



(rev.3-2024)

2 Month Check-Up

Child's Name _____ Date _____

Height _____ Weight _____ Head _____

IMMUNIZATIONS

Your infant will receive immunizations today. Please read the information provided and ask the doctor any questions you may have. You will be asked to sign a form, giving consent for the vaccines. Your infant should receive the DTaP, IPV, HIB, Prevnar, and Rotavirus vaccines today. If your child has not yet received the second Hepatitis B vaccine, then it will also be given today. Please inform the doctor of any previous reactions to vaccines. Common reactions include fever, fussiness, local redness, swelling, pain, and mild sleepiness which may last for up to 2 days. Significant reactions include fever > 104.5 rectally or inconsolable screaming for more than 3 hours. For mild reactions, treatment includes cool compresses and acetaminophen (i.e. Tylenol). Correct doses are in the chart below – it is more important to dose by weight rather than by age. Temperatures taken at this age should be taken rectally. Please notify us of any significant reactions.

During RSV season, October through March, your baby may be given an RSV vaccine if medically indicated. If it is flu season, please be sure all family members, especially siblings, and all people who come in contact with your baby are vaccinated against influenza. Young infants are at high risk for significant illness from the flu and cannot be vaccinated until 6 months of age. Remember, good handwashing is the best defense against illness at any time of year. Family members and caregivers should be up to date on all vaccines to help prevent your baby from preventable illness.

TYLENOL or acetaminophen	0-3 months (6-11 lbs)	4-11 months (12-17 lbs)	12-23 months (18-23 lbs)	2-3 years (24-35lbs)
ELIXIR (160 mg/5 ml)	1.25 ml	2.5 ml	3.75 ml	5 ml
CHEWABLE (160 mg)				1 tablet

- **If you are unsure about dosages of this or any medication, please contact us.**
- **Cold medications are not recommended at this age.**

DEVELOPMENT

At 2 months your infant should:

- Coo and vocalize in response to you, show pleasure in interactions
- Be attentive to voices
- Smile responsively and show interest in visual/ auditory stimulation
- Grasp objects placed in their hands
- Some head control when upright; when lying on stomach, can lift head, neck, and upper chest

To encourage your infant's development, expose your child to various sights and sounds. Infants respond to brightly colored objects, and sounds such as music, reading, and singing. Also, when your child is awake, allow for "tummy time" (time spent lying on the belly to enhance head and shoulder development).

SLEEPING

Infants should be placed to sleep on their backs on a firm, flat sleep surface with no pillows, blankets, stuffed animals, or any soft bedding. At this age infants are more aware of their environment, so teach them to fall asleep in their crib rather than in your arms. Mastering this at an early age will save sleepless nights later on. Do not place your baby to sleep with a bottle.

FEEDING/ NUTRITION

At this age, your baby's nutritional needs are met by receiving either breast milk or formula. Water, juice, and solids are not necessary at this time, unless directed by a doctor. Solids should be introduced at 4-6 months of age. Do not give your baby honey during the first year of life. If breast feeding, please continue the vitamin D supplement. Do not microwave breast milk or formula. Continue to feed your baby in a semi-upright position and do not prop bottles or allow your baby to sleep with a bottle.

There has been extensive new research in the area of food allergies, including peanut allergy. Please let your doctor know if your baby has severe eczema or any known allergies in order to properly prepare for future introduction of peanut products.

CONSTIPATION

It is normal for babies to turn red in the face and grunt when having a bowel movement. This does not necessarily mean your baby is constipated. Constipation means the stools are hard and difficult to pass. Normal stools are soft, easy to pass, and may come several times a day to once every 3-5 days. If your baby is constipated, you may try ½ strength prune, pear, or peach juice, up to 2 oz. a day. If you are concerned about your infant's stooling pattern, please call during office hours.

SAFETY

- Continue using a rear facing car seat properly secured in the back seat. Infants should always be placed in an approved infant seat in the rear-facing position. If they have outgrown the infant seat, they should be in a reversible car seat that is rear facing. Never place your infant in the front seat of a vehicle with an airbag. The back seat of a vehicle is the safest place for children of all ages. Avoid bulky clothing and blankets between your infant and the harness and make sure the harness fits snugly against the child's

chest. Additional information can be found on the US Department of Transportation website. www.seatcheck.org or at healthychildren.org under car seat information for families.

- Continue to place your infant to sleep on his/her back.
- Make sure your baby's crib meets current safety standards.
- No soft bedding, pillows, toys, or toys with loops or string cords. Crib sheets should fit snugly.
- Do not place pacifiers, ribbons, strings, or necklaces around the baby's neck and remove bibs when in a crib or playpen because of the risk of strangulation.
- If you use a mesh playpen or portable crib, the weave should have openings smaller than ¼ inch.
- NEVER shake your baby
- Keep your baby's environment smoke free.
- Do not leave your baby unattended, especially in the tub or with a young sibling or pet, or on a table, bed, couch, etc. Remember that babies move and wiggle, and may fall off beds, car seats (if unrestrained), etc.
- NO WALKERS.
- Keep small toys and sharp objects out of reach.
- Do not drink hot liquids around your baby.
- Reduce temperature of the water heater to below 120 degrees F. Always test the water temperature with your wrist before bathing. If your infant is burned, immediately place the burned area under cold water and call our office for advice.
- Keep your baby out of direct sunlight.
- Test smoke alarms; change batteries yearly.
- Keep plastic bags and balloons away from your infant.
- Do not allow your infant to play with small objects.

CONTACT OUR OFFICE

If non-urgent questions or concerns about your child develop before your next appointment, please feel free to call our office during regular business hours. Our medical advice nurses will be glad to answer your questions. They may recommend that you make an appointment to have your child seen by a doctor or nurse practitioner.

In the case of a true emergency, such as difficulty breathing/respiratory distress, loss of consciousness, seizure, profuse bleeding, or any potentially life-threatening situation, **call 911 or go to the nearest emergency room**. Due to their pediatric ER staff, our providers prefer Chippenham, St Mary's, or VCU Medical Center when you have a choice in where to take your child.

Please call **Poison Control** at **828-9123** locally or **800-222-1222** immediately in the event of any ingestion or suspected ingestion of chemicals, medications not prescribed for your child, accidental overdose, or any other substance of concern.

The symptoms listed below may represent early signs of illness. Please call our office immediately if your child experiences any of these symptoms:

- Fever of 100.4F or higher, taken rectally, in an ill appearing infant. At this age, for low grade fever (<101) in a well appearing infant, call our office during office hours. Contact us right away if your infant looks sick (i.e. poor eye contact, won't smile, eat, or play).

- Any changes in behavior, irritability or listlessness, poor feeding, vomiting, decreased urine output, prolonged hard or rapid breathing, etc. that makes you uncomfortable.

One of our doctors is always on call after hours for urgent or emergency care concerns. To reach our on-call service, please dial the office phone number and follow the prompts. You will be directed to our nurse on call service and may have to leave a message. You will receive a call back as soon as possible from one of our nurses or providers on call. We ask that you limit after-hours calls to urgent concerns only. Persistent problems such as ongoing illnesses (including colds), constipation, or behavior problems without sudden changes are best addressed during regular office hours when our providers are able to access your child's medical record. Please do not call after hours or on holidays to request antibiotics, including eye drops. In most cases your child will need to be seen to ensure proper diagnosis. If you feel that your child needs to be seen after hours, please take him or her to the nearest urgent care center or ER.

The next check-up is at **4 months** of age. We encourage you to make your appointment before you leave today. If you would prefer to call, our centralized scheduling department can be reached at 804-320-1353. Please note that our office requires 24-hour notice to cancel an appointment. Thank you.