



## Newborns: Bowel Movements and Urination

**Bowel Movements** ~ In the first few days of life your baby will have his first bowel movement, which is often referred to as passing meconium. This thick, dark-green or black substance filled his intestines before birth, and it must be eliminated before normal digestion can take place. Once the meconium is passed, the stools will turn yellow-green. If your baby is breastfed, his stools should

soon resemble light mustard with seed like particles. Until he starts to eat solid foods, the consistency of the stools should be soft, even slightly runny. If he's formula-fed, his stools usually will be tan or yellow in color. They will be firmer than in a baby who is breastfed but no firmer than peanut butter.

Whether breastfed or bottle-fed, if your baby has hard or very dry stools, it may be a sign that he is not getting enough fluid, or that he is losing too much fluid due to illness, fever or heat. Once he has started solids, hard stools might indicate that he's eating too many constipating foods, such as cereal or cow's milk, before his system can handle them. (Whole cow's milk is not recommended for babies under 12 months.)

Keep in mind that occasional variations in color and consistency of the stools are normal. For example, if the digestive process slows down because the baby has had a particularly large amount of cereal that day or foods requiring more effort to digest, the stools may become green; if the baby is given supplemental iron, the stools may turn dark brown. If there is a minor irritation of the anus, streaks of blood may appear on the outside of the stools. However, if there are large amounts of blood, mucus or water in the stool, call your pediatrician immediately. These symptoms may indicate severe diarrhea or an intestinal abnormality.

**Frequency of Bowel Movements** ~ The frequency of bowel movements varies widely from one baby to another. Many pass a stool soon after each feeding. This is a result of the gastrocolic reflex, which causes the digestive system to become active whenever the stomach is filled with food.

By 3 to 6 weeks of age, some breastfed babies have only one bowel movement a week and still are normal. This happens because breast milk leaves very little solid waste to be eliminated from the child's digestive system. Thus, infrequent stools are not a sign of constipation and should not be considered a problem as long as the stools are soft (no firmer than peanut butter), and your infant is otherwise normal, gaining weight steadily and nursing regularly.

If your baby is formula-fed, he should have at least one bowel movement a day. If he has fewer than this and appears to be straining because of hard stools, he may be constipated. Check with your pediatrician for advice on how to handle this problem.

**Urination** ~ Your baby may urinate as often as every one to three hours, or as infrequently as four to six times a day. If she's ill or feverish, or when the weather is extremely hot, her usual output of urine may drop by half and still be normal.

Urination should never be painful. If you notice any signs of distress while your infant is urinating, notify your pediatrician, as this could be a sign of infection or some other problem in the urinary tract. In a healthy child, urine is light- to dark-yellow in color (the darker the color, the more concentrated the urine; the urine will be more concentrated when your child is not drinking a lot of liquid).

Sometimes you'll see a pink stain on the diaper that may be mistaken for blood. But in fact, this stain is usually a sign of highly concentrated urine, which has a pinkish color. As long as the baby is wetting at least four diapers a day, there probably is no cause for concern, but if the pinkish staining persists, consult your pediatrician.

The presence of actual blood in the urine or a bloody spot on the diaper is never normal, and your pediatrician should be notified. It may be due to nothing more serious than a small sore caused by diaper rash, but it also could be a sign of a larger problem. If this bleeding is accompanied by other symptoms, such as abdominal pain or bleeding in other areas, seek medical attention for your baby immediately.

Excerpted from [Caring for Baby and Young Child: Birth to Age 5, Bantam 1999](#)

© Copyright 2000 American Academy of Pediatrics