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Have questions about baby sleep habits, baby care and feeding, health, development, and safety? We can help you solve breastfeeding and baby sleep problems, start solid foods, handle crying, know what your baby's ready for, track your baby's development, find great childcare and baby activities, and more.February 2024 Birth ClubI can't stand when everything you read about 37 weeks, screams that the baby isn't yet. Nothing is developed! 😫😫😫. Come. On. I have six kids and #7 on the way. All born between 36-38 weeks. Baby come, when baby comes. Stop stressing moms out stupid websites!March 2023 Birth ClubI'd like to get some new toys that would be great for my baby's development. Do your kids have a favorite toy? I notice I have my own favorite toys for my baby as well. If you guys could post some links or tell me the names of stuff that would be great. I also need to look for stuff for the next sMay 2022 Birth ClubI don't mean to make any momma feel bad but I wanna see if there are any 2 year olds that talk a lot or you can understand a lot of their words. I know babies/kids all develop at their own time. Megan Fox and MGK finally revealed their baby girl's name — and it isn't Celestial Seed, as some fans initially thought. Instead, the on-again, off-again couple's little one is Saga Blade Fox-Baker, according to MGK's Tuesday Instagram post. He shared a video of himself playing the ukulele for the little one, who was out of frame, and simply captioned the footage with her name and a flaming heart emoji. Megan Fox and MGK revealed their baby girl's name. meganfox/Instagram The actress gave birth in March. Instagram/Megan Fox MGK disabled comments on the social media upload. When the actress gave birth to her and MGK's first child together in March, her ex debuted the infant in an Instagram video. "she's finally here!!" the rocker wrote. "our little celestial seed. 3/27/25." Social media users mistakenly believed MGK had revealed the newborn's name, so he took to his Story to set the record straight. MGK called the infant their "little celestial seed" in his Instagram announcement. However, he clarified that this was not the newborn's name. machinegunkelly/Instagram The Grammy nominee clarified, "Wait guys…her name isn't 'Celestial Seed.' Her mom is gonna tell you the name when we're ready." Fox did not post about her new arrival at the time. The "New Girl" alum's daughter joined Fox's three sons she shares with ex-husband Brian Austin Green — Noah, Bodhi and Journey. MGK also has a child from a past relationship, co-parenting daughter Casie with ex Emma Cannon. "Her mom is gonna tell you the name when we're ready," the rocker told his social media followers. Getty Images for GQ He and Fox have been together on and off since 2020. meganfox/Instagram Fox announced in November 2024 that she and MGK were expecting a rainbow baby after previously suffering a miscarriage. MGK hinted at the pregnancy loss during a 2022 Billboard Music Awards performance dedicated to his "unborn child," and Fox confirmed it in "Pretty Boys Are Poisonous: Poems" the following year. Fox's book also addressed the "beautiful, broken, self-absorbed idiot" dragging her down — and while she did not name names, it was published in the wake of her and MGK sparking split rumors. They most recently called it quits in November 2024. meganfox/Instagram Fox debuted her baby bump weeks before their breakup. Instagram/@jennakristina The "Transformers" star finally made clear in 2024 that she and MGK had ended their 2022 engagement — but would "always have a tether" to each other as "twin flames." Despite seemingly reconciling, the duo called it quits again mere weeks after Fox's pregnancy announcement. Since their baby's arrival, the pair have been working to maintain a "peaceful" co-parenting dynamic, sources told Page Six in April. This story was featured on a recent episode of Page Six Radio, a daily morning show serving up the hottest celebrity headlines, exclusives, and behind-the-scenes buzz. Catch Danny, Evan and Ian chat with celebrity guests every weekday on SiriusXM from 8 a.m. to 10 a.m. ET on Stars Ch. 109. SiriusXM service required. See Offer Details. Very young offspring of humans Several terms redirect here. For other uses, see Baby (disambiguation), Infant (disambiguation), Newborn (disambiguation), and Babyhood (disambiguation). A newborn in a man's lap Part of a series onHuman growthand development Stages Gamete Zygote Embryo Fetus Infant Toddler Child Preadolescent Adolescent Emerging and early adulthood Young adult Middle adult Old adult Dying Biological milestones Fertilization Pregnancy Childbirth Walking Language acquisition Puberty Menopause Ageing Death Development and psychology Pre- and perinatal Development Infant and child Nature versus nurture Adolescent Youth Young adult Adult Maturity Developmental stage theories Attachment Ecological Psychosocial Psychosexual development Moral Cognitive Cultural-historical Evolutionary Psychology portalvte In common terminology, a baby is the very young offspring of adult human beings, while infant (from the Latin word infans, meaning 'baby' or 'child'[1]) is a formal or specialised synonym. The terms may also be used to refer to juveniles of other organisms. A newborn is, in colloquial use, a baby who is only hours, days, or weeks old; while in medical contexts, a newborn or neonate (from Latin, neonatus, newborn) is an infant in the first 28 days after birth[2] (the term applies to premature, full term, and postmature infants). Infants born prior to 37 weeks of gestation are called "premature",[3] those born between 39 and 40 weeks are "full term", those born through 41 weeks are "late term", and anything beyond 42 weeks is considered "post term".[4] Before birth, the offspring is called a fetus. The term infant is typically applied to very young children under one year of age; however, definitions may vary and may include children up to two years of age. When a human child learns to walk, they are appropriately called a toddler instead. In British English, an infant school is for children aged between four and seven. As a legal term, infancy is more like minority, and continues until a person reaches 18 years of age.[5] This section needs additional citations for verification. Please help improve this article by adding citations to reliable sources in this section. Unsourced material may be challenged and removed.Find sources: "Infant" – news · newspapers · books · scholar · JSTOR (March 2022) (Learn how and when to remove this message) A newborn's shoulders and hips are wide, the abdomen protrudes slightly, and the arms and legs are relatively long with respect to the rest of their body. Eight-month-old infant; as a common feature, eyes are usually large in relation to the face.A newborn's head is very large in proportion to the body, and the cranium is enormous relative to his or her face. While the adult human skull is about one seventh of the total body length, the newborn's is about 1⁄4. Normal head circumference for a full-term infant is 33–36 cm at birth.[6] At birth, many regions of the newborn's skull have not yet been converted to bone, leaving "soft spots" known as fontanels. The two largest are the diamond-shaped anterior fontanel, located at the top front portion of the head, and the smaller triangular-shaped posterior fontanel, which lies at the back of the head. Later in the child's life, these bones will fuse together in a natural process. A protein called noggin is responsible for the delay in an infant's skull fusion.[7] During labour and birth, the infant's skull changes shape to fit through the birth canal, sometimes causing the child to be born with a misshapen or elongated head. It will usually return to normal on its own within a few days or weeks. Special exercises sometimes advised by physicians may assist the process. Thin brown hair of a one-year-old infant girl Some newborns have a fine, downy body hair called lanugo. It may be particularly noticeable on the back, shoulders, forehead, ears and face of premature infants. Lanugo disappears within a few weeks. Infants may be born with full heads of hair; others, particularly Caucasian infants, may have very fine hair or may even be bald. Amongst fair-skinned parents, this fine hair may be blonde, even if the parents are not. An infant's hair color and texture can change: red can give way to blond, curly can go straight, and thick, dark hair could reappear a lot sparser and lighter.[citation needed] The scalp may also be temporarily bruised or swollen, especially in hairless newborns, and the area around the eyes may be puffy. In developed countries, the average total body length of a newborn is 35.6–50.8 cm (14.0–20.0 in), although premature newborns may be much smaller. The way to measure a baby's length is to lay the baby down and stretch a measuring tape from the top of the head to the bottom of the heel. In developed countries, the average birth weight of a full-term newborn is approximately 3.4 kg (7+1⁄2 lb), and is typically in the range of 2.7–4.6 kg (6.0–10.1 lb). Over the first 5–7 days following birth, the body weight of a term neonate decreases by 3–7%,[8][failed verification] and is largely a result of the resorption and urination of the fluid that initially fills the lungs, in addition to a delay of often a few days before breastfeeding becomes effective. After the first week, healthy term neonates should gain 10–20 grams/kg/day.[8][failed verification] A newborn infant, seconds after delivery. Amniotic fluid glistens on her skin, and the umbilical cord is still attached. Immediately after birth, a newborn's skin is often grayish to dusky blue in color. As soon as the newborn begins to breathe, usually within a minute or two, the skin's color reaches its normal tone. Newborns are wet, covered in streaks of blood, and coated with a white substance known as vernix caseosa, which is hypothesised to act as an antibacterial barrier. The newborn may also have Mongolian spots, various other birthmarks, or peeling skin, particularly on the wrists, hands, ankles, and feet. Main article: Adaptation to extrauterine life The umbilical cord of a newborn is bluish-white in color. After birth, the umbilical cord is normally cut, leaving a 1–2 inch stub. The umbilical stub will dry out, shrivel, darken, and spontaneously fall off within about 3 weeks. This will later become a belly-button after it heals. The umbilical cord contains three vessels: two arteries and one vein. The two arteries carry blood from the baby to the placenta while one vein carries blood back to the baby. A newborn's genitals are enlarged and reddened, with male infants having an unusually large scrotum. The breasts may also be enlarged, even in male infants. This is caused by naturally occurring maternal hormones and is a temporary condition. Females (and even males) may actually discharge milk from their nipples (sometimes called witch's milk), or a bloody or milky-like substance from the vagina. In either case, this is considered normal and will disappear with time. Further information: Newborn care and safety Further information: Infant bathing Crying baby Infants cry as a form of basic instinctive communication.[9] A crying infant may be trying to express a variety of feelings including hunger, discomfort, overstimulation, boredom, wanting something, or loneliness. Infants are altricial and are fully dependent on their mothers or an adult caretaker for an extended period of time.[10] Breastfeeding is the recommended method of feeding by all major infant health organizations.[11] If breastfeeding is not possible or desired, bottle feeding is done with expressed breast-milk or with infant formula. Infants are born with a sucking reflex allowing them to extract the milk from the nipples of the breasts or the nipple of the baby bottle, as well as an instinctive behavior known as rooting with which they seek out the nipple. Sometimes a wet nurse is hired to feed the infant, although this is rare, especially in developed countries. Adequate food consumption at an early age is vital for an infant's development. The foundations of optimum health, growth, and neurodevelopment across the lifespan are established in the first 1,000 days of life.[12] From birth to six months, infants should consume only breast milk or an unmodified milk substitute. As an infant's diet matures, finger foods may be introduced as well as fruit, vegetables and small amounts of meat.[13] As infants grow, food supplements can be added. Many parents choose commercial, ready-made baby foods to supplement breast milk or formula for the child, while others adapt their usual meals for the dietary needs of their child. Whole cow's milk can be used at one year, but lower-fat milk is not recommended until the child is two to three years old. Weaning is the process through which breast milk is eliminated from the infant's diet through the introduction of solid foods in exchange for milk.[14] Until they are toilet-trained, infants in industrialized countries wear diapers. The transition from diapers to training pants is an important transition in the development of an infant to that of a toddler. Children need more sleep than adults—up to 18 hours for newborn babies, with a declining rate as the child ages. Until babies learn to walk, they are carried in the arms, held in slings or baby carriers, or transported in baby carriages or strollers. Most industrialized countries have laws requiring child safety seats for babies in motor vehicles. Baby colic Bassinet/crib Cradle cap Day care Diaper rash Infant massage Immunization Pacifier Paternal bond Swaddling Teething A baby being hugged by a soldier Experiments have been done with infants up to four months of age using both positive touch (stroking or cuddling) and negative touch (poking, pinching, or tickling). The infants who received the positive touch cried less often and vocalized and smiled more than the infants who were touched negatively. Infants who were the recipients of negative touch have also been linked with emotional and behavioral problems later in life. A lower amount of physical violence in adults has been discovered in cultures with greater levels of positive physical touching.[15] An infant holding a space-themed baby book Caregivers of an infant are advised to pick up on the infant's facial expressions and mirror them. Reproducing and empathizing with their facial expressions enables infants to experience effectiveness and to recognize their own actions more easily (see mirror neurons). Exaggeratedly reproduced facial expressions and gestures are recommended, as they are clearer forms of expression. The baby's babbling should also be picked up and repeated. By imitating each other's sounds the first simple dialogues are initiated.[16] Accentuated pronunciation and melodic intonation make it easier to recognize individual words in a sentence.[17] However, it is not advisable to use simplified "baby talk" (e.g. "Did you 'ouch'?" instead of, "Did you hurt yourself?").[18] Even if parents cannot yet understand infants' babbling, a timely response by parents to babbling leads to faster language acquisition.[19] This was confirmed by researchers who first studied mothers' behavior towards 8-month-old infants and later tested the infants' vocabulary when they were 15 months old.[20] A first important development of infants is the discovery that they can influence their parents through babbling (development of intentional communication).[20] Parents can encourage this by engaging with their infants in babbling. This in turn promotes further language development, as infants then turn to their parents more often.[19] Previous studies have shown that the infant's speech is encouraged when parents, for example, smile in the infant's direction or touch the infant every time the infant looks at them and babbles. It also helps if parents respond to what they think their baby is saying (for example, giving a ball or commenting when the baby looks at the ball and babbles).[19] Responding to sounds produced when the baby looks at an object (object-directed vocalizations) thus provide an opportunity to learn the name of the object. In this way, babies also learn that sounds are associated with objects.[20] However, language development is only achieved if parents react positively (e.g. smile) in response to the infant's babbling. A high response rate without a connection to the infant's utterances does not lead to language promotion.[20] It is detrimental to language development if a mother instead tries to divert the infant's attention to something else.[21] Main article: Infant sleep A sleeping infant A 2018 review analysed 146 studies on infant sleep behavior and listed several factors that show an effect on sleep duration and the number of night awakenings.[22] However, research has indicated that frequent wakings are protective of SIDS.[23] Infant sleep is not linear, ebbing and flowing with developmental milestones and age.[24] The National Sleep Foundation gives a rough recommendation on sleep hours, that commonly decreases with increasing age.[25] Maternal sensitivity plays a particular role in the relationship with the infant and for favorable emotional development. This means being attentive to the infant's behavioral expressions, not misinterpreting the infant's expressions because of one's own moods, reacting immediately to the situation and finding a response that is appropriate to the context and the expressed needs. A secure attachment is promoted through empathetic and adequate as well as prompt responses.[26][27][16] In accordance with their basic needs, infants show an inborn behavior of seeking closeness to the mother – or to another primary caregiver – and thus in turn foster an attachment. When separated from the mother, infants protest by crying and by body movements. An infant from Uganda playing with stoves Wearing has a calming effect on infants. A 2013 study showed that infants placed in a cradle cried and kicked more often and had an increased heart rate (so the infants were stressed), while those picked up and carried by the mother while walking around calmed down significantly. The effect of being held motionless in the arm was intermediate between that of being carried around and that of being put down.[28] That carrying (e.g., in a baby sling) makes infants more content and makes them cry less had already been shown in a randomized study in 1986.[29] For infant feeding, breastfeeding is recommended by all major infant health organizations.[11] Many airlines refuse boarding for all babies aged under 7 days (for domestic flights) or 14 days for international flights. Asiana Airlines allows babies to board international flights at 7 days of age. Garuda Indonesia disallows all babies under the age of 14 days to board any flights. Delta Air Lines allows infants to travel when they are less than 7 days old when they present a physician travel approval letter. Skywest will not allow an infant less than 8 days old on board.[30] Eight-month-old twin sisters Attachment theory is primarily an evolutionary and ethological theory whereby the infant or child seeks proximity to a specified attachment figure in situations of alarm or distress for the purpose of survival.[31] The forming of attachments is considered to be the foundation of the infant/child's capacity to form and conduct relationships throughout life. Attachment is not the same as love or affection although they often go together. Attachment and attachment behaviors tend to develop between the age of six months and 3 years. Infants become attached to adults who are sensitive and responsive in social interactions with the infant, and who remain as consistent caregivers for some time. Parental responses lead to the development of patterns of attachment, which in turn lead to 'internal working models' which will guide the individual's feelings, thoughts, and expectations in later relationships.[32] There are a number of attachment 'styles' namely 'secure', 'anxious-ambivalent', 'anxious-avoidant', (all 'organized') and 'disorganized', some of which are more problematic than others. A lack of attachment or a seriously disrupted capacity for attachment could potentially amount to serious disorders.[33] Infants develop distinct relationships to their mothers, fathers, siblings, and non-familial caregivers.[34] Beside the dyadic attachment relationships also a good quality of the triadic relationships (mother – father – infant) is important for infant mental health development.[35][36] Infants respond to the sound of snake hissing, angry voices of adults, the crackling sound of a fire, thunder, and the cries of other infants. They have a drop in heart rate, their eyes blinking, increased turning toward the speakers or parent, all of these indicating that they were paying more attention. This is believed to be an evolutionary response to danger. Babies' ability to accurately locate sounds is refined during their first year.[37] Further information: Neonatology The infant is undergoing many adaptations to extrauterine life, and its physiological systems, such as the immune system, are far from fully developed. Potential diseases of concern during the neonatal period include: Neonatal jaundice Infant respiratory distress syndrome Neonatal lupus erythematosus Neonatal conjunctivitis Neonatal tetanus Neonatal sepsis Neonatal bowel obstruction Benign neonatal seizures Neonatal diabetes mellitus Neonatal alloimmune thrombocytopenia Neonatal herpes simplex Neonatal hemochromatosis Neonatal meningitis Neonatal hepatitis Neonatal hypoglycemia Main article: Infant mortality An infant being immunized in Bangladesh Infant mortality is the death of an infant in the first year of life, often expressed as the number of deaths per 1,000 live births (infant mortality rate). Major causes of infant mortality include dehydration, infection, congenital malformation and SIDS.[38] This epidemiological indicator is recognized as a very important measure of the level of health care in a country because it is directly linked with the health status of infants, children, and pregnant women as well as access to medical care, socioeconomic conditions, and public health practices.[39][40] There is a positive relationship between national wealth and good health. The rich and industrialized countries of the world, prominently Canada, the United Kingdom, the United States, and Japan, spend a large proportion of their wealthy budget on the health care system. As, a result, their health care systems are very sophisticated, with many physicians, nurses, and other health care experts servicing the population. Thus, infant mortality is low. On the other hand, a country such as Mexico, which spends disproportionately less of its budget on healthcare, suffers from high mortality rates. This is because the general population is likely to be less healthy.[41] In the U.S., infant mortality rates are especially high in minority groups. For instance, non-Hispanic black women have an infant mortality rate of 13.63 per 1,000 live births whereas in non-Hispanic white women it was much lower at a rate of 5.76 per 1,000 live births.[42] The average infant mortality rate in the U.S. is 6.8 per 1,000 live births.[43] Babyhood is a critical period in personality development when the foundations of adult personality are laid.[44] In contrast toddler is used to denote a baby that has achieved relative independence, in moving about, and feeding.[45] Adult interaction with infants ^ "Charlton T. Lewis, An Elementary Latin Dictionary, Infāns". www.perseus.tufts.edu. Archived from the original on 2023-04-23. 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Common to the different conceptual frameworks is the belief that parenting practices and the infant's capacity for social engagement are biologically based and conform to a prototypical form. Supporters of the CCC model generally recognize that the infant and caregiver are able to adjust to a range of conditions, but they consider the adjustments observed to reflect biological variation. However, more extreme views (e.g., maternal bonding) consider certain variants as non adaptive and as compromising the child's psychological development. Bowlby's concept of monotropism is an exemplar of the CCC perspective... ^ Bretherton, I. and Munholland, K., A. Internal Working Models in Attachment Relationships: A Construct Revisited. Handbook of Attachment:Theory, Research and Clinical Applications 1999 eds Cassidy, J. and Shaver, P., R. Guilford press ISBN 1-57230-087-6[page needed] ^ Cicchetti D, Carlson V (30 June 1989). 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ISBN 978-0-495-09912-3. ^ Kuehn BM (2008). "Infant Mortality". JAMA: The Journal of the American Medical Association. 300 (20): 2359. doi:10.1001/jama.2008.642. ^ Infant Mortality Rate (Deaths per 1,000 Live Births), Linked Files, 2006–2008 Archived 2012-06-12 at the Wayback Machine. statehealthfacts.org ^ Human Growth Development and Learning (2004 ed.), 2004, p. 50, ISBN 971-23-3911-4, ... is mainly through prespeech forms of crying, babbling, gesturing, and emotional expressions. In babyhood, understanding comes from a combination of sensory exploration, motor manipulation, and, toward the end of babyhood, from questions to answers. Babyhood is regarded as a critical period in personality development because it is the time when the foundations of adult personality are laid. ^ Developmental Psychology, 1998, p. 121, ISBN 971-23-2463-X, However, Hurlock (1982) cites that infancy, compared to babyhood, is characterized by extreme helplessness. The word baby may likewise suggest a helpless individual; hence, the word toddler has been increasingly used to denote a baby that has achieved enough control of his body to permit relative independence, such as' moving about, feeding himself, etc. Characteristics of Babyhood The most important characteristics of babyhood are listed below: 1. It is the true foundation age .. Wikiquote has quotations related to Babies. Wikibooks has a book on the topic of: Baby care and evolution Wikimedia Commons has media related to Babies. Look up infant in Wiktionary, the free dictionary. Durham Infancy and Sleep Centre - Durham University The World Health Report 2005 – Make Every Mother and Child Infant eyesight – University of Illinois Simkin P, Whalley J, Keppler A (1991). Pregnancy, Childbirth and the Newborn: The Complete Guide (Revised ed.). Meadowbook Press. ISBN 978-0-88166-177-4. Preceded byFetus Stages of human development Infancy Succeeded byToddlerhood Retrieved from " Your child's love language, and 7 signs they love youReviewed by Kelley Yost Abrams, Ph.D., developmental psychologistWhy do babies grab their private parts?Reviewed by Liz Donner, M.D., pediatric hospitalistWhy do babies arch their back?Reviewed by Shawnté James, M.D., neonatal and pediatric hospitalistMucus in your baby's poop is usually normal – but not alwaysReviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistBaby poop: Everything you need to know but were afraid to askReviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistWhy green baby poop is usually nothing to worry aboutReviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistYeast diaper rashReviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistIs it normal that my newborn poops after every feeding?Reviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalist3 fun facts about baby poopReviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistWhen can babies see clearly and recognize colors?Reviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistWhen do babies' eyes change color? It dependsReviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistHow to take care of a newborn babyReviewed by Shawnté James, M.D., neonatal and pediatric hospitalistWhy babies spit upReviewed by Dawn Rosenberg, M.D., pediatricianCommon questions about life with a newborn, answeredReviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistHow much formula newborns and babies needReviewed by Liz Donner, M.D., pediatric hospitalistDoes your baby have a formula allergy? Here's how to tellReviewed by Liz Donner, M.D., pediatric hospitalistHow to supplement with formula when you're breastfeedingReviewed by Liz Donner, M.D., pediatric hospitalistHow to switch baby formulaReviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistHow long is formula good for? Here's how to prepare and store formula safelyReviewed by Liz Donner, M.D., pediatric hospitalistFive types of baby cries and what they might meanReviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistDoes gripe water actually work to soothe colic?Reviewed by Liz Donner, M.D., pediatric hospitalistWhat to do when your baby's crying for no reasonReviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistWhat is baby witching hour?Reviewed by Shawnté James, M.D., neonatal and pediatric hospitalistWhy babies cry, and how to soothe them Reviewed by Liz Donner, M.D., pediatric hospitalistSample baby schedules for 11- and 12-month-oldsReviewed by Dina DiMaggio, M.D., pediatricianSample baby schedules for 9- and 10-month-oldsReviewed by Dina DiMaggio, M.D., pediatricianSample baby schedules for 5- and 6-month-oldsReviewed by Dina DiMaggio, M.D., pediatricianSample baby schedules for 7- and 8-month-oldsReviewed by Dina DiMaggio, M.D., pediatricianSample baby schedules for 1- and 2-month-oldsReviewed by Dina DiMaggio, M.D., pediatricianSample baby schedules for 3- and 4-month-oldsReviewed by Dina DiMaggio, M.D., pediatricianBaby schedules: Why, when, and how to start a routineReviewed by Shawnté James, M.D., neonatal and pediatric hospitalistHow to use a bulb syringe or nasal aspiratorReviewed by Shawnté James, M.D., neonatal and pediatric hospitalistWhen can my baby go in the shower?Reviewed by Liz Donner, M.D., pediatric hospitalistHow to bathe a newborn or older babyReviewed by Shawnté James, M.D., neonatal and pediatric hospitalistStressing about your supply? Here's how to tell whether your baby's getting enough breast milkReviewed by Monica Murphy, RNC, IBCLC, lactation consultant Coping with cracked, bleeding, or scabbed nipples while breastfeedingReviewed by Mandy Major, postpartum doulaMaking breast milk: When and how you start producing itReviewed by Monica Murphy, RNC, IBCLC, lactation consultant Breasts leaking milk? Here's what to doReviewed by Julie Hawksley, R.N., IBCLC, lactation consultant What to do if your baby only nurses on one sideReviewed by Julie Hawksley, R.N., IBCLC, lactation consultant How long to breastfeed a newborn or older baby at each feedingReviewed by Zakiyah Williams, MPH, IBCLC, lactation consultantHow to get your baby to take a bottleReviewed by Shawnté James, M.D., neonatal and pediatric hospitalistFeeding your premature babyReviewed by Shawnté James, M.D., neonatal and pediatric hospitalistYour preemie baby's growth and developmentReviewed by Shawnté James, M.D., neonatal and pediatric hospitalistWhat to expect if your baby is in the NICUReviewed by Shawnté James, M.D., neonatal and pediatric hospitalistPremature babies' survival rates and health outcomesReviewed by Liz Donner, M.D., pediatric hospitalist26 baby lullabies to help your child sleep (with lyrics)By Colleen de BellefondsHow to sleep train your baby and 6 popular methods to make it happenReviewed by Funke Afolabi-Brown, M.D., sleep medicine expertBaby naps and nap schedules, explainedReviewed by Funke Afolabi-Brown, M.D., sleep medicine expertNewborn sleep: Your complete guideReviewed by Funke Afolabi-Brown, M.D., sleep medicine expertWhy does my baby sweat so much while sleeping?Reviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistGentle sleep training: No cry methods, explainedReviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistBaby sleep training: Cry it out methodReviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistNight weaning your babyReviewed by Shawnté James, M.D., neonatal and pediatric hospitalistSleep regression in babies and toddlers: When and why it happensReviewed by Dina DiMaggio, M.D., pediatricianWhen can my baby sleep through the night without a feeding?Reviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistIs your baby extra fussy, clingy, or hungry? It could be a growth spurt – here's what to knowReviewed by Liz Donner, M.D., pediatric hospitalistWhen do babies start talking? How to get that motormouth runningReviewed by Liz Donner, M.D., pediatric hospitalistYour baby's milestones in their first yearReviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistWhen do babies start laughing?Reviewed by Chandani DeZure, M.D., FAAP, pediatric hospitalistWhen do babies start to sit up?Reviewed by Dawn Rosenberg, M.D., pediatricianWhen babies start walking and how they learn to take those first stepsReviewed by Liz Donner, M.D., pedi