



## U1 and U2 screening examinations

Information for parents

### Information sheet for U1 and U2 medical examinations

The first examination (U1) was already carried out in the delivery room. The second examination (U2) takes place between the 3rd and 10th day of life, either at our clinic or at your pediatrician's practice. You will find a list of all the other examinations your child should attend in the yellow checkup booklet, which you should bring with you to all examinations.

#### Vitamin K

Directly after birth, your child was given vitamin K drops to help blood clotting. At the U2 examination, and later at the U3 checkup, your child should be given vitamin K again. A total of 3 doses are recommended.

#### Vitamin D

To prevent rickets, we recommend you give your child vitamin D on a daily basis from the age of one week. We will provide you with the vitamin D tablets. It is best to give your baby one tablet in the morning before breastfeeding. Alternatively, after consulting your pediatrician, vitamin D and fluorine combination tablets can also be given.

#### The umbilical cord

The umbilical cord usually falls off after about 1 - 2 weeks. After it has fallen off, the navel may bleed a little or ooze secretion. Please do not clean the navel with alcohol.

#### Bathing / Washing

Your child can be bathed as soon as the umbilical cord has fallen off and the navel has dried. A bath once a week is fully sufficient. You can wash your child every day with a wash cloth.

#### Skin care

During the first 3-4 weeks, many babies have dry, reddened and sometimes pimply skin. This normally heals on its own and doesn't require any special care. If your child's skin is very dry, you can apply a baby cream or baby lotion with a low oil content. For protection at the first sign of soreness of the bottom, a wound protection cream should be applied.

#### Weight

During the first days of their life all babies lose up to 10% of their birth weight. They usually regain their birth weight after 1 - 2 weeks. After this, normal weight gain is around 100 - 200 g per week. Your midwife or pediatrician will check your baby's weight at the regular health examinations. If your child is very delicate, or you are worried that he or she is not gaining weight properly, you can borrow a set of scales from the pharmacy.

#### Body temperature

You can roughly estimate your child's body temperature by placing your hand on the back of their neck. If your child feels very hot or cold, we recommend measuring their temperature rectally.

(inserting the thermometer into the anus). Healthy newborns have a body temperature between 36.5°C and 37.5° C. A higher or lower temperature can be an indication of an infection and should be clarified.

### Metabolic test

With your consent, a blood sample was taken from your child for examination in the laboratory to detect various metabolic and genetic diseases. If a check-up or further examinations are necessary, we will contact you by telephone. If we do not contact you, the results of the tests were normal.

### Bilirubin

Simultaneously with the metabolic test, a blood sample is taken to measure the bilirubin level. If this level is elevated, your child's skin may look yellowish. If a certain level is exceeded, your child will require phototherapy, which can only be carried out in hospital. It is also possible that the bilirubin level does not rise until after discharge. You can recognize this by a yellowish color to the skin and/or your child may be very tired and does not drink well. Please visit your pediatrician to have the value checked and have any necessary therapy initiated.

### Hip ultrasound

In certain cases, your child's hips will be examined before discharge. Otherwise, hip ultrasound is routinely carried out as part of the U3 check-up by your pediatrician. If the results of the examination are unclear, we recommend you consult a pediatric orthopedic doctor.

### Hearing test

If it was not possible to carry out the hearing test during your stay at the hospital, or if your child's hearing should be checked, please make an appointment with your pediatrician, and if necessary, with an ENT specialist in pediatric audiology.

### Infections

Maybe you or your partner sometimes have a cold sore (herpes) on your lips. As there is a slight risk that you might pass the infection on to your baby when you have a fresh blister on your lips, we recommend parents do the following: before touching your baby, either wash or disinfect your hands and wear a mask, which you can buy at the pharmacy. Strangers and visitors with a cold sore should not touch your baby! Friends and visitors with a cough or fever should not have contact with your child during the first period.

### RSV Infections

In Germany, RSV infections are the most frequent cause of hospitalization in infants. The Standing Committee on Vaccination (STIKO) recommends that all newborns born during the RSV season (usually between October and March) receive RSV prophylaxis as soon as possible after birth – ideally on discharge from the birth center or at the U2 examination (3rd to 10th day of life). A newborn whose mother was vaccinated during pregnancy generally does not require RSV prophylaxis. The topic of RSV immunization will be discussed with you at the U2 examination.

### Sudden infant death syndrome

Sudden infant death syndrome is rare. The exact causes remain unclear; however, these tips on safe sleep for babies will help you minimize the risk (please also see the official recommendations):

- Babies should sleep on their backs
- They should be in a sleeping bag
- Children should sleep in their own bed, not in their parents' bed
- The temperature in the bedroom should be below 18°C
- Do not smoke near your child
- Breastfeeding is healthy

If your child would like a pacifier, he or she can have one. A pacifier is better than sucking the thumb!

### Infant sneezing and hiccups

Newborn babies sneeze frequently. It is not a sign of a cold; your child is just cleaning its nose. Hiccups are also harmless. Your child will already often have had hiccups in the womb.

### When should you visit your pediatrician?

- If your child loses more than 10 % of its birth weight and does not gain enough weight
- In the event of increased jaundice
- If you find your child is unusually blue or very pale in color, or is lying very limp in bed
- If there are signs of an infection: fever, whining, apathy, reduced drinking, gray skin color and rapid, strained breathing
- At the latest, for the U3 examination (please contact your pediatrician in good time to make an appointment)

### The child's head

Please never shake your child when it cries! If you don't know what to do or are desperate, get help! Make sure you support the head with your hands when lifting your child.

### Midwife / Parent advice / Home visits from a pediatric nurse

For support, we recommend that you have a midwife of your choice visit you at home. She will help and advise you during the first days at home. The following links will aid you in your search for a midwife [www.hebammen.info](http://www.hebammen.info) or [www.hebammensuche.de](http://www.hebammensuche.de).

All the best for your time at home!

The Perinatal Center Altona Team (PNZ)