



# Normal Newborn Behaviour

Newborns look and act differently than older babies and children, as they are adjusting to life outside the womb. This handout is to help you figure out what is normal and what to do if signs arise that may indicate illness.

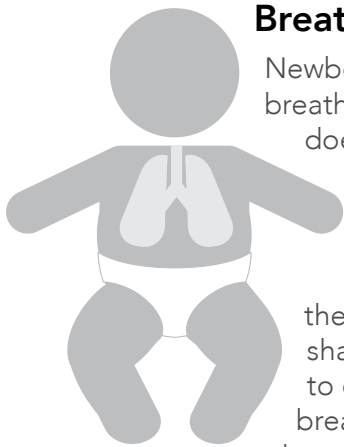
| What to expect in the first few days |   |
|--------------------------------------|---|
| <b>Breathing</b>                     | <ul style="list-style-type: none"><li>Your baby may breathe in clusters—there may be times when your baby's breathing seems shallow and rapid. At other times your baby's breathing may seem deep or slow.</li><li>Your baby's breathing may be irregular.</li></ul>  |
| <b>Colour</b>                        | Your baby may get: <ul style="list-style-type: none"><li>blue/purple feet and hands in the first 24 hours.</li><li>blotchy and red when cold or crying.</li><li>mild jaundice (yellow face) after 24 hours.</li></ul>   |
| <b>Temperature</b>                   | Normal temperature range: Armpit 36.5°C to 37.5°C (97.7°F to 99.5°F)  |
| <b>Feeding</b>                       | <ul style="list-style-type: none"><li>After the first 24 hours, your baby should eat every two to four hours, eight to 12 times per day.</li><li>Your baby will usually feed for a minimum of 20 minutes, though longer is very common. A satisfied baby will detach from the nipple after finishing a feed.</li><li>Your baby may cluster feed (feed many times in a row) and then have a longer stretch without feeding.</li></ul>  |
| <b>Diapers</b>                       | <ul style="list-style-type: none"><li>Day 1 = 1 wet diaper</li><li>Day 2 = 2 wet diapers</li><li>Day 3 = 3 wet diapers</li><li>Your baby's stool will appear black-greenish (meconium) for the first couple of days, until your colostrum (thick, sticky and yellowish first milk) transitions to mature milk.</li><li>Once mature milk comes in (between third and fifth day), expect six to eight wet diapers a day and two or more stools that are liquid yellow, green or brown. Stools that look 'seedy' are normal.</li></ul> |

It is important to watch your newborn for any unusual behaviour during the first hours and days of his or her life. In very rare circumstances, babies can develop an infection from bacteria such as Group B Streptococcus (also called GBS), which can cause serious illness. The signs of illness from GBS are most likely to occur within the first 24 hours, but sometimes occur later. It is important for all parents to know what is within the range of normal newborn behavior and when you should contact your midwife or 911.

This document provides client-friendly information based on the Association of Ontario Midwives' *Clinical Practice Guideline No. 16: Group B Streptococcus: Postpartum Management of the Neonate*. It is designed to help you better understand some of the considerations and choices you may face while receiving care from your midwife. It is not intended to replace the informed choice discussions that you and your midwife will have. If you have any questions, concerns or ideas after reading over this document, please share them with your midwife.

## Behaviour

Your baby will spend his or her early days and weeks in different states: deep sleep, light sleep, drowsy, quiet alert, active alert, crying. While newborns sleep about 16 hours out of every day, their sleep patterns are unpredictable; they may sleep for a few minutes or a few hours at a time. Babies should always be put to sleep on their backs. Because your baby's stomach is so tiny at this age, he or she needs to wake to feed often. In the first days and weeks, your baby should sleep for stretches no longer than four to six hours in a 24-hour period without waking to feed. If your baby is sleeping for a long period, wake your baby up and try to feed him or her. Some babies are difficult to wake; if they don't wake up with your first attempt, try again in half an hour. An effective way to wake your baby is to undress him or her, change their diaper and talk to them. It is normal for it to take a while for babies to latch. Be patient! If your baby seems unusually sleepy and uninterested in feeding upon waking, try again in 30 minutes or wipe a cool cloth on their face to help wake them up.



## Breathing

Newborns often have irregular breathing patterns. Their breathing does not look or sound like an adult's. At times, newborn babies will breathe progressively faster and deeper, and at other times their breathing is more slow and shallow. It is normal for babies to occasionally pause their breathing for 10 seconds and then start up with a deep breath.

It is not normal for a baby to gasp for breaths or pant (quickly breathe) for 10 minutes or more. Babies make lots of different strange sounds and faces, and it can be difficult to know what is charming and normal and what should be concerning. It is normal for newborns to sound like a cat coughing up a hairball as they try to bring up mucous; they may also have bubbles at their mouths.

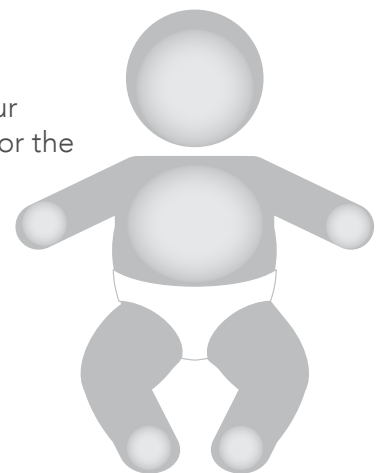
**Contact your midwife if you notice any of these signs that your baby is having difficulty breathing:**

- **Your baby's nostrils widen as he or she breathes (nasal flaring) for longer than a few minutes.**
- **Your baby makes grunting sounds with each breath; this lasts longer than a few minutes.**
- **The skin around your baby's ribs or at the base of the throat pulls in sharply with each breath.**
- **Your baby's breathing stops for more than 10 seconds.**

## Colour

A pink chest and face shows that your baby is getting enough oxygen. Your baby's hands and feet may be blue, purple or grey and cool to the touch for the first few days – this is normal. Your baby's skin may get blotchy and red after crying or when cold.

**If the skin on your baby's face or chest becomes blue or grey please call 911 and contact your midwife immediately.**





**Normal  
temperature  
in °C**

## Temperature

A newborn should be dressed in one layer more than you are comfortable wearing. Placing your baby skin-to-skin (holding your bare baby against your bare chest or stomach), covered by a light blanket, will help them to regulate their temperature. If you want to know if your baby is too hot or too cold, feeling their chest or the back of their neck will give you a more accurate idea of their temperature than their hands or feet. It is normal for a baby's hands and feet to be cool for the first few days. The best way to take your baby's temperature is under the armpit (this is also known as an axillary temperature). Ear thermometers are not accurate for newborns and are not recommended. Normal armpit temperature is 36.5°C to 37.5°C (97.7°F to 99.5°F).

- If your baby's temperature is over 38.0°C (100.4°F), please contact your midwife.
- If your baby's temperature is over 37.5°C (99.5°F), remove a layer of clothing and take his or her temperature again after 30 minutes have passed.
- If your baby's temperature is over 37.5°C (99.5°F), and you have taken the above actions, please contact your midwife.
- If your baby seems cold or his or her temperature is less than 36.5°C (97.7°F), place your baby skin-to-skin and cover you and your baby with a blanket. Take his or her temperature again after 30 minutes have passed.

## Feeding

If you are nursing, putting your baby to the nipple often gives your baby valuable nutrient-rich colostrum (thick, sticky and yellowish first milk), helps establish your milk supply, and helps both you and your baby learn how chest or breastfeeding works. Your baby will need to eat at least every two to four hours (sometimes much more often), usually for a minimum of 20 minutes at a time. It can sometimes take time for you and your baby to learn how to nurse. Spending time together skin-to-skin will help encourage your baby to latch and feed. Your baby may spit up after eating, usually small amounts of milk come out and dribble down his or her chin.



A good online resource is: <https://globalhealthmedia.org/videos/attaching-your-baby-at-the-breast/>

## Diapers

Your midwife may ask you to keep track of the number of wet and soiled diapers your baby produces. A disposable diaper feels heavier if it's wet. Many diaper brands today have a urine indicator that turns blue in the presence of a certain amount of urine. Not all diapers do, and some pees in the first few days may be too small to make this happen. If you have trouble telling when the diaper is wet, put a tissue in the bottom of the clean diaper. Sometimes babies will have what looks like "brick dust" in their diapers in the first few days, a pinkish or orange coloured spot. These are called urate crystals, and they are normal. A baby girl may have a small amount of bloody discharge from her vagina, this is a response to mother's hormones and it is normal.

## Muscle Tone

A newborn needs to be supported when held, but newborn babies should not feel completely limp in your arms. A newborn should display strong, well-flexed movements of his or her arms and legs.

## Umbilical Cord

As your baby's cord begins to fall off (anytime in the first 14 days) it may begin to look "goopy" and a small amount of blood or discharge may come off on your baby's diaper or clothing. Your baby's cord may also have a strong smell; this is normal. It is not normal for the skin around the base of the umbilical cord (on your baby's stomach) to become red and infected-looking. If it does, contact your midwife.

### **Contact your midwife if:**

- Your baby is not feeding and seems lethargic (having trouble waking up) and you can't wake your baby to feed. One long sleep (4-6 hours) in every 24 hour period is ok.
- Your baby's armpit temperature is above 37.5°C (99.5°F) or below 36.5°C (97.7°F) and your baby is not wearing too much or too little clothing.
- Your baby breathes rapidly (more than 60 breaths every minute) for longer than 10 minutes (and your baby is not crying, being active or overdressed).
- Your baby has difficulty breathing, which may look like this:
  - » nasal flaring and grunting that lasts longer than a few minutes;
  - » your baby's skin seems to be pulling in sharply around the ribs or base of the throat when he or she breathes.
- Your baby is very irritable.
- Your baby is crying almost all the time and the crying is high-pitched.
- Your baby is limp and not interacting when awake.
- Your baby has repeated, projectile vomiting (more forceful than spitting up).
- You see a brick dust colour in your baby's diaper beyond the third day of life.
- Your baby has not had a wet diaper in a 24 hour period.
- You are worried about your baby for any other reason.

### **Call 911 and your midwife if:**

- Your baby's skin colour changes to blue, grey or pale (blue hands and/or feet are normal in the initial days).
- Your baby's breathing stops for more than 10 seconds.

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