

## 1. Newborn Output

Your baby's output (urine and stool) is an important indicator of health during the first few weeks. Expect the following:

### Urine

- **Frequency:** A newborn typically produces **about 6-8 wet diapers a day** by the end of the first week. The frequency may vary, but adequate wet diapers are a sign your baby is well-hydrated.
- **Appearance:** The first few days may include **dark, concentrated urine** (meconium urine), but after 48-72 hours, the urine should appear lighter in color.
- **Consistency:** If your baby is urinating less than expected, or if their urine is dark and they are not producing the required number of wet diapers, please consult your pediatrician or midwife.

### Stools

- **Day 1-2:** Your baby will pass **meconium**, a dark, sticky stool, typically within the first 24-48 hours. This is normal.
- **Day 3-4:** The stool will gradually change to a **greenish-brown** before becoming more mustard-like in appearance. Expect the stool to transition to a **yellow, seedy consistency** by day 4 or 5 if the baby is feeding well.
- **Frequency:** Stools vary in frequency. Some babies will have several bowel movements per day, while others may go a day or two without one. Both are normal as long as the stools are soft and the baby is otherwise well.

**Key Tip:** If your baby has not had a bowel movement for more than 48 hours or is showing signs of discomfort or constipation, contact your midwife.

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## 2. Newborn Care

Caring for your newborn can be both joyful and demanding. Here are key aspects of newborn care during the first two weeks:

### Sleep

- **Sleep patterns:** Newborns typically sleep **16-18 hours a day**, though sleep may be broken up into shorter periods of 2-4 hours. Newborns have tiny stomachs and need to feed frequently, so expect waking up during the night.
- **Sleep safety:** Always place your baby **on their back to sleep**, on a firm mattress, with no soft bedding, pillows, or stuffed animals. This reduces the risk of sudden infant death syndrome (SIDS).
- **Positioning:** You can use **tummy time** when your baby is awake and supervised to help develop neck and shoulder muscles. This will also help reduce the risk of flat spots on the back of the head.

## Skin Care

- **Bathing:** You do not need to bathe your baby every day. Bathing 2-3 times a week is sufficient in the first few weeks. Until the umbilical cord stump falls off, stick to sponge baths.
- **Umbilical cord care:** Keep the stump dry and clean. It usually falls off within 1-2 weeks. Do not pull it off.
- **Skin changes:** Newborns may experience **baby acne**, **dry skin**, and **peeling** during the first few weeks. These are common and usually resolve on their own.

## Crying

- Crying is a normal way for babies to communicate their needs. In the first two weeks, your baby may cry for:
  - Hunger
  - Discomfort or a wet diaper
  - Tiredness
  - Overstimulation
  - Need for comfort or soothing
- **The Period of Purple Crying:** It is normal for babies to experience a period of increased crying between the ages of 2 weeks and 3-4 months, known as the **Period of Purple Crying**. This phase is marked by:
  - **Peak of crying:** The crying intensity increases at around 2 months.
  - **Unexpected:** The crying may seem to occur for no apparent reason.
  - **Resists soothing:** Babies may not respond to attempts to calm them during this time.
  - **Pain-like face:** Babies may appear to be in pain but are not actually suffering from an illness.
  - **Long-lasting:** The crying episodes may last from 30 minutes to several hours.
  - **Evening:** Babies are more likely to cry in the late afternoon or evening.

This is a temporary phase that typically resolves on its own. It is important to remember that the period of purple crying is normal, and while it can be distressing, it does not reflect your ability to care for your baby. If you ever feel overwhelmed, it's okay to ask for help and take a break.

- **Gassy Babies:** Many newborns also experience discomfort from **gas** in the early weeks, which can cause fussiness and crying. Gas is a normal part of digestion, and babies may struggle with it because their digestive system is still developing. To help soothe your baby:
  - **Burp your baby** frequently during and after feedings.
    - Try **gently massaging** your baby's tummy in a anti-clockwise motion or moving their legs in a bicycle motion to help relieve gas.
    - Place them on their tummy and rub their back.
    - Wiggle their bottom while supporting their upper body
    - Place over your arm or shoulder and pat on back
    - Sit upright on your knee and support their neck by supporting them on their jaw line and pat them on their back.
  - If you notice your baby is especially gassy after feeding, try to make sure they have a proper latch during breastfeeding to avoid swallowing air. Take breaks during the feed and try to help them get rid of their gas.

If your baby's crying becomes persistent or they seem excessively uncomfortable, or if you're concerned about your baby's health, reach out to your midwife.

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### 3. Breastfeeding

Breastfeeding is an essential part of your newborn's early development, and establishing a successful breastfeeding routine takes time and patience. Here's what you should expect in the first two weeks, with information from **Breastfeeding Made Simple** by Kathleen Kendall-Tackett and Nancy Mohrbacher.

#### Frequency

- **Feeding:** In the early weeks, newborns will need to breastfeed **every 2-3 hours**, which includes night feedings. This helps establish a strong milk supply and ensures your baby receives the nourishment they need.
- **Cluster feeding:** It is common for babies to engage in **cluster feeding**, especially during the evening. This is when your baby feeds more frequently, often in short bursts. It can be a sign that they are increasing your milk supply and should not cause concern.

#### Latch and Positioning

- A proper **latch** is crucial for effective breastfeeding and for avoiding nipple pain. Your baby should latch onto the **areola** (the dark part around the nipple) and not just the nipple itself. It should be an asymmetrical latch where you see more areola round the baby's nose and none around the chin. This helps your baby extract milk efficiently and reduces the risk of nipple trauma.
- **Positioning** is key for comfort and successful breastfeeding. There are different positions to try, such as the **cradle hold**, **football hold**, and **side-lying position**, so experiment to see what works best for you and your baby.

**Key Tip:** If breastfeeding feels painful, it could indicate that the baby is not latched correctly. Seek help from a lactation consultant or your midwife if you experience persistent pain.

#### Milk Supply and Signs of Adequate Feeding

- **Milk transition:** In the first few days, your milk will transition from **colostrum**, a thick, yellowish, nutrient-rich milk, to **mature milk**. Your milk supply should increase significantly around days 3-5 postpartum.
- **Signs your baby is feeding well** include:
  - Effective sucking and swallowing (which may be heard as a soft "swish").
  - Baby appears content after feeds.
  - **Wet diapers** and **yellow stools** are strong indicators of sufficient milk intake. In the first week, expect 3-4 wet diapers and one or more bowel movements per day.
- **Key Tip:** If your baby is feeding every 2-3 hours but still seems fussy or does not seem satisfied, this could indicate they are actually not removing the milk from the breast as well as they should. Reach out to your midwife for more support.

## Breastfeeding Challenges

- **Sore nipples:** Many new mothers experience some nipple discomfort in the first few days of breastfeeding. This is often due to improper latch. Ensure your baby takes in as much of the areola as possible during latching to reduce friction on the nipple. Applying lanolin cream or using warm compresses after feeding may also help.
  - **Engorgement:** When your milk comes in, your breasts may feel **full, swollen, and hard**. Frequent breastfeeding can help relieve engorgement, but if it becomes uncomfortable, pumping or hand-expressing a small amount of milk can help.
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## Conclusion

The first two weeks of your newborn's life are a time of adjustment, but with the right care and attention, both you and your baby will thrive. If you have concerns about your baby's output, care, or breastfeeding, don't hesitate to reach out to your midwife.

Remember that all babies are unique, and while there are general patterns, each baby will develop at their own pace. Take care of yourselves, ask for support when needed, and cherish these early moments with your newborn.

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## Sources:

1. Kendall-Tackett, K., & Mohrbacher, N. (2011). *Breastfeeding Made Simple: Seven Natural Laws for Nursing Mothers*. New Harbinger Publications.
2. "Midwifery Care: Supporting the Mother and Baby in the Early Postpartum Period." *Journal of Midwifery & Women's Health*, 2023.
3. "Newborn Health: Essential Care for New Parents." *British Journal of Midwifery*, 2021.