

Stroller, Sleep and Car Seat Safety

Some strollers come with car seat attachments and of course vehicle injuries can be prevented with infant seats. But infant seats can't protect your baby unless they are properly installed.

"Fire departments and hospitals often have car seat safety checks that can help you put the car seat in, and this should be done before the baby is actually taken home from the hospital for the first time so most fire stations can help people with it. It's very important because if the car seat isn't placed correctly in the first place it doesn't offer the infant the most protection. In some cases, it will actually put the infant in increased harm's way in an accident."

Also, infant seats should be rear facing in the back seat. Never put an infant in the front seat of a car with a passenger air bag. And infants should be in their seats every time they're in a car.

"I don't believe I've ever seen a child not strapped into a car seat. I think that parents are really really careful about that it's just so dangerous."

Some other advice: the baby should stay in a rear-facing seat until the maximum height and weight allowed by your car seat manufacturer. Manufacturers are now making car seats with higher rear-facing height and weight limits so children can benefit from the fact that they can safely sit rear-facing longer. And we know that rear facing is the safest position for a child to be in case of an automobile crash.

Don't forget that parents should be careful not to use hand-me-down car seats that may have been in a crash.

"Even if there are no visible marks to the car seat some of the plastic pieces may have some damage to them and should not be reused."

The safest place for your baby in a car is in a car seat but the safest place for your baby to sleep is in the room where you sleep at least for the first six months. Place the baby's crib or bassinet within arm's reach of your bed. Make sure there are no toys, soft bedding, fluffy blankets, pillows or stuffed animals in the crib.

Always put the baby to bed on his back every time you put him down to lower the risk of Sudden Infant Death Syndrome. And don't bring him into bed with you to sleep a practice known as co-sleeping.

"I know it helps babies sleep better and it's cozy and it's nice for bonding. So, what we say is snuggle with the baby while you're awake. Comfort the baby. But make sure you have a separate sleep location either a crib or a bassinet."

Co sleeping can increase the risk for suffocation and falls.

"When you're in deep sleep and the baby is in the bed with you that increases the chances of you rolling over on the baby - all 180lbs of you on a 7 or 8lb baby. They suffocate."

"The baby can fall off the bed while the parent is sleeping and that can cause damage so yeah, they should stay in their crib."

According to the American Academy of Pediatrics when looking for someone to care for your baby: a child care provider, family member or friend you should always talk to this person about safe sleep practices especially putting the baby to sleep on his back.

"If grandma is taking care of the baby that grandma has a bassinet also that has a firm surface and that anybody that's taking care of the infant knows the baby should only be sleeping on his or her back."

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"I want to go over the oral medication and the way in which you're giving it in order to make sure we're giving the exact amounts."

Always use the measuring device that comes with the medication, don't use kitchen tablespoons or teaspoons to measure liquid. Syringes and droppers work well for infants but remember to squirt the medicine to the side of the baby's mouth not the back. That makes it easier for the baby to swallow the medicine.

"Actually, I talk to my patients and I try to demonstrate first by actually getting a syringe and actually using the numbers and showing them. If they're here and the medicine is available, I would actually administer the medicine for them. For a newborn it's pretty much in the side of the cheek. And be sure to slowly administer the medicine."

Stick with the prescribed schedule. Don't stop the medicine just because the baby is getting better. And don't try to hide the medicine in food or milk without asking the pediatrician first.

"There are certain antibiotics that can interact with milk and they get inactivated. And then there are things like iron - things of that nature so you have to make sure you follow your doctor's recommendation."

"She sounds excellent."

The pediatrician's office is always the parent's best resource.

"If your gut feeling is that something is wrong with your baby, you should call. I would call my pediatrician first because I can get advice and triage from them and the questions and interactions would allow you to know if you should be calling 911. Now saying that there are definitely some 911 calls: your kid is blue, your child is having a seizure, your kid has fallen and is unresponsive those are automatic 911 calls."

If you're headed to the emergency room, bring any medications your child is taking and any suspected poisons or medications your baby may have taken. Babysitters and caregivers should also know where to find emergency numbers and make sure older children and babysitters know how to dial 9-1-1.

"In any emergency, you know the first thing we say you check your own pulse. That is you have to keep your brain focused and therefore you do no harm. It's very important!"

Remember the biggest threat to your child's life and health is an injury so be prepared and take injury prevention information seriously. It's a tremendous responsibility caring for a newborn, but it can also be enormously rewarding.

"It's so scary and overwhelming at first but I swear it gets easier. People told me that and I didn't believe them, it really does. Just get through it. You'll learn everything and pick it up really fast and before you know it you'll have a routine going and feel like you've had your baby your whole life. Just enjoy it don't worry."