

## You and your premature baby:

# 1 month

Adjusted age: measured from the due date



[www.childrensmn.org](http://www.childrensmn.org)

### NICU Follow-Up Clinic

(612) 813-6722, Children's - Minneapolis

(651) 220-8063, Children's - St. Paul

### About your baby's age

There are two ways to measure the age of a baby born prematurely:

- **Chronologic age** is the number of months since your baby's actual **birth date**. (We talk about full-term babies in terms of chronologic age.)
- **Adjusted age** (used here) is the number of months since your baby's **due date**. Your baby missed out on some growth time inside the womb, and "adjusted age" takes that into account. For example:
  - Your baby was born prematurely on Jan. 1.
  - The original due date was Feb. 1.
  - On March 1, your baby's adjusted age is 1 month—even though she was born 2 months ago.

Research shows us that babies who are hospitalized at birth have a different timetable of development. But no baby, premature or full term, follows an exact pattern: for example, all babies learn at their own speed to roll over or sit up. When we evaluate your baby at the follow-up clinic, we will use **adjusted age** as a measuring stick. We will let you know if your baby is developing appropriately. If there are any areas of concern, we will suggest ways to encourage your baby's development.

### Caring for your baby

#### Feeding

Your baby may be breastfeeding, taking a special formula for preemies, or both. For now, this is all the food a baby needs. Babies enjoy being snuggled, and they like the face-to-face contact of feedings. Make this a special part of your day together.

#### Growth rate

Many parents take their babies home when they are still very small. Remember, you cannot compare your baby in size or weight to one who was not premature or sick in the newborn period. Your baby's doctor and the staff of the NICU follow-up clinic will watch your baby's growth carefully over the next few months. Sometimes "catch-up growth" brings them closer to the growth rate of full-term, healthy babies. If growth is a problem, we may recommend a different formula, or extra calories added to breast milk.

#### Medicine safety

Important: if your baby is taking a medicine, give the correct dose at the scheduled time. Keep all medicines away from other children in the home. See the patient/family education sheet, "Medicine safety."

#### Accident prevention

Never leave your baby unattended on a bed, counter, furniture, or other place where she could fall off. Even a baby who cannot roll can still wiggle and squirm.

## **Car seats**

Buckle your baby into an approved, properly installed car seat before you start the car. Keep the seat rear-facing until your child is 20 pounds and one year of age. The back seat is the safest place for all children to ride. Never place a rear-facing car seat in the front seat of the car with a passenger-side air bag.

## **Sleeping safety**

Babies should sleep in a crib or bassinet, not in an adult bed, on pillows, or with parents. Babies should sleep lying on the back unless you are instructed otherwise by your medical provider.

## **Positioning and muscle development**

Help your baby re-learn to bend and curl the body, arms, and legs. After months in a curled position inside the womb, newborn preemies often spend their earliest days lying stretched out on a bed or in an isolette. If the baby has been on oxygen, the shoulders were probably pushed back a bit, too.

To help your baby learn to bend again, snuggle up close when carrying: put your arm under the buttocks and gently hold the knees in a bent position. Sometimes let one leg be bent and one leg be straight.

During diaper changes, raise the hips up with knees bent and gently roll the hips and legs from side to side. If they don't roll easily, keep trying very gently. If your baby is stiff, try bending one leg at a time. Point out any stiffness to your child's health care providers. They may offer other recommendations.

## **Interaction**

Go ahead and interact with your baby: talk, touch, and enjoy your child. Your baby may respond with happy signs—such as kicking and waving—but after a few minutes this may

lead to a crying spell. You'll need to help control the excitement for a while. If your baby gets overly excited, help with the settling-down process. Make your voice quiet and your movements calm. Swaddling can often help a baby relax again.

## ***What to expect this month***

You and your baby are just getting used to a routine at home. Remember, things will continue to change and your baby's sleeping, eating, and awake patterns will vary greatly over the next few months.

## ***This month with baby***

Here's what 1-month-old babies might tell you...if they could!

### **Routines**

I like being at home. My needs may not follow a particular schedule. It may take a while before you can predict just when I'll want to sleep or eat.

### **Movement**

I like holding your finger. When you put your finger in my hand, I will grasp it. If you stroke the back of my hand, I will open my fingers.

### **Comforting myself**

I love to suck. Sucking my fingers or my pacifier gives me great pleasure and comfort. If I like to suck on my hands, but have trouble getting them to my mouth, you can help me by wrapping me in a blanket with my hands close to my mouth.