



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. Breast milk or formula is still all your baby needs. Iron-fortified cereal or puréed meats can be introduced when your baby is ready for solid foods at about 6 months of age. Talk with your doctor before starting any solids.

Peeing and pooping. Babies this age should have several wet diapers a day and regular bowel movements. Some may poop every day; others may poop every few days. This is normal as long as stools are soft. Let your doctor know if they become hard, dry, or difficult to pass.

Sleeping. At this age, babies sleep about 12 to 16 hours a day, with two or three daytime naps. Most babies have a stretch of sleep for 5 or 6 hours at night. Some infants, particularly those who are breastfed, may wake more often.

Developing. By 4 months, it's common for many babies to:

- turn when they hear voices
- smile, laugh, and squeal
- "coo" in response to your "coos"
- bring hands together in front of chest
- reach for and grasp objects
- have good head control when sitting
- hold up head and chest, supporting themselves on arms, while on tummy
- roll from front to back

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. Update immunizations. Immunizations can protect infants from serious childhood illnesses, so it's important that your baby get 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 6 months:

Feeding

1. **Breast milk or formula** is still all your baby needs.
2. If breastfeeding, continue to **give vitamin D supplements**. Breastfed babies may need iron supplements until they get enough iron from the foods they eat.
3. If your doctor recommends **introducing solids**:
 - Share your family history of any **food allergies**.
 - Start with a small amount of iron-fortified single-grain cereal mixed with breast milk or formula. You can also start with a puréed meat, another iron-rich food.
 - Use an infant spoon — do not put cereal in your baby's bottle.
 - If your baby is pushing a lot out with the tongue, he or she may not be ready for solids yet. Wait a week or so before trying again.
 - Wait until your baby successfully eats cereal from the spoon before trying other solids. Introduce one new food at a time and wait several days to a week to watch for a possible allergic reaction before introducing another.
4. Pay attention to signs that your baby is **hungry or full**.
5. Do not give **juice** until after 12 months.
6. Do not **prop bottles** or put your baby to **bed** with a bottle.

Routine Care

1. Many babies begin **teething** when they're around 4 months old. To help ease pain or discomfort, offer a clean wet washcloth or a teether. Talk to your doctor about giving acetaminophen for pain.
2. **Sing, talk, read, and play** with your baby. Babies learn best by interacting with people.
3. TV, videos, and other types of screen time aren't recommended for babies this young.
4. Continue to give your baby plenty of supervised **"tummy time"** when awake. Create a safe play space for your child to explore.
5. Limit the amount of time your baby spends in an **infant seat, bouncer, or swing**.
6. 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.
7. 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.
 - 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. 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. **Never** leave your baby alone in the car.
6. 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.
7. Protect your baby from **secondhand smoke**, which increases the risk of heart and lung disease. Secondhand vapor from e-cigarettes is also harmful.
8. Be aware of any sources of **lead** in your home, including lead-based paint (in U.S. houses built before 1978).

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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