Your Child's Checkup: 2 Months

What to Expect During This Visit

Your doctor and/or nurse will probably:

1. Check your baby's weight, length, and head circumference and plot the measurements on the growth charts.

2. Ask questions, address concerns, and offer advice about how your baby is:

Feeding. Your baby might be going longer between feedings now, but will still have times when he or she wants to eat more. Most babies this age breastfeed about eight times in a 24-hour period or drink about 26–28 ounces (780-840 ml) of formula a day.

Peeing and pooping. Babies should have several wet diapers a day and tend to have fewer poopy diapers. Breastfed babies' stools should be soft and may be slightly runny. Formula-fed babies' stools tend to be a little firmer, but should not be hard.

Sleeping. Your baby will probably begin to stay awake for longer periods and be more alert during the day, sleeping more at night. Breastfed babies may have a 4- to 5-hour stretch at night, and formula fed babies may go 5 to 6 hours between feedings. Waking up at night to be fed is normal.

Developing. By 2 months, it's common for many babies to:

- focus and track faces and objects from one side to the other
- be alert to sounds
- recognize parents' faces and voices
- gurgle and coo (say "ooh" and "ah")
- smile in response to being talked to, played with, or smiled at
- lift their head up while lying on their belly
- grasp a rattle placed within the hand

There's a wide range of normal, and children develop at different rates. Talk to your doctor if you're concerned about your child's development.

- 3. Do a physical exam with your baby undressed while you are present. This will include an eye exam, listening to your baby's heart and feeling pulses, checking hips, and paying attention to your baby's movements.
- **4. Do screening tests.** Your doctor will review the screening tests from the hospital and repeat tests, if needed.
- 5. Update immunizations. Immunizations can protect infants from serious childhood illnesses, so it's important that your baby receive them on time. Immunization schedules can vary from office to office, so talk to your doctor about what to expect.

Looking Ahead

Here are some things to keep in mind until your baby's next routine checkup at 4 months:

Feeding

- 1. Do not introduce solids (including infant cereal) or juice. Breast milk or formula is still all your baby
- 2. Pay attention to signs that your baby is hungry or full.
- 3. If you **breastfeed**:
 - o If possible, breastfeed exclusively (no formula, other fluids, or solids) for 6 months. If desired, pumped breast milk may be given in a bottle.
 - o If you plan to go back to work soon, introduce the bottle now to get your baby used to bottlefeeding.
 - o Ask your doctor about vitamin D drops for your baby.
 - o Continue to take a daily prenatal vitamin or multivitamin.
- 4. If **formula-feeding**, give iron-fortified formula.
- 5. If your baby takes a **bottle** of breast milk or formula:
 - o Do not prop your baby's bottle.
 - Do not put your baby to bed with a bottle.

Routine Care

- 1. Wash your hands before handling the baby and avoid people who may be sick.
- 2. Hold your baby and **be attentive** to his or her needs. You can't spoil a baby.
- 3. Sing, talk, and read to your baby. Babies learn best by interacting with people.
- 4. Give your baby supervised "tummy time" when awake. Always supervise your baby and be ready to help if he or she gets tired or frustrated in this position.
- 5. Limit the amount of time your baby spends in an **infant seat, bouncer, or swing**. 6. It's normal for infants to have **fussy periods**, but for some, crying can be excessive, lasting several hours
- a day. If a baby develops colic, it usually starts in an otherwise well baby at around 3 weeks, peaks around 6 weeks, and improves by 3 months.
- 7. It's common for new moms to feel tired and overwhelmed at times. But if these feelings are intense, or you feel sad, moody, or anxious, call your doctor.
- 8. Talk to your doctor if you're concerned about your **living situation**. Do you have the things that you need to take care of your baby? Do you have enough food, a safe place to live, and health insurance? Your doctor can tell you about community resources or refer you to a social worker.

Safety

- 1. To reduce the risk of sudden infant death syndrome (SIDS):
 - Let your baby sleep in your room in a bassinet or crib next to the bed until your baby's first birthday or for at least 6 months, when the risk of SIDS is highest.
 - Always place your baby to sleep on a firm mattress on his or her back in a crib or bassinet without any crib bumpers, blankets, quilts, pillows, or plush toys.
 - Avoid overheating by keeping the room temperature comfortable.
 - Don't overbundle your baby.
 - o Consider putting your baby to sleep sucking on a pacifier.
- 2. Don't use an infant walker. They're dangerous and can cause serious injuries. Walkers also do not encourage walking and may actually hinder it. 3. Soon, your baby will be reaching, grasping, and moving things to his or her mouth, so keep small
- objects and harmful substances out of reach. Keep your baby away from cords, wires, and toys with loops or strings. 4. While your baby is awake, don't leave your little one **unattended**, especially on high surfaces or in the
- 5. Never shake your baby it can cause bleeding in the brain and even death. 6. Always put your baby in a rear-facing car seat in the back seat. Never leave your baby alone in the car.
- 7. **Don't smoke** or use e-cigarettes. Don't let anyone else smoke or vape around your baby. 8. Avoid sun exposure by keeping your baby covered and in the shade when possible. Sunscreens are not recommended for infants younger than 6 months. However, you may use a small amount of sunscreen on an infant younger than 6 months if shade and clothing don't offer enough protection.

These checkup sheets are consistent with the American Academy of Pediatrics (AAP)/Bright Futures guidelines.



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