



NICU CONTINUING CARE PROGRAM NEWSLETTER

585/275-5301

Volume 3, Issue 1

Six-Month Parent Newsletter

Welcome Parents!

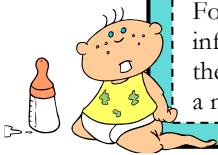
As the parent of a NICU graduate, we welcome you to the Neonatal Continuing Care Program (NCCP). There are two parts to the NCCP. First is the Tracking Program, which is explained in the enclosed letter. The second part is the Follow-Up Clinic. At clinic, a team of specialists evaluates those NICU graduates considered at high risk for developmental delays. The criteria for clinic selection are listed right below. If a delay is found, we can help families get the special services they may need for their child. Sometimes graduates who do not meet these conditions can have problems. If you or your baby's doctor has a concern, please call our office and we will be glad to discuss those concerns.

Topics in these newsletters come from information sent by parents, so please take a few moments to let us know how your child is doing.

THANK YOU!

Age Adjustment

We determine a child's development based on his/her corrected age. This age is obtained by subtracting your baby's gestational age from 40 weeks. For example: a 34-week premature infant would be 6 weeks old before their development would compare to a newborn.



GENERAL CRITERIA FOR SEEING NICU GRADUATES

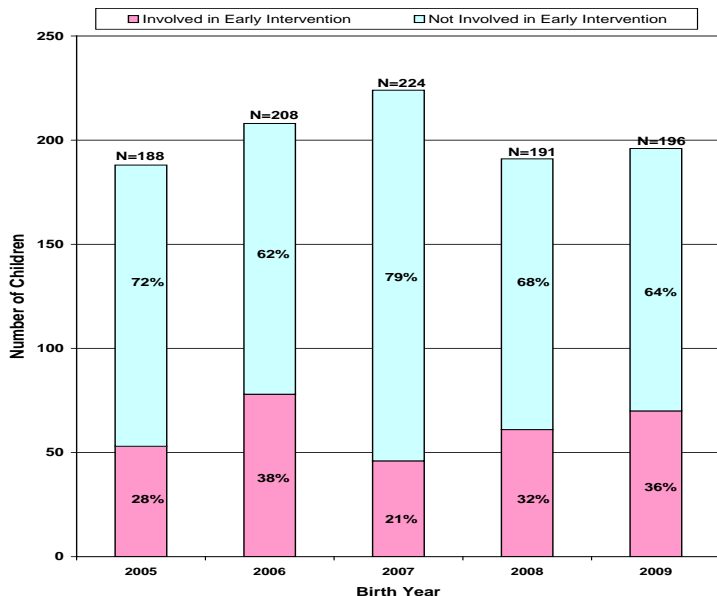
IN THE NCCP FOLLOW-UP CLINIC

(The infants at highest risk of developmental problems)

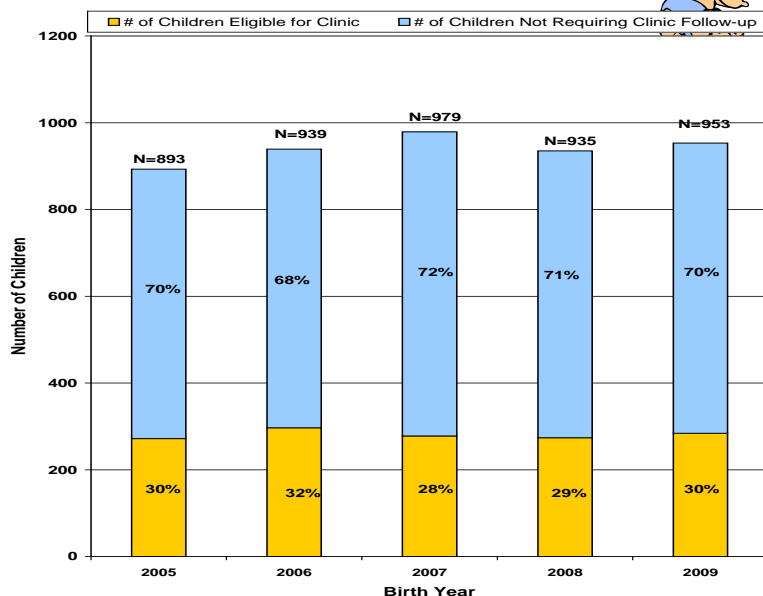
- * Infants less than 32 weeks' gestation
- * Weight less than 1250 grams (2 pounds, 12 ounces) at birth
- * Small for gestational age
- * Specific Disorders
- * A baby whose NICU Attending or Pediatrician has concerns



NICU Graduates followed in Clinic Who Require 2005 -2009



NICU Graduates Needing Follow-up in Clinic 2005-2009



Data Source - NCCP Tracking Database NEOS

Hello from Dr. Carl D'Angio!



Congratulations on having your baby home with you! One of the most satisfying parts of my Neonatal practice at Golisano Children's Hospital is seeing babies go home. I also enjoy getting glimpses of their growth as we see them in the NCCP Clinic, or hear about them through cards, tracking forms and visits. Hearing about how your baby is doing also helps me to give the next family a little clearer picture of what to expect for their baby. We all look forward to sharing the milestones of your special baby as he or she grows.

A common concern in premature infants is excessive spitting or gastroesophageal reflux. While reflux can be distressing, as your child grows, the reflux should improve and eventually go away. To help relieve symptoms be sure to feed your baby in the upright position. Holding a baby after his feeding for 30-60 minutes can help. Notice when your baby is slowing down with feeds; it is a sign he or she is full. Overfeeding can make reflux worse. This may mean you need to feed more frequently with less amounts at first. If your baby is sent home on reflux medicines, give these medicines as directed and make sure you refill them when you are close to running out. Your pediatrician should adjust the dose as your baby grows, every few weeks for at least the first 2-3 months. Remember, just because the symptoms are gone, that does not mean the problem is gone. It means the medicines are working.

Your Child's Healthy Development: 6 to 9 Months

The following chart describes many of the things your baby is learning between 6-9 months and what you can do to support your child in their development. Remember that each child develops at his/her own pace. Understanding who your child is, what their strengths are and where they need more support is essential for promoting healthy development.

What's going on:	What you can do:	Questions to ask yourself:
Babies this age are big communicators. They use many sounds, gestures and facial expressions to communicate what they want. Their actions are their communications. They may start to put consonants and vowels together to form words like "dada" and "mama".	<ul style="list-style-type: none"> * Talk a lot with your baby. For example, label and narrate. "You're eating a big banana!" Give her time to respond. * Respond to his communications. See how long you can keep a back-and-forth conversation going. For example, if he makes a sound, you imitate it, he makes another sound, etc. 	<ul style="list-style-type: none"> * How does your baby let you know what she wants; what she's feeling and thinking? * What, if anything, do you find frustrating about understanding your baby's communications? Why?
As his brain grows, your baby will start to imitate others, especially you. This leads to the development of lots of new skills. Babies this age can also use toys in more complex ways. For example, instead of just holding a plastic cup, a baby this age may use it to pour water in the bathtub.	<ul style="list-style-type: none"> * Give your baby time to take in what you did and then copy you. Push a button on a toy then wait for your baby to do it, before you do it again. This teaches your baby cause and effect, which builds confidence and makes her want to try new challenges. * Provide a variety of safe toys for the bath – plastic ladles, cups etc. This will encourage your baby to explore new ways to use objects. Of course, never leave your baby alone in the bath. 	<ul style="list-style-type: none"> * How have you seen your baby imitate? * What kind of play does your baby most enjoy? What does this tell you about her?
Babies' motor skills are advancing by leaps and bounds at this stage. But all babies grow at their own rate. Many babies at this age can roll over both ways, scoot, crawl and even stand. Their motor skills allow them to make the ideas in their head happen, for example, getting the ball that rolled away.	<ul style="list-style-type: none"> * Encourage your baby to use her body to get what she wants. If she indicates with sounds/gestures that she wants a toy out of reach, don't just get it for her. Help her get it for herself by bringing it close enough for her to grab. This builds confidence. * Create an environment that is safe for exploration. Make sure only safe objects are within his grasp and anything used to pull himself up is sturdy and fastened to floor or wall. 	<ul style="list-style-type: none"> * How does your baby use her body – to explore, to express her feelings? * What do you need to do to make your home safer for your "little explorer"?



GROWTH AND DEVELOPMENT

Feeding: Because premature infants have fewer stores of nutrients such as iron, protein and minerals than term infants, the specialized **enriched formulas and nutritional supplementation of breast-fed infants should continue for the first 9-12 months corrected age.** Be sure to mix the formula for the correct calories, if you need help call your baby's doctor.

Things that help: A pleasant mealtime setting that is quiet with few distractions – this includes the TV and texting. When feeding starts, your infant should be calm but alert. Position your child upright. Pay attention for early signs of hunger. An upset, crying infant does not feed well and becomes gassy. Stop feeding with signs of stress.

For most newborns, feeding is an effortless activity. However, when an infant is born prematurely, eating can become an unpleasant task. There can be several reasons for this such as, immature sucking and swallowing, frequent illness, physical limitations, mild to moderate reflux, delay of age appropriate skills.

Growth: After discharge, infants should gain about 5-6 oz. per week.

STARTING YOUR BABY OFF WITH GOOD SLEEP HABITS

Babies from 9-12 months need on average 10-12 hours of sleep each day.

Sleep is necessary for growth, learning, and health!

Infants up to about 4 months old cry because of physical need. When they cry, you pick them up to comfort them.

Your baby's sleep goes through great changes every night. Familiar sounds or nearby people or activity will wake a lightly sleeping infant, so try to have your baby sleep in a quiet, dark place. If your baby sleeps in your bedroom, have some sort of barrier between you during sleep time. Babies wake up more often when they sleep in their parent's bedroom for a long time, so move your baby to another room as soon as you can.

You probably soothed and relaxed your young infant to sleep but the older baby must learn to relax and fall asleep without help. If your baby can't go to sleep alone it's not surprising that the baby can't fall asleep again after waking up at night. After the rituals of bathing, quiet play and feeding, put your older baby into the crib while the baby is awake. He or she will become better at relaxing and drifting off to sleep without help.

When your infant wakes up at night, take care of the baby quickly and matter of factly - be boring. Then put the baby back to bed and leave the room to discourage waking up for the rewards of play and attention.

Many babies wake up at night for the privilege of sleeping in the parent's bed. This desire often continues throughout childhood. Avoid this attractive nighttime response at all costs. It is difficult to make rational decisions at 3:00 a.m., but taking the easy way out by bringing the baby to your bed will make it much harder for you in the long run. Wait a few moments if you hear whimpering or light cries as it may be a stage of sleep. If the crying is out of control, try to soothe or relax the baby back to sleep without feeding, if possible.



For more information, please visit www.urmc.rochester.edu/childrens-hospital click on 'Services', 'Neonatology', and 'Neonatal Continuing Care Clinic'.