

Woburn & North Andover Pediatric Associates

7 Alfred Street, Baldwin Park II, Woburn, MA 01801 - Phone 781-933-6236, Fax 781-938-8050
800 Turnpike Street, North Andover, MA 01845 - Phone 978-557-5712, Fax 978-557-5406



Routine Physical Exam: 9 months

Development

- By 9 months, your baby should:

Progress with crawling, change positions by pushing up to crawl position and sitting

May begin pulling to a stand and even start cruising

Have improved hand-eye coordination and is beginning to develop a pincer grasp to pick up objects with thumb and forefinger

Easily transfer objects between hands or directly into their mouth

- Baby loves to make sounds and babbles constantly, begins to imitate sounds & gestures of others. Babbling will likely consist of chains of sounds and consonant repetition such as “ma-ma-ma” or “ba-ba-ba”. Listen carefully and you may hear speech patterns and intonations that sound like your own words and sentences.

- Your baby can begin to understand emotion through different tones of voice and begins to understand “no”. Understanding of language is improving and he/she may follow a simple command, or start using their fingers to point to an object when asked.

- In the brief pauses between babbles your baby is becoming a good listener and reader of body language. You may notice that your baby brings you a favorite toy to see you smile in response. Some babies are effective comedians, even at this young age – they’ll blow bubbles and make funny sounds just to elicit a laugh from the grown-ups around them.

- Baby will understand object permanence and try to find objects you’ve hidden. He/she is developing stronger memory skills. He/she will also start to see cause and effect (like objects fall to the ground when dropped).

- Baby becomes aware of parents as separate from himself and will recognize her own name when spoken.

- Baby will connect animals with actions and sounds (like barks, meows, or chirps).

- Stranger anxiety and separation anxiety can peak at this age. Your infant now recognizes familiar faces and may become clingy, shy, and fearful around unfamiliar faces.

- Visit: www.HealthyChildren.org, search topics like “Ages and Stages”; www.ZeroToThree.org

Nutrition

- Have your baby join the rest of the family for meals. This age group will enjoy being at the table. By now, your baby has been eating a variety of baby foods and may be showing more interest in what you are eating rather than baby foods.

- Baby should be able to take food between forefinger and thumb and participate in self-feeding and drinking from a sippy cup.

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- Feed baby when he/she is hungry and let baby set the pace. Do not force feed as this can cause food aversions and not allow him/her to realize when they are full. Baby's stomach is the size of their palm so just a few bites can make them feel full.
- At this age, babies should have solids 3 times per day with breakfast, lunch, and dinner. Offer foods with new tastes & textures, or give baby foods that the rest of the family is eating. Keep in mind that baby can easily choke so cook foods a bit longer (so they are softer), then fork smash or cut into small pieces.
- Keep meals nutritious – offer fruits & veggies from all colors of the rainbow for a well-balanced and nutrient rich diet. Try green peas, yellow banana, orange squash/carrots, purple plums. Eggs, meats, fish, and dairy products are good sources of protein for this age group. Healthy fats (like avocado and peanut butter) are needed for the developing brain. Avoid candies, deserts, and other high sugar foods.
- If baby does not seem to like a new food, wait a few days and try it again. It can take up to 10-15 times of trying a new food for baby to take it. When trying something new, mix it with a food baby likes. Try your baby's favorite pureed veggie with cooked noodles or pasta, top pancakes or blend unsweetened yogurt with a favorite fruit.
- Your baby is most likely drinking less breast milk or formula because they are eating more foods. Your baby still needs the protein, calories, and other nutrients so continue to offer 4-6 ounces of breast milk/formula at mealtimes and before bed. On average, baby may be drinking 16-24 ounces of breast milk or formula per day.
- Babies do not need juice – it has no nutritional value and usually contains added sugar. If you choose to give your baby juice, limit it to less than 4 ounces per day, preferably diluted with water.
- Do not give baby raw honey or whole milk before 1 year of age. Dairy products can be introduced prior to 1 year, once baby has advanced from stage 1-2 foods.
- Do not provide bottles for going to sleep as it can cause tooth decay.
- Visit:

Sleep

- Baby will sleep an average of 14 hours per day and may sleep 9-10 hour stretches through the night. He/she may nap for 1-2 hours during in both the morning and afternoon.
- It is normal for baby to wake at night. Sleep disturbances often occur when a baby reaches major milestones in cognitive and motor development (when baby is refining new skills, he/she may wake and practice or be too excited to fall back to sleep) and with separation anxiety. Baby does not tend to wake up at night due to hunger and does not need to eat in the middle of the night.
- Once your baby can roll both ways, he/she can sleep in any position they prefer. Continue to keep the crib free of pillows, stuffed animals, crib bumpers, and other soft items.
- Stick to a consistent bedtime routine – you and baby will benefit from a regular nighttime schedule. Start early to be sure baby is not overtired. Make sure baby finds the routine soothing – for example,

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if baby dislikes baths, try doing bath time earlier in the day. Children thrive on consistency and feel more secure when they know what to expect.

- Visit: www.HealthyChildren.org, search “Getting Your Baby to Sleep”, “Your Baby’s Head”

Safety

- Your child must be secured in a car seat for every ride! Infants should be in rear facing car seats according to your seat’s manufacturer guidelines. Seat weight and height requirements should be followed carefully. The American Academy of Pediatrics recommends that children remain rear facing in the back seat until age 2 years.
- Normal baby wiggling movements can cause falls – do not leave baby unattended. Diaper changes on the bed, couch, and changing table can easily result in a fall to the floor without proper caution.
- Do not drink hot fluids when holding baby. At this age, babies wave their fists and can unexpectedly grab things like coffee cups, dangling cords, and table cloths.
- Do not leave small objects in baby’s reach. Babies explore their environment by putting things in their mouths, which can be a choking hazard with very small objects.
- Keep plastic wrappers and bags away from baby. They can form a tight seal if placed over the mouth and nose, causing suffocation.
- Do not place baby on a waterbed, bean bag, or anything soft enough to cover the face.
- Your hot water heater should be set no higher than 120 degrees.
- Consider taking a CPR class.
- Review your home’s childproofing as your toddler is becomes increasingly mobile & curious. He/she needs constant supervision & protection against hazards. Lower the crib mattress to prevent falls, check window guards, check smoke & carbon monoxide detectors twice yearly, and supervise your child with family pets.
- Use a rectal thermometer to take baby’s temperature. Call the office for any temperature 101 degrees or over.
- Limit sun exposure – use sunscreen (SPF 50 for sensitive skin is fine for 2 months and older), hats, and try to keep baby in the shade!
- Maintain a smoke-free environment. Children exposed to smokers/second hand smoke are more susceptible to sudden infant death syndrome (SIDS), ear infections, breathing problems, and wheezing.
- Post emergency numbers in a central location and/or programmed in your mobile phone contacts.
- Visit: www.HealthyChildren.org, search topics like “Infant & Toddler Car Seat Safety”, “How To Take Your Child’s Temperature”

Relationships

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- Stranger anxiety continues. Your infant now recognizes familiar faces and may become clingy, shy, and fearful around unfamiliar faces. Baby may begin to demonstrate strong attachment to parents or regular caregivers by raising their arms to be picked up or crying when that person leaves the room.
- Engage and entertain your baby by talking to him/her. At this age, babies do not learn language from screens of any sort (TV, mobile devices, etc.) so turn them off and use real dialogue instead!
- To promote speech, continue to read to your baby. Also, remove batteries or turn off the sound from toys that do all the talking/singing to your baby as babies should not be passive listeners to toys at this age.
- Let baby explore new textures. Touch and feel board books are ideal for this age.
- Visit: www.HealthyChildren.org; www.ACOG.org, search “postpartum depression”

Office Policies

- We like to see infants at regular intervals: 1, 2, 4, 6, 9, 12, 15, 18 months, 2 years, and then annually thereafter. We schedule 3 months in advance. We try to alternate visits between your child’s pediatrician and pediatric nurse practitioners (PNP).
- Please note that many insurance companies require referral authorizations for outpatient appointments, urgent care visits, & other services. It is your responsibility to understand your insurance benefits so you should familiarize yourself with your plan’s referral requirement. Please call the Referral Department if you need to request a referral 781-933-0254.
- We follow the recommended vaccine schedule as indicated by the American Academy of Pediatrics & Centers for Disease Control. View vaccine information statements (VIS) at: www.immunize.org/vis
- Sign up for the Patient Portal to access vaccine history & lab results. You may also sign up for text and voice appointment reminders. See a staff member for details!
- Traveling outside of the country in the next few months? Be sure to contact our nurses to determine if your child will need travel vaccines/medications prior to departure.

When should you call for further assistance?

- If you are concerned that your child is not eating, growing or developing normally
- If baby seems sick and/or has a fever
- If you need more information about how to care for your child, or have additional questions or concerns