



## Development

Your child should now be laughing and making happy, squealing sounds. She should follow you with her eyes as you walk around the room and turn toward your voice when you talk. Your baby should use her hands to grasp and play with small hand toys such as rattles. Some 4-month-olds are rolling over, but others wait until about 5 months of age to roll. Continue as much tummy time while awake as you can. Soon your baby will be able to transfer toys from hand to hand and to start making “raspberry” sounds (spitting sounds with her lips). She will start to bear weight on her legs. Avoid using the television as “background noise” or as “something for your baby to look at.” She is better stimulated with human interactions. It is important to know that infants cannot be “spoiled” by holding, cuddling, rocking, talking, or singing to them. Spend time playing and talking with your baby to help strengthen the parent-child relationship. To help with sleeping through the night, make sure your baby is put into the crib when she is still awake to learn to self-calm. Creating a daily routine for feedings, naps, and bedtime help to increase your baby’s sense of security.

## Diet

Your child can start solid foods some time between 4 and 6 months of age if he shows interest and is developmentally ready. As you introduce solids, give foods of a consistency that your baby can put in his mouth himself such as mashed bananas, avocado, sweet potatoes, and steamed vegetables. Historically there has been concern about allergies, but now we know that starting allergenic foods early makes the development of food allergies less likely. Research has shown that adding peanut products to his diet at this age (like mixing some peanut butter into some of his food) can decrease the risk of developing peanut allergy. Given arsenic noted in baby foods, we recommend against rice cereal or rice containing foods. Repeated exposure to foods enhances acceptance. It may take 10–15 times before a new food is accepted. At this age babies can eat 1–3 times/day depending on the family routine. If exclusively giving breast milk, switch to iron-containing vitamins (Tri-vi-sol or Poly-vi-sol) until iron & zinc-rich foods are introduced. Your baby gets water from breast milk or formula and therefore does not need water to drink. It’s better to give fruits and veggies than juices.

## Oral health

If your baby is teething, she may drool, become fussy, or put things into her mouth. Try a cold, not frozen, teething ring. To avoid developing a habit that will harm your baby’s teeth do not put a bottle in your baby’s bed or prop it in her mouth. Its best to use a spoon to feed solid foods to minimize the contact with pureed foods. Use a soft cloth or soft finger-brush with water to gently clean your baby’s gums and any teeth that have erupted twice a day, in the morning and after your baby’s last feeding at night. Avoid sharing a spoon with her or putting her pacifier in your mouth because it introduces your own bacteria into your baby’s mouth, which can contribute to tooth decay.

## Safety

Babies cry a lot at this age, but it gets better as they get older. Crying does not hurt your baby, but it can be frustrating. If your baby is very fussy and you have checked that he is not hungry, does not have a dirty diaper, and is not in an unsafe condition then place the baby in his crib and give yourself a break.

Keep baby powder, household cleaners, tide pods, E-Cigarettes, and small objects out of reach as accidental ingestions and aspirations may occur. Nicotine cartridges from e-cigarettes are especially dangerous. Keep firearms locked up. Avoid baby walkers and Bumbo sitters. It’s important to keep your car,

home, and other places where your baby spends time free of tobacco smoke and E-cigarette vapor. Smoking affects the baby by increasing the risk of asthma, respiratory infections, and sudden death.

When asleep, your baby should be on his back, not on his tummy or side. Sleeping on the tummy or side has been proven to be a risk factor for SIDS (sudden infant death syndrome) and has the highest risk of occurring in this age group. Click here for the [SIDS page](#) in the parent information section of our website for more information. Once your baby is rolling he should no longer be swaddled. If your baby rolls during sleep on his own, it is not necessary to return him to his back. Do not leave your baby alone on a counter or bed – babies have found ways to wiggle and fall!

Sun exposure should be limited at any age, but a baby’s skin can be especially sensitive. When outside, protective clothing should be worn and sunscreen should be applied. Click here for a [sunscreen](#) page in the parent information section of our website for more information.

### Family Relationships & Support

Stay in touch with friends and family members. It will help you avoid social isolation. If you have few people in your family or at home who can help you care for your child, consider asking neighbors with children, friends from work, faith-based groups, or child care providers. Make sure to meet the needs of your other children by spending time with them each day doing things they like to do. Social media tools can be useful in building social networks, but do not rely on them for maternal and child health advice. We can answer your questions and give you reliable information.

### What to expect at this visit

A developmental screen and maternal depression screen should be completed before the visit. Immunizations given at this visit include: Pentacel (DTaP–Polio–Hib combination), Pneumococcal conjugate vaccine, and Rotavirus. Fever, fussiness, drowsiness, decreased appetite, redness, swelling (sometimes in the form of a sore lump) at one of the injection sites may occur for 24 to 48 hours after the vaccines. The lump may persist for weeks following vaccination and will resolve with time. Use acetaminophen as needed and do not use ibuprofen yet at this age. See our [Medication Dosing Guide](#) for recommended dosing. Please call if a more severe reaction occurs (Fever of 105, convulsions, collapse, inconsolable for more than 3 hrs).

DTaP



Hib



Polio



Pneumococcal



Hep B (if needed) Rotavirus

