An introduction to physical examinations of newborn babies and those aged six to eight weeks

What is the physical examination?

When your baby is born, the midwife will carry out some checks. You will then be offered a more detailed physical examination of your baby within 72 hours of birth and again at six to eight weeks old. These examinations include a screening examination to find those babies who may have a problem with their eyes, heart, hips and, in boys, testicles. Your baby will experience a lot of physical changes in the first two months of life and this is why the examination is repeated at six to eight weeks.

This section gives you information about:

- why the physical examinations are carried out;
- who will carry them out;
- where the examinations will be carried out;
- how the examinations are carried out;
- how to prepare for the examinations;
- what the results may mean for parents and babies;
- what happens after the examinations;
- where the results will be recorded; and
- where you can go for more information and advice.

Why should I have my baby examined?

The purpose of the examination is to identify babies more likely to have conditions that need to be investigated. However, screening will not always pick up every problem. Some conditions may only become apparent after several weeks or months and a few may still not be found at the six to eight week check.

The physical examinations can help identify health concerns at an early stage. Most babies who have the physical examinations will be healthy and will not have any health problems. In some cases the findings may suggest a problem, but further investigations often show there is nothing to be concerned about. Most of the problems babies have are minor and do not need treatment.

Health professionals such as GPs, midwives or health visitors are happy to see parents who may have worries about the health and development of their babies.

For the small number of babies who do have serious problems, there are a lot of benefits of having these identified as soon as possible. Early treatment can improve the health of the baby and prevent disability. If further investigations or treatments are needed, an appointment with a specialist will be arranged.

It is recommended that you have your baby examined, but if you are not sure, discuss it with your midwife or other health professional. Also if you think your baby might not have been examined, speak to your midwife, health visitor or GP.

Who will do the examinations?

A doctor, midwife, health visitor or nurse will carry out the examinations. All health professionals carrying out the examination have been specially trained.

Where will the examinations be carried out?

Depending on the health professional doing the examination, and the age of the baby, the examinations may take place in a hospital, GP's surgery, clinic, children's centre or at home.
How are the examinations carried out?

The health professional will introduce themselves and explain the examination. They will ask you about your pregnancy, and the birth, and will check your family history. They will also ask you about your own health and how you are feeling. This is an opportunity for you to talk about the general care of your baby and aspects such as feeding, crying or sleeping and to discuss anything that might be worrying you.

The examinations are normally done when your baby is calm and comfortable. The health professional will carry out an overall physical examination which includes a head-to-toe examination of your baby, looking at their development, feeding, weight, alertness and general wellbeing.

The health professional will look at your baby's eyes, heart, hips and, in boys, his testicles. They will listen to your baby's heart with a stethoscope and will look at your baby's eyes using an instrument called an ophthalmoscope.

Other parts of the examination involve gently handling your baby and moving their legs to check the hips. This should not hurt, although testing your baby's hips can sometimes be a little uncomfortable. If necessary, you can comfort your baby during and after the examination.

How can I prepare for the examinations?

You will be with your baby during the examination but you do not need to prepare anything special. Your baby will need to be undressed for part of the examination, but will be kept warm.

For the six to eight week examination it will be useful for you to think about the growth and development checklist in your baby's child-health record (sometimes known as the 'red book') before talking with your health visitor or doctor.

The checklist asks you to think about a number of questions and discuss them at the 6-8 week examination.

The checklist asks you to think about the following.

• Whether you feel well yourself
• Any worries you have about feeding your baby
• Any concerns you have about your baby's weight gain
• Whether your baby watches your face and follows it with his/her eyes
• Whether your baby turns towards the light
• Whether your baby smiles at you
• Whether you think your baby can hear you
• Whether your baby is startled by loud noises
• Any problems you have looking after your baby
• Whether you have any worries about your baby

What the results may mean for parents and babies

This section contains general information about conditions that may be found by the physical examination. It is not possible to go into detail here about further referrals or treatments in this booklet. If there is a problem, what happens next will depend on what has been found during the examination. The health professional will be able to discuss this with the parent. Most babies will benefit from the treatments available.
As well as an overall physical examination, the following four screening examinations will be carried out.

**Eyes:**
The health professional will examine the baby’s eyes, focusing on how they look and move. If the eye looks cloudy, this may mean the baby has a cataract and this may affect how well the baby can see. Babies who may have problems will be referred to an eye specialist (an ophthalmologist). About two or three in 10,000 babies have eye problems that need treatment.

**Heart:**
A general examination of the baby’s heart is done by listening with a stethoscope. Sometimes murmurs are picked up. This can be worrying for the parent. A murmur is an extra noise made by blood as it passes through the heart. Murmurs are common in babies and do not necessarily mean that there is a heart problem. In nearly all cases the heart is actually normal. If the health professional finds something that suggests there may be a heart problem, another examination and further tests will be arranged. Around one in 200 babies have a heart problem that needs treatment.

**Hips:**
Babies can be born with hip joints that are not formed properly. If untreated this can lead to a limp and joint problems. Babies who could benefit from further investigation may have an ultrasound scan of the hips followed by an appointment with a specialist to check the hips again. About one or two in 1,000 babies have hip problems that need treatment.

**Testicles:**
Baby boys will be checked to make sure their testicles are in the right place. It can take several months for them to drop down into the scrotum. If this does not happen, a specialist may advise a small operation when the boy is one or two years old. About one in 100 baby boys have problems that need treatment.

**What happens after the examinations?**
The health professional who does the examination will discuss the results with you immediately. If the examination shows that everything seems to be all right with your baby, there will be no need for any further action.

The examination may highlight concerns with your baby. If this is the case, the health professional will either ask to see you and your baby again, or will offer you an appointment with a specialist. The specialist will give you a detailed explanation about the concerns identified, any further investigations and possible treatment.

Waiting to see the specialist can be an anxious time. Don’t hesitate to talk to your midwife, GP or health visitor about your concerns.

**Where will the results be recorded?**
The outcome of the examination carried out within the first 72 hours of birth will be recorded in both your maternity notes and in your baby’s child-health record.

The outcome of the six to eight week examination will be recorded in your baby’s child-health record. You need to keep this record safe and take it with you whenever you and your baby see a health professional.