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Your Newborn's Health:
What's Normal, What's Not, and When to Call

Bringing your baby home is exciting — and sometimes a little scary! In these first weeks, it's normal to have lots of questions about what's typical and what might mean your baby needs extra care. You've got this — and we're here to help every step of the way.

Normal Newborn Findings (Not Signs of Illness)

Newborns do many things that can look surprising but are actually *completely normal*. Here are some common examples:

- Mottled skin: A pink-and-pale or lacy pattern on the skin that comes and goes — especially when baby is cool — is normal in newborns.
- Sneezing or a "snorty" nose: Babies sneeze often to clear their tiny nasal passages. Mild congestion is common, especially after feeding.
- Periodic breathing: It's normal for babies to breathe fast for a few seconds, then pause for up to 5–10 seconds before starting again. As long as your baby's color stays pink and they resume breathing on their own, this is normal.
- Hiccups: Frequent hiccups are normal and don't bother your baby.
- Startle reflexes: Sudden arm or leg movements during sleep are normal reflexes.
- Small breast buds or newborn acne: Caused by maternal hormones — both will fade on their own.

If you're ever unsure, call us — but know that these signs usually mean your baby is adjusting beautifully to life outside the womb.

When to Call the Office or Seek Help

Call our office right away if your baby:

- Has a rectal temperature of 100.4°F (38°C) or higher. This is an *emergency* in babies under 8 weeks. Go directly to the Emergency Department at a local Children's Hospital (in Austin we recommend Dell Children's or Texas Children's Hospital)
- Feels unusually cold (temperature below 97°F or 36°C) and isn't warming up with skin-to-skin contact or an extra layer.
- Is feeding poorly — refusing feeds, eating much less, or not waking to feed.
- Is sleepier than usual or hard to wake.
- Is breathing fast (more than 60 breaths per minute), grunting, or their chest is pulling in with each breath (retractions). If you've never seen these things before, you may not know what to watch for so **please watch Video 1 and Video 2 to visualize symptoms of breathing difficulty**.
- Looks blue, gray, or has pale lips or tongue.
- Has fewer than 3–4 wet diapers in 24 hours after the first few days of life.
- Has persistent vomiting (not just small spit-ups), green-colored vomit, or blood in spit-up.
- Has a rash that spreads quickly or looks like bruising. Reference our other handouts: newborn appearance, newborn rashes, and newborn birthmarks here. (link at bottom of next page)
- Cries in a high-pitched, inconsolable way or seems in pain.
- You just have a *gut feeling* something isn't right — you know your baby best.

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Reference: American Academy of Pediatrics (AAP), HealthyChildren.org

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Checking Your Baby's Temperature

For babies under 2 months, the only reliable way to check a temperature is rectally.
Here's how to do it safely:

1. Use a digital thermometer (not glass or ear thermometer).
2. Apply a small amount of petroleum jelly to the tip.
3. Gently lay your baby on their back and hold their legs as if changing a diaper.
4. Insert the thermometer about ½ inch (1.25 cm) into the rectum — just the silver tip.
5. Hold it in place until it beeps, then remove and read the temperature.
6. Clean the thermometer with soap and water.

If the temperature is 100.4°F (38°C) or higher, go to the Emergency Department — do not give medicine or wait to see if it goes down.

Why Keeping a "Small Circle" Matters

In the first 2 months, your baby's immune system is still developing and hasn't yet built protection from vaccines. For this reason:

- Try to limit visitors and large indoor gatherings.
- Ask family and friends to wash hands before touching the baby.
- Keep anyone who is sick (even with mild cold symptoms or "allergies") away.
- Make sure close contacts are up to date on vaccines like whooping cough (Tdap – need updated vaccine every 5 yrs to be around newborns), flu, and COVID. Older adults (over 65 years) can also get an RSV vaccine.
- If you have a toddler at home, be extra mindful about keeping your newborn protected. Toddlers often bring home germs from playdates or school. When your toddler is sick, it can help to "reverse quarantine" — giving your newborn a protected space while your toddler plays freely elsewhere in the home. And if your toddler wants to show love, remind them to "kiss toes, not nose."

Fever in a baby under 8 weeks always requires a hospital evaluation, including blood and urine tests — even if they look well. Keeping your baby's circle small helps reduce the chance of exposure to germs that can cause serious illness.

Final Thoughts

Those first few weeks with baby can feel both amazing and overwhelming — and that's completely normal.

- **You're learning together.** Every baby has their own little quirks, and over time, you'll start to recognize what's normal for your little one.
- **You can always reach out.** No question is too small when it comes to your baby's health. If you're unsure about anything, call our office — we're here for you day and night.
- **Trust yourself.** You know your baby better than anyone else, and your instincts matter.

Ways to reach us

- **Daytime (730 a.m.–5 p.m.):** Call us at **512-458-5323** for questions.
- **After hours & weekends:** Call the same number to reach our on-call nurse. Leave a message, and a nurse will call you back.
- **Through** the patient portal.

Don't forget about our online resources: Visit our website for newborn handouts written by our providers—covering everything from bathing and skin care to feeding, poop, and genital care. (Check there before turning to Google!)

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