

Fussy Baby

Telephone Triage

Questions to ask:

1. Frequency of and timing of irritability episodes (early morning, late evening, etc)
2. Any associated regurgitation, if so the amount and force of the spit up
 - a. If any regurgitation: any color (formula, green like bile, red like blood, black or coffee grounds)
3. With the crying is there any relation to feedings?
4. Feeding amount, frequency, current milk/formula type. How are they preparing the bottle? Any other feedings: foods, juices, water, Pedialyte?
5. What comfort measures have been tried (swaddling, position changes, infant massage, bicycling of the legs, etc)?
6. What is the infants sleep/wake cycle? Any recent changes?
7. Any changes with urine or stool?
 - a. Frequency and consistency of bowel movements? Last bowel movement?
 - i. Blood in the stool (bright red blood, wine colored, volume and frequency)
 - b. Frequency of wet diapers?
8. Any specific positions that worsen or improve the crying (lying, sitting, upright, etc)?
9. Any unusual positions (arching back, stiffening, shaking, drawing up legs, etc)?
10. Any signs of systemic illness (fever, rashes, decrease in alertness/energy, recent weight loss)?
11. Are there respiratory issues: cough, sneezing, congestion, wheezing, apnea, cyanosis?
12. Any other skin concerns (rashes, bruises, cuts, scratches, swelling to any part of the body)?
13. Any recent sick contacts or exposures?
14. What is the status of the fontanel (soft spot) flat, sunken, or bulging?
15. Any current medications (prescribed or OTC)? If so, last doses and the response?
16. Does the parent/care provider feel like they may hurt the baby?

Red Flags: Refer to ER/PCP/sooner clinic visit if available

1. Blood or bile in spit up (red or coffee ground appearance, bright green emesis)
2. Projectile vomiting
3. Choking, apnea, or cyanosis (turning blue around the mouth)
4. Concerning amounts of blood in the stool (see Bleeding Triage for additional help)
5. Excessive irritability which is not consolable or alternating with periods of lethargy
6. Dehydration signs and symptoms
7. Bulging or sunken fontanel
8. Unusual rashes or signs of trauma (especially if unexplained)
9. Seizure like activity
10. Parent/care provider reports they will or have hurt the baby

Treatment Goals:

- Identify any Red Flags for crying
- Prevent harm to the baby

In the healthy baby:

- Reassurance
- Review calming techniques

Advice:

1. Make sure all needs are met (dry, clean, warm, fed)
2. Try non-nutritive sucking such as a pacifier or breast
3. Gently rub or stroke baby's back, chest, belly or head
4. Gentle motion (rocking or swinging) – hold the baby close, walk with the baby, stand up and hold the baby close and repeatedly bend your knees
5. Take the baby for a ride in a stroller or the car
6. Try soft sounds, music, fan, clock, nature sounds.
7. Turn on the vacuum or clothes dryer.
8. Take a break if you become frustrated or “angry”. Get help from family/friends.
9. Monitor for “red flags”

Teaching:

1. All babies cry
2. Crying is how a baby communicates its needs
3. Babies start to cry more, often around 2 weeks of age and the crying increases and peaks in the second month of life
4. Some healthy, normal babies cry up to 4 – 5 hours a day. Crying episodes can last 30 – 40 minutes or longer.
5. Babies often cry more in the evening
6. Babies often cry intensely when they are not in pain, even though they may look like they are in pain.
7. The crying will eventually stop

Possible causes:

1. Tired, hungry, wet/dirty
2. Infant Colic (this is actually a developmental stage not a true illness/condition)
3. Physiologic reflux (see GER phone triage protocol)
4. Milk or soy protein intolerance (could consider dietary adjustment)
5. Illness (may need PCP evaluation)
6. Trauma or physical injury (accidental or nonaccidental-abusive)
7. Sandifers syndrome (severe GER)

Resources:

www.gikids.org

Clinical Handbook of Pediatric Gastroenterology, 2nd Ed. Edited by Rosemary J. Pauley-Hunter, MS, FNP-BC, CCRP, Lisa Philichi, MN, RN, CPNP

Information from review of Calming a Fussy Baby, www.nationwidechildrens.org

<http://www.childrenscolorado.org/wellness-safety/calm-a-crying-baby/calming-techniques/how-to-soothe-a-baby> - 2/3/15

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