SAFETY TIPS FOR New Babies

A Program to Help Keep Children Safe and Injury-Free.

Sponsored & Made Possible By:

Overwaitea Foods
Partnering with B.C.'s Children's Hospital since 1988
SAFETY TIPS FOR
New Babies
birth to 6 months

Babies learn new skills quickly. If you know what your baby can do at each stage of development, you can help keep your baby safe.

During the first months of life, most babies learn to:

• wriggle and roll over
• kick and push
• put things in their mouths

New babies need special protection from:

• falling off a bed, sofa, crib, or change table
• choking on small objects
• scalds
• drowning
• injuries from riding in the car

Falls

• Keep one hand on your baby during diaper changes. This will keep him or her from rolling off the bed or change table. Keep diapers and clothing within easy reach of the changing area.
• Make sure the sides of the crib or playpen are up securely.
• Baby walkers with wheels are dangerous. Do not use them.
• Use the safety strap in the high chair to keep your child from falling out.

Burns and Scalds

• It is not a good idea to use a microwave to heat a baby bottle or baby food. Food or drinks may feel fine on the outside but they will be very hot on the inside. Always shake the bottle or stir the food before you give it to your baby. Check the temperature first.
• Bottles with plastic liners can explode. Do not heat them in a microwave.
• Hot bath water can burn your baby. Always test the temperature with your hand before you put the baby in the bath. It should feel warm, not hot. Run cold water first, then hot, until you get the right temperature. Run cold water at the end to cool off the faucet.
• Lower the temperature of the hot water in your home to 49 degrees Celsius (120 degrees Fahrenheit). Hot tap water can burn your baby. To learn how to lower your water temperature, call 1-888-SAFETIPS or visit www.safekidscanada.ca
• Do not hold your baby while you are eating or drinking anything hot. Use a cup with a lid for your hot drinks.
Poisoning

- Keep poisons out of your baby's reach. This includes medicine, cleaning products, cigarettes, and alcohol.
- If your doctor has said to give medicine to your baby, check the label and measure the medicine every time you give it to your baby.

Choking and Suffocation

- Put your baby to sleep on his or her back.
- Do not use a pillow for your baby. It could smother him or her.
- Keep small objects such as coins or buttons out of your baby's reach. Teach older children to keep small toys away from babies.
- Avoid ties or ribbons on baby clothes or toys. Never leave your baby alone with a bib tied around his or her neck.
- When your baby begins to eat solid foods, make sure you give only very small pieces. Grate, blend, mash, or chop the food into very small pieces before you give it to your baby.
- Check pacifiers regularly. Make sure the nipple part is firmly attached to the handle. If it is not, the soft part could come off, causing your baby to choke. Throw out the pacifier when the nipple part has cracks or when it becomes sticky.
- Do not attach strings or cords to a pacifier.

Be ready for an Emergency

- Keep emergency numbers near your telephone (fire department, poison control, ambulance).
Safety Check

- Install smoke alarms (test them every month) and a fire extinguisher.
- Do not hold your baby while you are eating or drinking anything hot.
- Make sure baby equipment like cribs, strollers, toys, car seats, and high chairs meet Canadian safety standards. Check the labels for safety information. Make sure second-hand products meet safety standards, too. Don't buy unsafe items, like baby walkers at garage sales.

Car Seat Safety

- Your baby needs a car seat every time you ride in the car. Never hold your baby on your lap.
- Never place your baby’s car seat in the front seat if it has an airbag. That is very dangerous.
- Read your car seat instructions carefully. They show you how to use the car seat the right way.
Did you know?

...that most injuries to children under 5 happen in the home?

Test your Child Safety IQ

Which of the following plants is poisonous?
- a) boston fern
- b) spider plant
- c) dieffenbachia

In Canada, which of the following causes the most hospitalizations of children under five years of age?
- a) falls
- b) poisonings
- c) burns

Which of these is responsible for the most poisoning deaths among young children?
- a) medication
- b) cleaners
- c) plants

Answers: 1 c, 2 a, 3 a

For all your childproofing needs and expert advice, visit the Safety Station, a program of Safe Start.

www.bcchildrens.ca/safetystation

Home Safety Checklist

is the injury prevention program of BC Children’s Hospital
604-875-3273
1-888-331-8100
www.bcchildrens.ca/safestart

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Kitchen
- Chairs and step-stools are well away from the counters, sink, microwave and stove.
- Knives, scissors and other sharp utensils are in a locked drawer.
- The stove’s back burners are used when cooking and hot food and drinks are kept away from edges of tables and counters.
- Appliance cords are out of reach.
- Plastic bags and food items small enough to cause choking are kept away from babies and toddlers.
- Household cleaners, medications, vitamins and other poisons are locked up.
- A fire extinguisher is conveniently located.

Child’s Room
- The crib is in good condition, made after 1986 and has been checked for recalls.
- Beds and cribs are placed well away from the window.
- Mattresses fit snugly without gaps to prevent a small head from getting caught.
- Dresser is anchored securely.
- Diaper changing products (pins, powders, wipes, oil, etc.) are stored away from babies or small children.
- Blind and drapery cords are tied up high.
- The toy chest has ventilation holes and a lid that can be opened from the inside.
- Night lights are not toy-like and are placed in high sockets and away from bedding, draperies or hanging materials.
- No bumper pads, pillows, quilts, duvets or toys in your child’s crib.

Bathroom
- Medicines, cosmetics and cleaners are stored in a locked medicine cabinet or well out of a child’s reach.
- Electrical outlets are grounded and have full panel protective plug covers.
- Hair dryers, curling irons and other electrical appliances are unplugged and out of a child’s reach.
- Non-slip mat or decals are placed in tub.
- A bath ring or bath seat is not used.
- The hot water tank is turned down to 49°C or 120°F

Living Room
- TV sets and other heavy furniture are anchored securely.
- Sharp corners and edges on tables have been covered with soft cushioning.
- Fireplaces and wood stoves have fixed safety guards around them.
- Matches and fire starters are out of reach of children.

Around the Home
- Smoke alarms are installed in bedrooms and hallways on each level and batteries are checked regularly.
- Electrical cords are secured out of reach.
- Child’s surroundings have been cleared of small objects that could cause choking.
- Top of stairs are protected with a gate that hardware-mounts to the wall.
- Door knob covers are placed on doorknobs to deter a child from opening doors to unsafe areas.
- Your child knows how to call for help in an emergency.
- Your child knows his or her full name, address and telephone number, as well as your name.
- Ponds and swimming pools are completely surrounded by fences and a locking safety gate (between the house and pool).

For more information please call Safe Start at 604-875-3273 or 1-888-331-8100 or visit www.bcchildrens.ca/safestart
Safe Sleeping for Babies

In the early weeks of life, babies sleep for about 16 hours a day. Planning where your baby can sleep safely is important.

Creating a safe sleeping environment for your baby will reduce the risk of injuries and Sudden Infant Death Syndrome (SIDS). For more information, see HealthLink BC File #46 Sudden Infant Death Syndrome (SIDS).

Share this information with anyone who may take care of your baby; it is important for all parents, babysitters, and caregivers to be informed about safe sleeping practices for babies. For safe sleeping resource for parents and caregivers see Every Sleep Counts! at http://www.health.gov.bc.ca/library/publications/year/2011/Every_sleep_counts_poster.pdf.

What can I do to keep my baby safe during sleep?

Put your baby to sleep on his or her back on the firm and flat surface of a safety-approved crib.

Babies should always be placed on their backs to sleep. Healthy babies and newborns do not choke or have any problems from sleeping on their backs.

When your baby can roll over on his own from his back to stomach, usually at 5-7 months of age, there is no need to continue to place him on his back if he turns over in his sleep.

Dress your baby in a sleeper and light blanket for sleep and keep the room cool. Never cover your baby’s face or head with blankets.

Do not use items that prop the baby in one position during sleep. If your baby has a health condition that requires a different position for sleep, discuss safe options to meet your baby’s needs with your doctor.

Put the crib together using the manufacturer’s instructions, and do not change the crib in any way.

To prevent a baby from being trapped or smothered, check and be sure:

- The crib mattress fits the frame. There should be no gaps bigger than 3 cm between the mattress and frame when the mattress pushes into the corners of the crib.
- The crib bars are less than 6 cm apart.
- There are no knobs or items on a crib that could catch a baby’s clothing. If a baby tries to climb out of a crib and catches his or her clothing, the baby could strangle.

Do not place items in or around your baby’s crib.

- Keep stuffed toys and pillows out of the crib.

Never let a baby sleep on a soft mattress or surface, couch, air mattress, pillow, duvet or quilt, or waterbed.

Do not leave your baby sleeping in a car seat, stroller, baby swing, or bouncer seat if you are not staying near and watching your baby. These are not safe sleeping places.

Put your baby to sleep in a safety-approved crib.

Babies should always sleep in a crib made after 1986 that meets the federal government’s Cribs, Cradles and Bassinets Regulations. Visit the Baby’s Best Chance website for regulations at www.bestchance.gov.bc.ca/pregnancy/preparing-for-babys-arrival/baby-safety/index.html.

When a baby is awake, some ‘tummy time’ lying on his or her stomach is needed for healthy development. This also prevents temporary flat spots that may develop on the back of a baby’s head.
• Do not use crib bumper pads or lambskin.
• Be sure there are no straps, cords or window blinds near the baby’s crib.

**It is best to not share a bed with your baby.**
The safest place for your baby to sleep is on his/her back, in a safety approved crib beside your bed. Babies should always sleep in a crib until there is a possibility that the child could climb out on their own.

Bed-sharing is a common practice for many families, and many people around the world believe that it is natural to sleep with young infants. However, babies who share a bed with adults, other children or pets are at risk of being smothered.

Bed-sharing is especially unsafe if the parent is very tired, or under the effects of medications or alcohol, or overweight. The risk of injuries or SIDS is greater for the baby when sharing a bed with a person who may smoke, drink alcohol, or use drugs, which can make them less responsive. Injuries from bed-sharing are preventable.

**Share a room with your baby**
Sharing a room helps protect your baby against SIDS. Babies who share a room with parents and sleep in their own cribs are safer than when they share a bed.

You can help protect your baby by sharing a room or sleeping close to your baby, within arm’s reach but not on the same bed or sleeping surface. For example, your baby’s crib can be placed beside your bed.

**Breastfeed your baby**
Breastfeed your baby, as this protects against SIDS. If you bring your baby into bed to breastfeed, it is best to place your baby back in his/her crib after breast feeding.

**Do not smoke around your baby.**
Smoking or exposure to second-hand smoke increases the risk of SIDS. You should not share a bed with your baby if your baby is exposed to second-hand smoke.

**Do not use alcohol or drugs**
The use of certain drugs or substances during and after pregnancy is strongly discouraged. This includes alcohol, marijuana, crack, cocaine, heroin, and others. Evidence suggests that the use of these substances may increase the risk of SIDS.

If you or your partner needs support to stop using alcohol or drugs, call your local public health unit to find out about services in your area. You can also call the Alcohol and Drug Information and Referral Service: in Greater Vancouver call 604-660-9383, and in B.C. call toll-free 1-800-663-1441.

For more information, speak with your public health nurse or doctor. You can also ask for a copy of Baby's Best Chance or visit the website at [www.health.gov.bc.ca/library/publications/year/2010/bbc.pdf](http://www.health.gov.bc.ca/library/publications/year/2010/bbc.pdf).

Speak with your doctor or public health nurse if you or your partner need help to quit smoking. You can also call the QuitNow helpline toll-free in B.C. by dialing 8-1-1 or visit [www.quitnow.ca](http://www.quitnow.ca).


Click on [www.HealthLinkBC.ca](http://www.HealthLinkBC.ca) or call 8-1-1 for non-emergency health information and services in B.C.

For deaf and hearing-impaired assistance, call 7-1-1 in B.C.

Translation services are available in more than 130 languages on request.
NEVER shake a baby

Because babies have weak neck muscles and heavy heads, even a few seconds of strong shaking can cause serious damage to babies and small children.

Shaking a baby in a moment of frustration can cause blindness, brain damage or death.

Although it won’t usually hurt to play with an infant, parents and caregivers should always think about how easily an infant’s brain can be hurt. Always support an infant’s head and neck. Even small harm to a baby’s brain can cause lifelong problems.

It’s okay to ask for HELP

Who can help?

- family
- friends
- family doctor
- parent groups
- public health nurse
- midwife

Call your local health unit for resources in your community.

Bella Bella (250) 957-2308
Bella Coola (250) 799-5722
Gibsons (604) 886-5600
Pemberton (604) 894-6939
Powell River (604) 485-3310
Sechelt (604) 885-5164
Squamish (604) 892-2293
Whistler (604) 932-3202

Information for this brochure was provided by the Saskatchewan Institute on Prevention of Handicaps.

For more copies, go online at http://vch.eduhealth.ca or email phem@vch.ca and quote Catalogue No. GK.500.C889

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Sea to Sky, Sunshine Coast, Powell River,
Why do babies cry?

Sometimes it is easy to figure out why a baby is crying. Sometimes it is not. Crying is normal and some babies cry more than others. Babies cry because they are hungry, need a diaper change or want to be comforted. Sometimes babies cry because they just need to release some energy of their own.

Crying is an irritating sound. It is supposed to be. If it was a pleasant sound, crying would be easy to ignore and the baby’s needs would not be met.

Crying may mean that your baby is not feeling well. If you are worried, take the baby to a doctor.

Crying does not mean your baby is being bad or that the baby is angry with you.

If the crying is for a long time or louder than usual, or the baby has a fever or is vomiting, go to the hospital or health clinic.

What can you do when your baby won’t stop crying?

There is no magic answer that works all of the time with every baby. You may have to try several things before you find out what works best for you and your baby.

Snuggle the baby close to your chest
➢ your heartbeat may comfort the baby

Check the baby’s diaper
➢ keep the baby clean and dry

Feed the baby slowly and burp the baby often
➢ gas in the baby’s tummy can be painful. For feeding concerns consult with a public health nurse.

Wrap the baby in a soft blanket
➢ keep the baby warm and comfortable but not too hot

Provide some soft music or other relaxing sounds
➢ you can try humming or singing a lullaby
➢ the sound of the vacuum cleaner, clothes dryer or dishwasher sometimes calms a baby
➢ offer a favourite blanket or soft toy while cuddling the baby

Provide gentle motion
➢ walk with or rock the baby
➢ use a baby swing if you have one
➢ take the baby for a walk in a stroller
➢ some babies like to go for a car ride (be sure the baby is safely secured in an infant car seat)

Let the baby “cry it out”
➢ before your emotions get out of control, gently place the baby in a safe place and leave the room
➢ take a 15 minute break to give yourself a chance to calm down
➢ letting the baby cry for a few minutes is not harmful

Find someone to help you
➢ call a friend or relative you can trust
➢ it is important to get away from the baby if you think you might lose control
➢ it is just as important to be sure the baby will be safe while you are gone

YOU ARE NOT ALONE!

Many caregivers and parents become frustrated and angry when caring for a crying baby.

Remember, it is more important to stay calm than to stop the crying.
A Simple Blood Test Could Save Your Baby’s Life

Why is my baby screened?
A small spot of your baby's blood can be used to get important information about his or her health. A newborn baby can look healthy but have a rare and serious disorder that you and your doctor or midwife may not know about. Newborn screening finds babies who may have one of a number of these rare disorders. When these disorders are found and treated early, the chances of serious health problems are prevented or reduced later in life. If not treated, these disorders can cause severe mental handicap, growth problems, health problems and sudden infant death.

In British Columbia there are about 40 babies born each year (1 out of every 1,000) who are found to have one of these rare disorders.

How is my baby screened?
Your baby's heel is pricked and a few drops of blood are taken and put onto a special card. Your baby may cry, but taking the blood sample does not harm your baby. You can help your baby by holding and breastfeeding her or him while the blood is being taken. The blood sample is sent to the laboratory at BC Children's Hospital for testing. The same blood sample is used to screen for all disorders.

How soon after birth will my baby be screened?
The blood sample is usually taken between 24 and 48 hours after birth. This will be done before your baby leaves the hospital or, if a home birth, by your midwife at home.

What if my baby goes home before 24 hours old?
A blood sample will be taken in the hospital before leaving. Over 80% of disorders can be screened using this blood sample. You will be given instructions on how to have the sample repeated within 2 weeks. The purpose of the second sample is to double check the few disorders that can be missed on the first (early) screen.

Can I wait and have my baby tested later?
The earlier these treatable disorders are found, the better the outcome for babies with these disorders. It is strongly advised that your baby not leave the hospital without a blood sample being taken. If you decide you do not want your baby to have a blood sample taken before he or she leaves the hospital, you will be asked to sign a form to show you understand the reasons for the test and the possible outcome for your baby if your baby is not tested and has one of these disorders.

If your baby is under the care of a Registered Midwife, the midwife may review options with you to have the blood sample drawn at home.

How do I find out the results of the screening?
Your baby's screening results are reported to the hospital where your baby was born and your baby's doctor or midwife.

What does it mean if the screen is negative?
A negative screen means that the chance that your baby has one of these disorders is very low. Very rarely, the test may miss a baby with one of these disorders.

What does it mean if the screen is positive and what happens next?
A positive screen tells that there might be a problem. It does not mean that your baby has one of these disorders, but it is possible. More tests are needed.
Will screening for these disorders find anything else?
Screening for sickle cell disease and cystic fibrosis may also tell if your baby is a carrier for one of these disorders. Babies who are carriers are healthy and no more likely to get sick than any other baby. If your baby is a carrier, you will be provided with more information to find out what this means for your baby, yourself and your family.

What if the results show that my baby has one of the disorders after all the tests are done?
Your baby will need treatment from a doctor who specializes in the disorder. You will be referred to a specialist right away. Treatment can start in a few days.

What happens to my baby’s blood spot card when the testing is complete?
Your baby’s card with the leftover blood will be kept for 10 years in secure storage by the BC Newborn Screening Program. Occasionally, the dried blood spot samples may be used for other purposes after the testing is finished. These include (1) re-running a test if the first test result was not clear; (2) trying to find the reason for a health problem that has developed later in a child’s life or trying to find the cause of an unexplained illness or death of a child; (3) checking the quality of testing done by the laboratory to make sure that results are accurate; and (4) developing better tests for screening of disorders. Samples may also be used for health research if the research has been approved by a Clinical Research Ethics Board. In these cases, all information that may identify the baby is removed.

If you do not wish your baby’s stored blood spot card to be used for these purposes, you may fill out a form called a Directive to Destroy Leftover Newborn Screening Blood Samples and send to the BC Newborn Screening Program. See website for details.

If you need more information:
Talk to your doctor or midwife. Visit the Newborn Screening website at www.newbornscreeningbc.ca

We are committed to protecting the privacy of personal information:
The BC Newborn Screening Program collects, uses and discloses personal information only as authorized under section 26 (c) of the BC Freedom of Information and Protection of Privacy Act and other legislation. We take all reasonable steps to make sure that personal information is treated confidentially, is only used for the intended purpose and is securely stored. Should you have any questions regarding the collection, use or disclosure of your baby’s personal information, please contact the BC Newborn Screening Program at (604) 875-2148.