

# Parent's Checklist for **REFLUX** in Infants 0-12 months old



## Lifestyle and Eating Habits

*It is normal for an infant to spit up multiple times a day.  
The spitting up in and of itself is not a problem.*

Listed below are lifestyle and eating habits that can help reduce the frequency or amount that your infant spits up. Place a check mark next to the suggestions you have already tried so that you will be able to discuss other alternatives or options with your pediatrician:

- Decrease the size of each feeding, but make up for it by feeding more often.
- Burp more often throughout the feeding.
- Put your baby in a car seat only when driving in the car.
- Don't immediately feed again if the baby spits up. Wait until the next scheduled feeding time.
- Avoid tight diapers and waistbands.
- Avoid exposure to tobacco smoke.
- If your baby is bottle-fed, add up to one tablespoon of rice cereal for every ounce of infant formula or breast milk.
  - This will thicken the feeding, and because it has more calories, your baby may be satisfied with smaller volume feedings.
  - Your doctor may also choose to recommend trying a special formula that thickens in the stomach.
  - Some brands of rice cereal contain milk or soy protein to which some babies may be sensitive. If this applies to your baby, check the label on the rice cereal to see if milk or soy appear as ingredients.
- Consider trying a different formula in case protein sensitivity is playing a role.

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*When spitting up causes other problems with your baby, it crosses the line into gastroesophageal reflux disease, or GERD.*

## Symptoms of **GERD**

Place a check mark next to any of the symptoms that your infant is experiencing. Sometimes these symptoms may be associated with GERD, but the symptoms can also be caused by other problems. Share this information with your pediatrician, because your description is important in helping the physician determine whether your infant has GERD. It is important to realize that because GERD symptoms come and go, your infant may not show symptoms in the pediatrician's office. Therefore, it is important to talk with your pediatrician to figure out what the symptoms indicate.

- Vomiting associated with
    - Blood (e.g., bright red streaks, blood clots or coffee ground appearance in stomach fluids)
    - Green or yellow fluid
  - Breathing problems
    - Repeat bouts of pneumonia
    - Turning blue
    - Chronic coughing
    - Wheezing
  - Crying
    - Arching away from breast/bottle with crying or irritability
    - Persistent crying
  - Feeding difficulties
    - Feeding refusal
    - Poor growth or failure to thrive
    - Difficulty eating (e.g., choking or gagging with feeds)
- Your pediatrician may also recommend:
- A trial of a medication that decreases acid in the stomach
  - Referral to a pediatric gastroenterologist (specialist who cares for children with digestive (i.e., gastrointestinal problems))
  - Tests to rule out other diseases or irregularities

**YOUR SOURCE FOR PEDIATRIC REFLUX and GERD INFORMATION**



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