



# 6 month well child guide

## Development

Your baby:

- Is probably rolling over both ways.
- Looks for a toy when it drops out of sight.
- Has no head lag when pulled to a sitting position.
- Sits up with minimal support (often like a "tripod" with one hand on the ground for support)
- Tries to rake small objects to pick them up.
- Tries to feed herself a little.
- Smiles, laughs, tries to imitate sounds. He may be saying "ma-ma" or "ga-ga"
- Likes social games like Peekaboo.

## Sleep

By 6 months of age babies typically no longer "need" to feed during the night. However, our experience is that most breastfed babies typically wake 1-2 times per night at 6 months, and continue to wake at least once per night until around 12 months of age. If sleep is a problem you may want to review our sleep-training guidelines in the 4 month well child guide.

### **Average awake time for babies who are 6 months is no more than 2.5 hours.**

You should place your baby down for a nap whenever they show signs of fatigue (rubbing the eyes), but no later than 2.5 hours since their last nap/sleep. **Bedtime rituals** become very important by 6 months. Allow time for bath, stories, a gentle massage, and snuggles before bedtime. Keep this routine consistent every night.

By 6 months **the risk of Sudden Infant Death Syndrome has decreased dramatically.**

Some babies who are not cosleeping with Mom or Dad may want a "transitional object" like a blanket or teddy bear. Some guidelines for safety: stuffed animals and blankets must be small enough to not cover his entire face, must not have any removable objects like buttons or attachable toys, and must have no chokeable parts. Speak with your child's physician first before introducing a "lovey" - for some babies this may not be safe.

## Safety

Your baby will be on the move very soon! Baby-proofing is now a necessity!

- **Install electrical outlet covers.**
- **Put away small objects** and make sure **sibling's rooms and toys are secured.**
- Put **safety gates at the top and bottom of the stairs.**
- Store poisons, herbs, medications and supplements in a **locked cabinet.**
- Keep the temperature in your **hot water heater below 120 degrees F** to prevent scalds.

If you are taking your baby outside please keep her **out of the sun** whenever possible. Dress her in a hat with a brim and clothes that cover the arms and legs. Keep your baby in the shade. If this is not possible then you can apply a **safe sunscreen**. We highly recommend checking out the sunscreen guide at Environmental Working Group which is updated yearly. ([www.ewg.org](http://www.ewg.org).) In general the safest sunscreens are those that include zinc oxide.

# Feeding

Continue to breastfeed or give formula or donor breastmilk. **Remember that breastmilk or formula is the primary source of nutrition until 12 months of age.**

Please review the discussion of solid food introductions from the 4 month well child guide.

*Infant feeding is a great time for bonding with the family.*

After the first 1-2 times of feeding your baby you can continue with purees or move on to **Baby Led Weaning\***. Here at Naturopathic Pediatrics we are big fans of Baby Led Weaning. Baby Led Weaning essentially lets babies learn to feed themselves immediately. Rather than pureeing foods you give your baby food in its "whole" form. Your baby will learn to grasp the food, bring it to her mouth and "gum" or "chew" it. This is helpful for

At 6 months of age most babies are ready to move beyond "tasting" food and are ready to eat 1/4, 1/2 or full jar-sized portions. You can "test" your baby's readiness for solid foods by using purees (store-bought or make your own).

**Signs that your baby is ready for solid foods** (beyond "tastes"):

- Is able to sit unsupported.
- Can push food away.
- Is interested in food.
- Does not gag on foods or use his tongue to thrust food out of his mouth.

**Signs that your baby is NOT ready for solid foods** (if this is your baby we recommend waiting 1-2 weeks before trying again)

- Spits out the spoon with his tongue.
- Refuses foods or turns his head right away. (This is also a sign your baby is full.)
- Has poor head control.

We **do not recommend introducing rice cereal as a first food.**

Rice cereal has almost no nutritional value and can be constipating. Here are some great first foods (purees):

Avocado	Squash	Yams and Sweet Potatoes	Applesauce or Pearsauce
Banana	Prunes	Broccoli	Plums

multiple reasons: 1) your baby controls the rate at which food enters her mouth, which prevents over-feeding, 2) your baby is more able to spit out or gag on food that she feeds herself, which actually prevents choking (this is often opposite of what you would imagine!), 3) babies are more excited and engaged in the feeding process, which encourages healthful eating habits. **You can give your baby any healthy non-chokeable food.**

Here are some excellent “next” foods (as purees or mashed):

Quinoa cereal	Kale	Peas
Cooked beans	Potato	Asparagus
Oatmeal	Cabbage	Millet (cooked and made into a cereal)
Nectarines, apricots, peaches	Carrots	Blueberries and blackberries
Spinach	Kiwi	Buckwheat
Collard greens	Lentils	String beans
Cherries	Humus	Beets

Here are some good examples of ways to do **Baby Led Weaning**. All food should be soft enough that it is not chokeable.

Roasted or steamed vegetables (like broccoli, sweet potato fries with no salt, cooked potato pieces, steamed carrots, broccoli stems, etc.)
Chicken drumsticks with most of the meat taken off
Homemade turkey or lean beef meatballs (we strongly recommend organic meats)
Raw slices or chunks of banana, avocado, peaches, pears, melon, cucumber
Cooked pasta (with or without sauce) or cooked rice
Scrambled egg or scrambled egg yolk. (Egg yolk in particular is high in choline and other nutrients that are excellent for babies.)
Cooked beans (delicious if they have been cooked in a broth or soup)

## Iron containing foods

We **highly** recommend incorporating **iron-containing foods** within the first month of solid food introductions. Babies need additional iron at around 6 months - it is very important to include iron containing foods early to prevent iron-deficiency anemia. (Bold items are highest in iron.)

<b>Black beans</b>	<b>Grass-fed beef, lamb or wild game</b>	<b>Turkey</b>
Other greens: beet greens, swiss chard, kale, brussel sprouts etc.	Blackstrap molasses	Lentils, split peas or lima beans
Spinach	Prunes (or prune juice), dates	Rice bran, quinoa or millet

## Foods NOT to give babies:

- Salted foods
- Honey or corn syrup
- Shark, swordfish or marlin, tuna more than once per week (due to high mercury levels)
- Cheeses made from non-pasteurized milk
- Sweets like cookies, candies, cakes or soda or juice
- Chokeable foods
- Caffeinated beverages

## Drinking from a cup.

We recommend introducing a cup! Let your baby sip water or breastmilk from a cup with help. 1-2 ounces of water with meals can help sensitive tummies digest solid foods better.

## Food allergies and sensitivities

If your child has a sensitive stomach, has colic, reflux, eczema or allergies we recommend introducing no more than 1 new food at a time. If your child has a food reaction/allergy/sensitivity please inform your physician at the next well child visit, or immediately if the reaction is severe. Stop the food and wait for all reactions to subside before introducing new foods. If your child seems to react to most or nearly all foods please let your physician know. Signs of food reactions are:

- Rashes around the mouth or anus
- Diarrhea, blood or mucous in stools
- Severe gas, bloating, constipation or colic-like symptoms
- Skin reactions like eczema, rashes, itching or redness, or dark circles under the eyes
- Change in personality or loss of newly acquired developmental milestone

## Vaccines\*

Again, **we want to make it clear that we support families regardless of whether/how they choose to vaccinate.** It is our goal to provide unbiased information on vaccines to allow parents to make a choice they feel good about!

In the United States the following vaccines are recommended by The Advisory Committee on Immunization Practices (ACIP) at 6 months:

**Rotavirus**, **IPV** (Polio), **DTaP** (Diphtheria, Tetanus and acellular Pertussis), **Hib** (Haemophilus influenza B - this is not the flu vaccine, it is a bacteria that can cause meningitis), and **PCV** (Pneumococcal). The **Hepatitis B** vaccine may be given during this visit. Additionally the **seasonal influenza vaccine** may be given to babies 6 months and up during the flu season.

If you are concerned that your baby is having a vaccine reaction please see the Naturopathic Pediatrics 2 month well child guide or see the [Vaccine Reactions\\*](#) blog post on the website. Notify us immediately. Again, watch for car-seat straps that may be rubbing on the leg where the shot was administered.

Check off which vaccines were given at this visit for your records (circle which leg).

- **DTaP** R/L
- **IPV** R / L
- **Rotavirus** (oral)
- **Seasonal influenza** R / L
- **Hib** R / L
- **PCV** R / L
- **Hepatitis B** R / L



# Coming up...

## What to expect from your baby between 6 months and 9 months:

- He will have a **Wonder Week** at around 6.5 months and again near 9 months (it may be more difficult to accurately time Wonder Weeks as your little one gets older. See the book for more information!)
- She will say sounds like bah-bah and dah-dah, will feed herself small pieces of soft food, will sit up well and stand with support, may begin to crawl, will develop separation anxiety, and will try to imitate your sounds.

### My child's milestones:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Topics listed with an asterisk (\*) have more information published on [www.naturopathicpediatrics.com](http://www.naturopathicpediatrics.com). Simply type the underlined phrase into the search box to find additional articles.

Spotlight  
on:

# Calendula officinalis

**Common name:** Pot Marigold

**Part used:** Fresh Leaf

**Medicinal constituents:** triterpenes (calendulosides A-D), flavonoids (including narcissin, rutin), volatile oil, chlorogenic acid.

**Use for:** Calendula has potent vulnerary properties, meaning it enhances wound healing. It is also anti-inflammatory, styptic (speeds wound closure to prevent bleeding), antiviral, anti-protozoal and antifungal. Calendula also has lymphagogue properties, meaning it helps move lymphatic fluid. Calendula can be used internally for gastrointestinal inflammation, but this herb is usually used externally on a variety of skin conditions and mild skin infections. It is an excellent first-aid herb to have on hand for minor burns, scalds, slow healing wounds and mild skin ulcers. It can also be used topically for bruises, strains or strains. Calendula succus (pressed plant juice) can be used topically for thrush and Candida (yeast) infections of the nipple or skin.

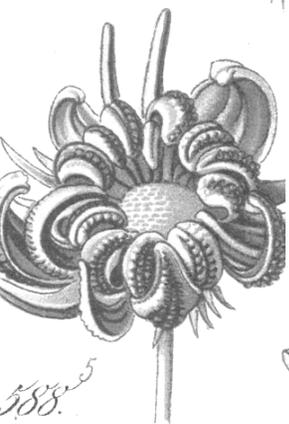
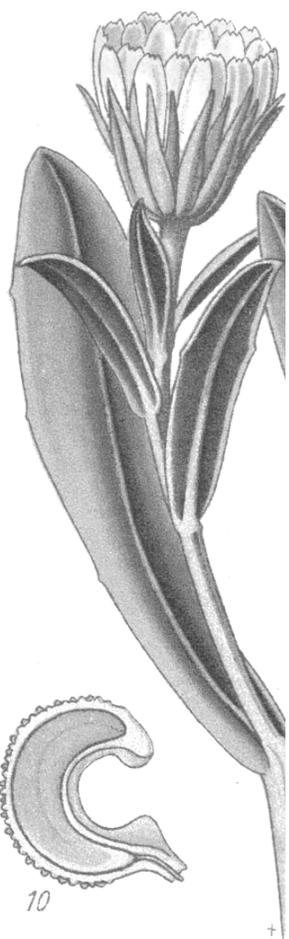
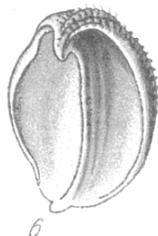
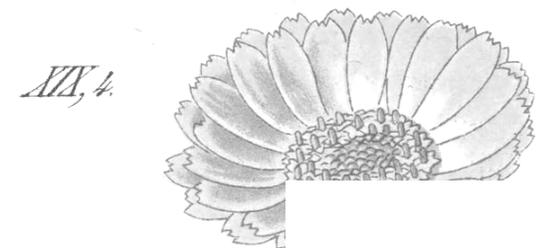
**Safety:** caution - not all Marigold species are medicinal. Caution if allergic to other members of the Asteraceae family (chamomile, echinacea, etc). Not for use internally in pregnancy or lactation, but topical use (in moderation) is generally considered safe.\*

Typical dose recommended by herbalists\*\*

Age/weight	Dose	Form
Adult (approx 150 lbs)	Succus: 3-5 ml three times daily. Tincture: 1-2 ml three times daily.	Succus (pressed juice of Calendula petals) preserved in 25% alcohol to prevent spoilage. Tincture 1:5 in 90% alcohol. Creams, oils, ointments, suppositories - dosage varies.
Children	Recommend topical use only as cream, ointment, oil, or poultice.	

\*These statements have not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure, or prevent any disease. This monograph is provided for informational purposes only and is not medical advice. Always consult your physician before using any herbal substance.

\*\*Always consult a physician for appropriate dosage before use.



*Calendula officinalis L.*