To our expectant and new parents,

Every new parent faces those desperate moments during sleepless nights. You CAN get yourself and your baby through it without giving in to unsafe practices. If you are struggling with getting your baby to sleep, speak with your pediatrician for safe ideas. This guide will help you make sure your baby is a safe sleeper.

THE ABCs OF SAFE SLEEP

**ALONE:** No blankets, pillows, stuffed toys, bumper pads, mesh bumpers and absolutely no other people in the baby’s sleep space. Do not add anything to the crib or bassinet other than a tightly fitted sheet on a firm crib mattress. The only thing that should be in the crib is your baby and a pacifier. Instead of a blanket, your baby can wear a swaddle until they show signs of attempting to roll. A sleep sack is safe for any age.

**BACK:** Until their first birthday babies should always be put to sleep on their backs for every sleep, by every caregiver. Babies placed to sleep on their backs are much less likely to die of sudden infant death syndrome (SIDS). Your baby’s airway anatomy and the gag reflex will keep them from choking if they spit up. Even babies with gastroesophageal reflux (GERD) should be placed to sleep on their backs on a firm, flat, non-inclined surface. You should always place your baby to sleep on their back, but if your baby is able to roll on their own, then you don’t need to return them to their back.

**CRIB OR BASSINET:** Cribs, portable cribs, bassinets and play yards with firm, flat, non-inclined surfaces meet safety standards for sleep from the Consumer Product Safety Commission (CPSC). However, play yard attachments must be removed and there shouldn’t be anything added to the existing sleep pad. An adult mattress is not safe for a baby until they are two years old. Crib mattresses are specifically manufactured to meet CPSC safety standards. Babies should not sleep in swings, strollers, car seats, loungers, infant slings or with positional pillows. Many baby loungers were recalled after they were linked to infant deaths. It’s not safe to sleep in any of these devices. Positional asphyxiation can happen even when you are watching your baby.* If your baby falls asleep in any of these, place them in their crib, bassinet or play yard as soon as possible.

*Positional asphyxiation: when someone can’t get enough air to breathe due to the positioning of their body. Millions of loungers and inclined sleepers, like the Fisher Price Rock 'n Play, have been recalled after more than 1,000 incidents and 73 infant deaths were linked to the products. They position infants at an angle between 10 and 30 degrees, which can allow a baby’s head to slump forward, blocking airflow and makes it easier for a baby to roll over into the sleeper’s sidewalls or head rest, interfering with breathing. https://www.cpsc.gov/SafeSleep
Bed Sharing: when the baby sleeps on the same surface as an adult and/or another child.

This is not recommended under any circumstances. This is not the same thing as the baby sleeping while someone is holding them—as long as that person is awake.

Room Sharing: when the baby sleeps in the parent’s room in a separate, appropriate sleep space.

This is recommended for at least six months. Room sharing without bed sharing decreases risk of SIDS by as much as 50 percent.

The ABCs of safe sleep can help prevent suffocation and re-breathing. Re-breathing can happen when a baby is sleeping face down or something close to their face is preventing enough air flow. As a result, the baby breathes more carbon dioxide instead of taking in oxygen-rich fresh air. This may be related to raising a baby’s risk of SIDS. The predominant risk factor for sleep-related deaths in infants four to 12 months of age is rolling into objects in the sleep area.

It is not recommended to use weighted blankets or sleepers for infants.

Sleeping on couches and armchairs places infants at extraordinarily high risk for infant death, including SIDS, suffocation through entrapment or wedging between seat cushions, or overlay if another person is also sharing this surface. Be especially vigilant not to fall asleep with your baby on any of these surfaces.

Both maternal smoking during pregnancy and smoke in the infant’s environment after birth are major risk factors for SIDS. This includes bed sharing with a smoker, even when they don’t smoke in bed.

Pacifiers may help reduce the risk of SIDS. If your baby isn’t interested in one or it falls out when they fall asleep it isn’t necessary to put it back in the baby’s mouth.

There is no evidence swaddling reduces the risk of SIDS—but if done correctly, swaddling is safe until the first signs of attempting to roll over. It’s important that the swaddle is snugly wrapped around the arms and chest, still allowing room for hip and knee movement and doesn’t come loose. A “wearable blanket”, or sleep sack, is safe at any age.

Prevent overheating while sleeping, which might happen more often when swaddled. Look for signs of overheating like flushed cheeks, damp hair and rapid breathing. A good rule to follow is to add only one layer more than it would take for an adult to be comfortable in the room. Infants should not sleep with a head covering after their first several hours in the hospital.

Mobiles may be added overhead if securely attached to the side rails of the crib, wall or ceiling. It must be high enough that your baby can’t reach it. It must be removed when your baby is able to get up on their hands and knees, or at five months old, whichever comes first.

Avoid using commercial breathing/heart monitoring devices and other products that claim to prevent SIDS. No direct-to-consumer device is required to adhere to the same regulatory requirements as medical devices and are not to be used to prevent sleep-related deaths. Doctors may prescribe devices for infants with certain medical conditions; these should always be used according to the doctor’s instructions.

At present, there is not a lot of research available about bedside sleepers. These are the bassinet-style sleepers that have one side that lowers, leaving no barrier between your baby and your bed. It’s recommended to keep the sides securely up and the sleeper at least one foot from the bed.

There are no specific CPSC safety standards for in-bed sleepers. This means they are unregulated for safety.

Use a crib manufactured after June 2011 when the current safety standards banning the manufacture or sale of drop-side rail cribs became effective. There is a good chance an older crib no longer meets all the current safety standards, especially if it has a drop-side.

The CPSC passed a rule in June, 2021 that any sleep products for infants under five months (defined as any product with packaging, marketing, or instructions indicating that the product is for sleep or naps or with any images of sleeping infants) must meet existing federal safety standards for cribs, bassinets and play yards.

To help your baby build the upper body strength necessary for certain motor milestones like rolling, supervised, awake tummy time is recommended.

revised 8/2022