



INFINITY
PEDIATRICS

220-5010 Richard Rd SW
Calgary, AB T3E 6L1

P: 403 727 5055

F: 403 727 5011

info@infinitypediatrics.ca

www.infinitypediatrics.ca

CARING FOR YOUR PREMATURE BABY

A baby's due date is at 40 weeks of pregnancy.

A baby is considered "full term" if born after 37 weeks and "premature" if born before this time. A baby is considered "extremely premature" if born before 28 weeks.

All newborns and infants require a lot of care! There are some additional considerations in preterm babies that are important.

Growth and Nutrition

Your baby may be breastfed, formula fed, or a combination of both. The most important thing is that your baby gets all the nutrition they require to grow. Your pediatrician will be following your baby's growth closely.

Initially your baby will be measured using a "corrected" growth curve (accounting for your baby's prematurity).

If your baby was discharged on a special premature formula or higher calorie formula, your pediatrician will determine how long this is needed based on growth.

It is normal for babies to spit up (gastroesophageal reflux). If your baby is spitting up but is happy and growing, this is not a concern. Let your pediatrician know if you think your baby has reflux that is affecting feeding or causing your baby discomfort. Your pediatrician can then determine if treatment is required.

Normal baby bowel movements vary and can occur up to 10 times a day or as infrequently as once per week. They can be yellow/brown/green/orange in color- blood in the stool or pale/white stool is not normal and should be brought up with your doctor.

In addition to formula or breastmilk, your baby requires additional Vitamin D. Your pediatrician will advise you to give your baby 400-800 IU per day.

Premature babies are not born with adequate iron stores usually acquired in the last month of gestation from their mom. Depending on birth weight and other risk factors, your premature baby may be on iron supplementation. They may require this iron supplementation for 6-12 months.

Introduction of solids will depend on your baby's readiness. This is generally at 4-6 months *corrected* age.

For further information on feeding your baby solids:

<https://infinitypediatrics.ca/wp-content/uploads/2016/06/Feeding-Baby-Solid-Foods-From-6-12-months-of-age-Healthy-U.pdf>



Development

Depending on how early your baby was born and their course in NICU, they may be at risk for developmental delays. Your pediatrician will be monitoring their development closely.

If you are following your baby's "milestones" ensure you are evaluating them based on their *corrected* age.

Some good resources for normal development:

https://caringforkids.cps.ca/handouts/behavior-and-development/your_childs_development

<https://www.cdc.gov/ncbddd/actearly/milestones/index.html>

Sleep

Safe sleep is very important to prevent Sudden Infant Death Syndrome (SIDS).

Always put your baby to sleep on their back in their own bassinet or crib. Do not place any pillows, soft stuffies, bumper pads, or other items in your baby's crib. They should sleep in your room for the first 6 months. Babies should not "cosleep" or sleep in the same bed as parents to prevent SIDS.

For more information on sleep in babies:

https://infinitypediatrics.ca/wp-content/uploads/2021/05/Infant_Toddler-Sleep.pdf

Respiratory

Depending on your baby's symptoms during their NICU stay, they may be on caffeine. This caffeine improves their drive to breathe and prevents apnea. Once a baby is 44 weeks corrected, their brainstem is fully developed and their drive to breathe is normal. This is likely when your pediatrician will recommend you stop the caffeine.

Keeping your baby healthy

- Immunizations- your baby will need routine immunizations starting at 2 months- this is based on age NOT corrected age. You can call 811 to book these immunizations
- Family health- babies have immature immune systems and need to be protected against illness. Having all members fully vaccinated (including with the annual influenza vaccine) helps to protect them.
- Visitors- anyone interacting with your baby should practice good hand hygiene and ensure they are well without any symptoms of illness



Other appointments you may need

- Neonatal followup clinic- if your baby qualified for this program (very premature or complex medical course) this followup will be arranged
- Vision clinic- if your baby was very premature they may require ongoing screening for retinopathy (this will be indicated during NICU stay)
- Home oxygen clinic- if your baby was sent home on oxygen this followup will be arranged
- Family physician- your pediatrician will see your baby at regular intervals but will not provide “primary care”, it is important that your baby have a family doctor
- Other subspecialists- depending on your baby’s medical needs, they may have other pediatric doctors following them as well

When to seek medical attention

If you are ever concerned, you can call Health Link at 811 and a nurse with the Early Start Line will determine if and where your baby should be seen. You should seek advice if:

- Your baby has a fever and is < 3months old (requires evaluation in the emergency room if temperature over 38 degrees)
- Your baby is not waking to feed at their normal intervals or having feeding refusal
- Your baby is persistently breathing fast or struggling to breathe
- Your baby is persistently vomiting (large volume, forceful) or has diarrhea
- Your baby is difficult to wake or is not as responsive

Further Resources

For general information on caring for your baby see these great resources:

Preemie Care: <https://www.preemiecare.ca/>

Canadian Premature Babies Foundation: <https://www.cpbf-fbpc.org/>

Healthy Parents Healthy Children:
<https://www.healthyparentshealthychildren.ca/>

Caring For Kids: <https://caringforkids.cps.ca>