

PEDIATRIC ASSOCIATES OF SPRINGFIELD, INC

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SIX-MONTH CHECK-UP

DIET: Most babies are developing good swallowing reflexes and head control at this age and will enjoy baby foods added to their diet. Brown rice cereal is a good starting point since it can be mixed thicker as the baby learns to handle solid food. Since it is also a good source of iron and fiber, a quarter cup a day should continue to be added to other baby foods until starting table food at nine months. Alternating rice and oatmeal cereals with occasional whole wheat type will minimize concerns about arsenic and gluten exposure.

Offer solids with a spoon, not an infant-feeder or bottle. When the baby turns her head away or pushes her tongue out, she may be telling you she is full.

New foods may be added once or twice a week. Green vegetables are more textured and may take a little longer to “like”. “Second” foods are preferred as they are the right texture and thickness for this age. Noodle dinners, desserts and juices are not nutritious. The focus should be on breast milk/formula, vegetables and cereal with some fruit and an occasional meat. Offer twice as many vegetables as fruits on any given day. Two meals of solids a day is a good starting point, building up to three meals a day at nine months. The amount of solids is flexible as long as the baby is interested and milk intake does not decrease. The timing of the feedings is also flexible. Homemade baby food is fine as long as it is stored properly.

"Baby-led weaning" is a feeding strategy currently drawing attention but caution must be used to avoid choking risks.

New research on food allergy tells us that introducing peanut at this age will decrease the risk of developing food allergies in the future. One way to do this and avoid a choking hazard is to mix a small amount of peanut butter or peanut powder into the baby food daily.

Breast-fed babies will nurse four to six times a day for the next six months. Bottle-fed babies will continue with 24-32 ounces a day. “Next-step” formulas or cow’s milk are not recommended.

Eliminating the pacifier and introducing a sippy cup are appropriate at this age. Using a small amount of water, formula, or pumped milk in the cup will help. Your baby will have preferences in cups (hard or soft-top, spout, straw or groove, handles or no handles, etc.). The goal is to be using the cup full-time at a year of age.

When your baby has teeth, fluoride supplementation should be prescribed if your home water supply is not fluoridated. Breast-fed babies should continue Poly-vi-sol with Iron, 1 dropper a day. Bottle-fed babies taking less than 32 ounces of formula a day should continue vitamin D, 400 iU/day. Babies who receive both breast milk and formula need only the Poly-vi-sol. Teething gels and tablets containing belladonna or benzocaine are not recommended. Acetaminophen or ibuprofen may be used occasionally at this age. A dosage chart is given at each check-up and included under the Parent Resources tab of this website. Please double-check your baby's dose and the details (such as milligrams per milliliter) of the medication before administering.

DEVELOPMENT: Many babies are learning to sit up at this age, although they may be unsteady. They are becoming mobile and pulling up. They often chew on their toes, pass toys from one hand to the other, bang toys together and throw toys from the crib, playpen or highchair. They start to make recognizable sounds and enjoy peek-a-boo, songs and finger games. Stationary walkers and playpens are fine for brief periods, but baby swings, infant seats and crib mobiles should be put away now for safety reasons. Show babies pictures in books and read to them. Failure of a baby to vocalize and communicate with parents at this age should be brought to our attention.

Babies continue to become more sociable and aware of their surroundings. As the baby becomes more able to distinguish people and objects, there will frequently be a more cautious (possibly even negative) reaction to unfamiliar people. It is helpful to remember this is a temporary and normal stage of development. Don't be surprised or worried about the baby crying when held by someone besides mom.

SLEEP: Many babies at this age will sleep 10-12 hours at night. Continue to put the baby down to sleep while still awake to reduce sleep problems. Do not put the baby to bed with a bottle.

ILLNESS: Many illnesses are caused by viruses and are best treated by keeping the child comfortable while the body heals itself over several days. Fever (rectal temperature over 100.4) is one of the ways the body fights illness. How the baby seems to feel is more important than the degree of fever. A baby who has a temperature over 104, fever more than three days, difficulty breathing, irritability or lethargy even when the fever has gone down, should be seen in the office promptly. A child with fever or pain can be made more comfortable with acetaminophen or ibuprofen. A dosage chart is given at each check-up.

The symptoms of minor respiratory infections often improve with the use of a vaporizer or humidifier in the baby's room, elevating the head of the bed and cleaning the baby's nostrils with saline drops. Discolored mucus without other worsening symptoms is natural and responds well to regular use of nasal saline drops. "Cold" medicines may have serious side effects in this age group, are ineffective and are not recommended. Cold symptoms often last 7-10 days.

Vomiting and diarrhea respond best to continuing breast milk. Bottle-fed babies should switch to oral rehydration fluids such as Pedialyte. Smaller, more frequent feedings such as a spoonful every 2-3 minutes can prevent dehydration in cases of persistent vomiting. If rehydration fluids are needed for more than 24 hours, consult with our office.

Regular exposure to cigarette smoke is harmful to your baby and contributes to ear infections, colds, asthma, crib death and later cancer. Smokers should not smoke in the house or car. The American Cancer Society can provide information on stop-smoking programs.

When planning a trip away from your child, please leave a letter with her caregivers including medical conditions, past surgeries, medications, allergies and immunizations as well as a copy of your insurance card. If a visit to the hospital is needed, for an X-ray as an example, hospital policy often demands contact with a parent by phone unless there is a true emergency.

SAFETY: Anticipation of new skills will help you protect your child. In addition the precautions mentioned in earlier documents, walkers are to be avoided at this age since they are associated with many types of injuries. As

your baby becomes more mobile, childproofing your home is appropriate. Accidents are far more likely to harm your child than any disease over the next few years. It is vital to remove all objects such as scissors, lighters, knives, pins, curling irons, hot pans, etc. from the baby's reach. Cover electrical outlets and cords. Remove throw rugs. Lock up all chemicals, cleaning agents, spray cans and medications (including aspirin, iron, and vitamins) in a cabinet. Carefully cover or guard heating grates, wood stoves and fireplaces. Stairways should be blocked by closed gates. It is amazing how fast accidents occur, and frequently there are no second chances. The Consumer Product Safety Commission website is linked on the Parent Resources tab of this website.

IMMUNIZATIONS: Vaccines are due again at this age. Acetaminophen or ibuprofen will help side effects such as fever, fussiness or redness/discomfort at the injection site. If your baby has fever for more than 24 hours, acts "limp" or "lifeless", or seems extremely fussy, please let us know promptly.

OFFICE CALLS: When calling for advice, please have your questions organized with a pencil and paper handy. If the baby is ill, please take the baby's temperature before calling (no need to add a degree). Routine calls should be made during regular weekday office hours. Emergency calls may be placed through the office number whenever we are not in the office.

APPOINTMENTS: Preventive care visits (well child check-ups) are an essential part of your baby's health. These are an opportunity to discuss changes and concerns about diet, sleep, developing skills, safety, and immunization issues. The next few visits at this age will be at 9 months, 12 months and 15 months. Please see the Appointments page of this website for details on scheduling well and sick visits.

IMPORTANT PHONE NUMBERS:

Office (417) 882-1600

After hours (877) 599-8962

Fax (417) 631-0119

Poison Control (800) 392-9111