

# Health is a Journey!!

What to expect at 4 Months!! Tips from Gene



The Journey..... Is made of **Short Term Goals** that you choose or at least control somewhat. These will lead to **Long Term Goals**, like being **Independent**, to **Belong**, to develop **Skills**, and be **Giving** when your child grows up! How exciting is that? And it happens, almost before you know it, so watch those Short Term Goals, One Day at a Time!

Hello Mom and Dad! **Gene** and **TSK** here to share the **Secrets of Being 4 Months Old** ! How are the Goals coming?



## 1st Long Term Goal: Giving

**Gifts!!** The act of **Giving** makes people healthy by helping to decrease blood pressure and stress reactions that can make us sick! **Giving** makes us feel good about ourselves!



### Short Term Goals :

you put bacteria in



**Give the Gift of few cavities** by NOT SHARING SPIT! When you share spit TSK's mouth that can cause cavities when the teeth come in!



**Give the Gift of Safety** by watching TSK when

rolling starts!!!

## 2nd Long Term Goal: Belonging

builds bridges to others which makes us healthy.

**Families are the First Great experience!**



### Short Term Goals :

When he is



TSK knows he **Belongs** to the family

read to, talked to, sung to, and played with! If he gets fussy or tired, stop for a few minutes, then Try again!

## 3rd Long Term Goal: Skills

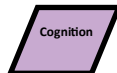
the Healthiest People are those who

grow and learn. Learning is always an "uphill" challenge, but you will help TSK!!



### Short Term Goals :

TSK is using his



**Brain** to learn

how to use his extremities... and to ROLL OVER!

He may get frustrated at first, but with your help he will learn this great **SKILL!!!**

## 4th Long Term Goal: Independence

the Healthiest people learn to be self-sufficient.

**Short Term Goals** : **Sleeping** all night

is **Sleep** important for

**In-dependence!**

TSK shouldn't depend on you to help him go to

sleep after he has slept through the night and then starts awakening again; TSK needs to learn to go to back to sleep alone!

**Nutrition** becomes an **Independence**

Issue when TSK shows interest in your eating, with the "Open Mouth" sign!



## When to Call or Ask for Help!

- 1) Temperature over 101F
- 2) Isn't eating well
- 3) Isn't urinating 4 times a day
- 4) Isn't moving all extremities
- 5) Isn't making eye contact, or turning to sound
- 6) Is grunting to be able to urinate
- 7) Excessive crying— could be colic, or something else! Ask!!!
- 8) Anyone in the family is depressed, or has emotional outbursts, as this affects the Baby's development
- 9) Anyone in the family uses substances that can cause harm (like smoking, or getting drunk or being under the influence of drugs like meth)
- 10) Getting appropriate vitamins?
- 11) Turns the neck both directions, equally?
- 12) Legs the same length?
- 13) If not getting immunizations today, do you have a plan to get them or protect your baby from disease?
- 14) Any time you are worried

## One Day at a Time!!

1 2 3 4 5 6 7

## Healthy Child Calendar

### A Way to Stay "Up-to-Date" on TSK's Needs: Plan Ahead!

And it all happens each Day as you make choices! Here are a list of things to possibly add to your Healthy Child Calendar, to be sure they get done:

- 8
- 15 Tummy Time should be continued— Watch for Rolling Hazard
- Don't Share Spit!
- 22 Sleep patterns should be getting consistent—Ask if not!

# Health is a Journey!! One Day at a Time!!



THANK YOU for sharing your journey with Dr. Greta and her advisor, Gene. Together, you will explore the wonders of your child's growth and development. We will explore how to use Short Term Goals to reach your Long Term goals... and how to enjoy the Journey... One Day at a Time! Under the tutelage of Gene, this material is developed by Dr. Greta.

Greta McFarland, MD FAAP  
Box 849  
Ashley Clinic  
Chanute, Ks 66720

## 4 Months Old! The Little Charmer!... Here we come!!!

### More Info In depth!!

**Development** – Every day brings a new accomplishment or a skill; Watch closely to see your baby combining abilities of thinking (cognitive) with motor abilities!

**Cognitive**- Each thing that happens to your baby is "put into the brain" by the senses (eyesight, hearing, touch, taste, smell). Each thing that happens, then could be called an "Input". These messages (such as seeing Mommy coming with Food!) are sent to two places in the brain. The first place is the hypothalamus and the limbic system. This area makes a quick judgment as to whether the "Input" is good, bad, dangerous, or boring. The second place is the neocortex, or the rest of the brain. The limbic system acts very quickly, making snap judgments. The neocortex takes several more minutes to think things through and is much more thorough in evaluating situations. Scientists think the limbic system is a protection mechanism. If something dangerous was about to happen, i.e., a car coming at us, we could run away. There might not be time to think about it, so the slower neocortex alone would not be enough to protect us. You can start to see these two different thinking pathways in your baby. Watch for signs of instant reactions to seeing, hearing, or touching something. Other times you will see the baby stop for a few seconds, the eyes will either get wide (trying to get more information), or will squint with wrinkled eyebrows (trying to close out extra stimuli). The neocortex is processing information, then making a calculated decision, i.e., "Hmmm...I don't think...no, I KNOW I don't like this new play suit; it's scratchy!...now what kind of a cry will get Mommy to take it off?" Your four month old may not be quite that sophisticated, but the beginnings of the thought process are there, and if you look, you can start to see some of the signs!

**Motor Development** – Good head control should be in place, so that when the baby is laying on the back and you pick him/her up by the shoulders, the head should not fall backwards as the shoulders come forward. Most babies are rolling over, front to back. Putting the hands to the midline on the chest or by the mouth is common, and passing objects from one hand to the next should be occurring soon. Watch for the baby to find the feet, and put them in the mouth! (Don't you wish you were still that flexible?)

**Social-Emotional** – See the above discussion on Cognitive Development, as these two areas go hand in hand. At this age your baby will start smiling, cooing and squealing with excitement, and is a real joy to be around, most of the time. If you talk to your baby a lot, in a normal conversational style, you will notice that the baby will start cooing as if he/she is carrying on a conversation! Keep the conversations going (you talk a while, then pause, quietly watching Baby, so he/she knows you are paying attention, and he/she may then "coo", something back to you). Hold

the baby up to a mirror, so he/she can see both of you. Having brightly colored things the baby can hold and move around encourages all aspects of development.

**Stress Management** – With more complex thinking processes, will come new types of stress. With the protection mechanisms of the limbic system (see above) there are certain body chemicals called neurotransmitters that flood the system when we are scared, or angry. (Other emotions probably cause neurotransmitter release, too.) These are called the Fight or Flight neurotransmitters, and adrenalin is a major player. Your baby will start to have these rushes of neurotransmitters now, as he/she is experiencing different things and developing opinions about them. Look for specific signs in your baby. This will help you to learn to read the moods. Watch for him/her to get red-faced, tighten all the extremities, usually for anger. If he/she becomes pale, or is motionless for a few seconds, this may be a fear response. Each baby has his/her own body language; soon you will be an expert at reading your child! The more you observe, the more you can help your child understand his feelings as he gets older!

#### **Developmental Milestones for Four Months**

No head lag on pulling up from laying on the back. Rolling from front to back. Plays with hands and holds objects. Follows parent's face with eyes for 180 degrees (from side to side). Smiles, coos, squeals. Moves all extremities when excited, and is starting to reach for things.

#### **Body Functioning**

**Feeding** – Keep all babies on breast feeding (with appropriate vitamins as needed) or on formula with iron. Usually, it is better to wait closer to six months to give solids, as authorities think that early food intake may lead to allergies in later life. If your baby is not showing interest in food, don't encourage this! Some babies show the "Open Mouth Sign"; whenever you start to eat, their mouth flies open for a taste of your food! If this is happening, perhaps your baby is ready to eat a little cereal. Starting with just a few spoonfuls is enough. (Some babies will "tongue thrust", or act like they are spitting the food; this is just a tongue reflex that the baby will soon overcome; it has nothing to do, at first, with preference!) It is probably best to stay with just cereal until six months. A little juice, watered down, is probably all right, especially if adding the cereal made the stools become harder.

**Bad teeth in the family??** Cavities are just an infection of the teeth, and often this runs in families. If anyone in the family has bad teeth, don't let him/her kiss the baby on the mouth, share saliva (like put fingers or a pacifier in his/her mouth, then in the baby's mouth, or share drinks.

**Teething** – Excessive drooling may start at this age. Teeth may or may not come in now, but probably are going up and down in the gums. Giving the baby something like a cool wash rag to chew may help. If you use over-the-counter gum numbing preparations, be sure to read and use only as directed.

**Bowel Movements** – If you introduce solids, stools will get harder. A little watered down apple juice may help the B.M.s from becoming "hard balls".

#### **Sleeping**

Rocking or Feeding to Sleep? Time to stop! – Most babies are sleeping through the night by this time. But, Beware! Sometime between four and six months, your baby will switch to an "adult" sleep pattern. Most people after six months of age start waking up four to five times a night, as part of a normal deep sleep, light sleep cycle. Most of the time we put ourselves back to sleep with no memory of awaking the next day. The reason we can go back to sleep so easily is because our brain recognizes we are in familiar surroundings, and therefore, safe. (Some wonder if this was one of those protective mechanisms, when humans used to be in less safe environments!) When babies start this waking at night, they will naturally look for the environment they remember when going to sleep. If they have fallen asleep while being held or being fed, then when they awaken in the middle of the night, they will expect the same! The best thing is to cuddle, but lay the baby down BEFORE he/she is asleep; the baby then will know he/she is in the crib, and will go to sleep more easily during the night cycles. DON'T START FEEDING A BABY WHO HAS BEEN SLEEPING THROUGH THE NIGHT, JUST BECAUSE HE/SHE STARTS WAKING! Let the baby whimper a little, and usually he/she will go back to sleep on his/her own.

#### **Safety Issues**

Check area around the baby frequently for objects that should not be placed in the mouth.

Continue to watch for: rolling hazards, car/carrier safety.

Don't get Baby's attention with objects you don't want Baby to have (i.e., powder container).