

## 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.** If you haven't already, it's time to introduce solids, starting with iron-fortified single-grain cereal or puréed meat. Let your doctor know if your baby has had any reactions (such as throwing up, diarrhea, or a rash) to a new food. Breast milk and formula still provide most of your baby's nutrition.

**Peeing and pooping.** You may notice a change in your baby's poopy diapers after you introduce solids. The color and consistency may vary depending on what your baby eats. Let your doctor know if stools become hard, dry, or difficult to pass or if your baby has diarrhea.

**Sleeping.** At 6 months, infants sleep about 12 to 16 hours per day, including two or three daytime naps. Most babies sleep for a stretch of at least 6 hours at night.

**Developing.** By 6 months, it's common for many babies to:

- look up when their name is called
- say "ba," "da," and "ga" and start to babble ("babababa")
- reach for and grasp objects
- use a raking grasp (using the fingers to rake and pick up objects)
- pass an object from one hand to the other
- roll over both ways (back to front, front to back)
- sit with support

There's a wide range of normal, and kids 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're present. This includes an eye exam, listening to your baby's heart and feeling pulses, checking hips, and paying attention to your baby's movements.

**4. Update immunizations.** Immunizations can protect babies from serious childhood illnesses, so it's important that your child 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 next routine visit at 9 months:

### Feeding

1. If you're **breastfeeding**, continue for 12 months or for as long as you and your baby desire. Breastfed babies weaned before 12 months should be given iron-fortified formula. Wait until 12 months to switch from formula to cow's milk.
2. Start giving your baby **solid foods**:
  - If there's a history of **food allergies** in your family, talk to your doctor before introducing new foods.
  - Begin with a small amount of iron-fortified single-grain cereal mixed with breast milk or formula. You can also offer puréed meat, another iron-rich food.
  - Use an infant spoon — do not put food in your baby's bottle.
  - Wait until your baby successfully eats cereal or puréed meat from the spoon before trying other single-ingredient new foods (puréed or soft fruits, vegetables, or other meats).
  - Introduce one new food at a time and wait a few days to a week to watch for any allergic reactions before introducing another.
3. In the coming months, gradually offer foods with different textures: puréed, mashed, and soft lumps. When introducing **finger foods**, usually around 9 months, choose small pieces of soft foods and avoid those that can cause **choking** (such as whole grapes, raw veggies, raisins, popcorn, hot dogs, hard cheese, or chunks of meat).
4. Pay attention to signs your baby is **hungry or full**.
5. Do not give juice until 12 months unless recommended by your doctor.
6. Talk to your doctor about giving your baby **fluoride supplements**.
7. If breastfeeding, continue to give **vitamin D supplements**. Breastfed babies may need iron supplements until they get enough iron from the foods they eat.
8. Do not put your baby to bed with a **bottle**.

### Routine Care

1. Babies' first **teeth** often appear around 6 months. To ease teething discomfort, rub your baby's gums with a clean finger. Or offer a teething toy or a clean, wet washcloth, which can be frozen for 30 minutes first.
2. Wipe your baby's gums with a wet washcloth to clear away bacteria. When teeth come in, use a soft infant **toothbrush** with a tiny bit of toothpaste (about the size of a grain of rice) to clean your baby's teeth twice a day.
3. Between 6 and 9 months, babies who previously slept through the night may start **waking up**. Allow some time for your baby to settle back down. If fussiness continues, offer reassurance that you're there, but try not to pick up, play with, or feed your baby.
4. **Sing, talk, play, and read** to your baby every day. Babies learn best this way.
5. TV, videos, and other media are not recommended for babies this young.
6. Create a **safe space** for your baby to move around, play, and explore.
7. It's common for new moms to feel **tired or overwhelmed at times**. If these feelings are strong, or if you feel sad 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. Place your baby to **sleep on the back**, but it's OK if he or she rolls over.
2. **Don't use an infant walker**. They're dangerous and can cause serious injuries. Walkers do not encourage walking and may actually hinder it.
3. While your baby is awake, don't leave your little one **unattended**, especially on high surfaces or in the bath.
4. Keep **small objects** and **harmful substances** out of reach.
5. Always put your baby in a **rear-facing car seat** in the back seat.
6. Avoid **sun exposure** by keeping your baby covered and in the shade when possible. You may use sunscreen (SPF 30) if shade and clothing don't offer enough protection.
7. **Childproof** your home. Get down on your hands and knees to look for potential dangers. Keep doors closed and put up gates, especially on stairways.
8. Limit your child's exposure to **secondhand smoke**, which increases the risk of heart and lung disease. **Secondhand vapor** from e-cigarettes is also harmful.

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



Note: All information is for educational purposes only. For specific medical advice, diagnoses, and treatment, consult your doctor.

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