blankets.



20–22°C
(68–72°F)

Q: My baby sneezes and hiccups all the time – should I worry?

No — sneezing clears nasal passages, and hiccups are normal as their diaphragm strengthens. Both fade with time.



Quick Tips & Hacks

Feeding Hacks



Create a Feeding Station

Keep a basket in every room with: burp cloths, nipple cream, snacks, water, and phone charger. You'll thank yourself during 2 a.m. feeds.



Pre-Prep Snacks

Slice fruit, cheese, or veggies in small containers so you can grab something nutritious without effort.

Tip:

Feeding time = resting time. Sit, breathe, and treat it as a pause for both of you.



Drink Every Time You Feed

Keep a water bottle next to your nursing spot — hydration supports milk supply and energy.



Lactation Smoothie Hack

Blend frozen berries, oats, nut butter, and flaxseed — freeze in jars for grab-and-go nourishment.

Sleep & Soothing Hacks



Lower Expectations, Not Standards of Care

Forget the perfect schedule — just follow baby's cues. You'll find your rhythm naturally.



White Noise Everywhere

Use a small portable sound machine or an app on your phone. It helps baby (and you) fall asleep faster.



Night-Shift Basket

Keep diapers, wipes, spare sleepers, burp cloths, and a snack near your bed — no need to wander around at 3 a.m



Dim Lights at Night

Use soft lamps or red bulbs — bright light tells baby's brain it's playtime, not bedtime.

Sleep When You Can, Not Just When Baby Sleeps

Even resting with eyes closed counts. Ten minutes of stillness can reset your nervous system.

Diapering & Bathing Hacks



Keep a Mini Diaper Kit in Every Room

No need to go upstairs each time — a small basket with diapers, wipes, and cream in every main area saves you hours.



Use Puppy Pads for Changing Surfaces

Cheap, disposable, and perfect for travel or messy blowouts.



Tip:

Always check water temperature with your wrist — it should feel warm, not hot.

Post-Bath Snuggle Wrap

Warm baby's towel in the dryer before bathtime for extra coziness.

Soothing & Crying Hacks

White Noise Magic

Hairdryer sound, fan hum, or white noise app — all mimic the womb.

The "5 S" Combo

Swaddle, Side (hold baby on their side), Shush, Swing, Suck — Dr. Karp's magic sequence to calm crying.

Colic Hold

Lay baby's belly down on your forearm with head in your hand — gentle pressure relieves gas.



Movement Helps Everyone

Use a yoga ball for gentle bouncing — great for colicky babies and tired arms.



Doula's Note

"Parenting isn't about mastering every trick — it's about finding what brings peace to your unique family. The best hacks aren't shortcuts; they're reminders that you're allowed to make life easier. Simplicity is sacred in the early months."

Sharon,

Doula & Childbirth Educator

Final Words of Encouragement



Childbirth Educator's Note:

The early months are not about doing — they're about becoming."

Dear Parents

You've just crossed one of life's most meaningful transitions — welcoming a new baby and beginning life as parents. The past months have required strength, patience, and adaptation, and they've likely changed you in ways you're still discovering.

You may not feel like you have everything figured out — and that's completely normal. Parenting isn't about perfection; it's about responding with care, learning as you go, and supporting one another through the challenges and the small wins.

Congratulations to your growing family.

Welcoming a baby brings change, learning, and new perspectives.

This is the start of a meaningful journey you'll grow into together.

