

Bringing Baby Home: Your First 48 Hours Checklist

A calm, step-by-step companion for the drive home, the first feeds, and the first two nights - so you can spend less time worrying and more time holding your baby.



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01 Before You Leave the Hospital

Discharge moves quickly. Run through this list before the wheelchair ride down, and you will arrive home with everything you need.

- ☐ **Watch one full feed** with the nurse or lactation consultant, and ask every question you have - this is the time.
- ☐ **Confirm the first pediatrician visit** is booked, usually within 1-3 days of discharge.
- ☐ **Car seat installed and checked** - most hospitals will not discharge without seeing it.
- ☐ **Collect paperwork:** discharge summary, baby's weight and feeding notes, and any prescriptions.
- ☐ **Ask about the cord stump, circumcision care (if applicable), and jaundice** - what is normal, what is not.
- ☐ **Stock the car:** a fed and burped baby, one spare outfit, and a blanket for over the harness.

Phillippa's tip: Take a photo of the whiteboard in your hospital room. It usually holds feeding times, baby's weight, and your care team's names - details that blur together by day two.

02 The Car Ride Home

- ☐ **Rear-facing, back seat, snug harness** - straps at or below the shoulders, chest clip at armpit level.
- ☐ **No bulky coats or buntings under the straps.** Dress baby in thin layers; add a blanket over the buckled harness.
- ☐ **Feed and burp before you leave** so baby settles for the drive.
- ☐ **Drive straight home.** This is not the trip for errands or visitors - baby, and you, need rest.
- ☐ **Keep the ride short and calm.** If baby cries, it is safe to let them fuss until you can pull over safely.

03 Feeding in the First 48 Hours

Newborn stomachs are tiny - about the size of a cherry on day one. Frequent, small feeds are not a problem to fix; they are exactly right.

- ☐ **Feed on cue, 8-12 times in 24 hours.** Watch for rooting, hands to mouth, and stirring - crying is a late cue.
- ☐ **Wake to feed** every 2-3 hours until your pediatrician confirms baby is gaining well.
- ☐ **Breastfeeding:** expect colostrum first - small amounts of rich, golden milk made to measure for a newborn.
- ☐ **Bottle-feeding:** start with 1-2 oz per feed, paced slowly, with breaks to burp.
- ☐ **Burp mid-feed and at the end.** A few gentle minutes upright often prevents the fussy spell later.

04 Diapering: What to Expect

- ☐ **Day 1:** at least 1 wet and 1 dirty diaper. Stools are black and tarry (meconium) - this is normal.
- ☐ **Day 2:** at least 2 wet and 2 dirty. Stools begin turning green-brown as milk comes in.
- ☐ **By day 4-5:** 6+ wet diapers and 3-4 yellow, seedy stools a day signal baby is feeding well.
- ☐ **Clean front to back,** pat dry, and let the cord stump stay dry and exposed to air.
- ☐ **Fold the diaper below the cord** until it falls off on its own, usually in 1-3 weeks.

Phillippa's tip: Keep a simple tally on your phone - time, feed, wet, dirty. At the first pediatrician visit, that little log answers half their questions.

05 Sleep Basics

- ☐ **Always on the back,** on a firm, flat surface - crib, bassinet, or play yard with nothing else in it.
- ☐ **Bare is best:** no pillows, bumpers, loose blankets, or stuffed animals in the sleep space.
- ☐ **Room-sharing (not bed-sharing)** for at least the first 6 months lowers risk and makes night feeds easier.
- ☐ **Expect 16-17 hours of sleep** in short stretches of 1-3 hours. Newborns do not yet know night from day.
- ☐ **Keep days bright and nights dim** to gently teach the difference over the coming weeks.

06 Soothing Techniques That Work

- ☐ **The 5 S's:** Swaddle, Side or Stomach (for holding only), Shush, Swing, Suck.
- ☐ **Skin-to-skin** settles breathing, temperature, and crying - for both parents.
- ☐ **White noise,** about the volume of a shower, recreates the womb's constant sound.
- ☐ **Check the basics first:** hungry, wet, gassy, too hot or cold, or simply wanting to be held.
- ☐ **It is okay to set baby down** in a safe place and take two minutes to breathe. That is good parenting, not giving up.

07 When to Call the Pediatrician

Trust your instincts - and call promptly for any of these. Your care team would always rather hear from you early.

Call right away if you notice: temperature of 100.4 F (38 C) or higher in a baby under 3 months; difficulty breathing, blue or pale color; fewer wet diapers than expected after day 3; yellow skin or eyes that is spreading (jaundice); a dry mouth, no tears, or unusual sleepiness where baby is hard to wake for feeds; redness, swelling, or discharge at the cord stump; or inconsolable crying that does not settle.

08 Caring for Yourself

You have just done something enormous. Your recovery is not separate from baby's care - it is part of it.

- ☐ **Sleep when the baby sleeps** is cliché because it works. Protect at least one stretch a day.
- ☐ **Accept every offer of help** - meals, laundry, holding baby while you shower.
- ☐ **Eat, hydrate, and take prescribed medication on schedule.** Set phone reminders if needed.
- ☐ **Limit visitors in week one.** Your only job is feeding, resting, and bonding.
- ☐ **Baby blues are common** in the first two weeks. If low mood, anxiety, or sleeplessness persist or worsen, tell your provider promptly - help works, and asking for it is strength.

A note from Phillippa: After 20 years of walking into homes on day one, I can tell you this - calm is a skill, and it can be learned. You do not have to figure out the first 48 hours, or the first 12 weeks, alone.

Want a Calmer First 12 Weeks?

Book a consultation for personalized, in-home or virtual newborn support - feeding, sleep, soothing, and a routine built around your family.

thenewborn-blueprint.com

Go deeper with the full ebook: **THE NEWBORN BLUEPRINT - Your Week-by-Week Guide to Confident Parenting, Birth to 12 Weeks**, available at thenewborn-blueprint.com.