Safe Sleep & Newborn Care Guide

This guide supports families with practical newborn basics and safe sleep steps that reduce preventable risks. Use it as a quick reference at home, at appointments, and during the first weeks after birth.

Safe Sleep: The ABCs

A = Alone: Baby should sleep alone in their own sleep space (crib, bassinet, or portable play yard).
B = Back: Always place baby on their back for every sleep (naps and nighttime).
C = Crib: Use a firm, flat mattress with a tight-fitting sheet.

Avoid: pillows, blankets, loose sheets, stuffed animals, bumper pads, and sleep positioners.

Room-Sharing vs. Bed-Sharing

Room-sharing (baby sleeps in the same room as you) is recommended because it makes feeding and monitoring easier.
Bed-sharing increases the risk of suffocation; especially if an adult is tired, has used alcohol/medications, or if the sleep surface is soft (couch, recliner, adult mattress).
If you are feeding in bed, return baby to their sleep space before you fall asleep.

Swaddling & Sleep Sacks

Swaddling can help some newborns settle. If you swaddle:
• Keep it snug around the chest but loose at the hips.
• Stop swaddling as soon as baby shows signs of rolling.
• Never place a swaddled baby on their stomach.

A wearable blanket (sleep sack) is a safer alternative to loose blankets.

Temperature & Clothing

Overheating increases risk during sleep. Dress baby in one more layer than you would wear. Signs of overheating include sweating, damp hair, flushed skin, or rapid breathing. Keep the room comfortable and avoid heavy blankets.

Pacifiers, Smoke Exposure, and Car Seats

Pacifier: Offering a pacifier at sleep time (once breastfeeding is established, if breastfeeding) may reduce risk.
Smoke: Keep baby away from smoking and vaping. Smoke exposure increases sleep-related risks.
Car seats: Car seats are for travel. Baby should not routinely sleep in a car seat, swing, or bouncer when not traveling and should be moved to a flat sleep surface when possible.

Newborn Feeding Basics (Breast or Bottle)

Newborns usually feed every 2–3 hours (sometimes more). Look for hunger cues: rooting, hand-to-mouth, lip smacking, fussing.
Breastfeeding: Expect frequent feeds, especially during growth spurts.
Formula feeding: Follow package instructions and ask your pediatrician about amounts.

If baby is very sleepy, not waking to feed, or feeds are consistently difficult, call your pediatrician.

Diapers, Umbilical Cord, and Bathing

Diapers: In general, diaper output increases across the first week. Ask your pediatrician what is normal for your baby.
Umbilical cord: Keep it clean and dry. Fold the diaper down so it can air out. It should fall off on its own.
Bathing: Sponge baths until the cord falls off. Use gentle soap and keep baby warm.

When to Call the Pediatrician or Seek Care

Call right away if baby has:
• Fever (100.4°F / 38°C or higher) or low temperature

• Trouble breathing, persistent bluish color, or repeated pauses in breathing
• Poor feeding, fewer wet diapers than expected, or signs of dehydration (dry mouth, no tears)
• Extreme sleepiness or difficulty waking
• Vomiting repeatedly (not just spit-up)
• Yellowing skin/eyes that seems to worsen (jaundice)

Trust your instincts—if something feels wrong, seek care.

Alabama Note

Local resources may include your county health department, WIC clinic, and newborn education programs through hospitals. If you have Medicaid/Plan First, ask what newborn and postpartum supports are available in your area.

Quick Safe Sleep Checklist

☐ Baby placed on back for every sleep
☐ Firm, flat sleep surface with fitted sheet only
☐ No blankets, pillows, bumpers, or stuffed items
☐ Baby sleeps in the same room (not the same bed) when possible
☐ Smoke-free environment
☐ Baby moved to a flat sleep surface after travel