

What does 'Safe to Sleep' look like?

Reduce the risk of sudden infant death syndrome (SIDS) and other sleep-related causes of infant death.



- Always place babies on their backs to sleep, for naps and at night, for the entire first year of life.*
- Use a firm sleep surface, such as the original mattress in a safety-approved crib, bassinet or play yard, covered by only a fitted sheet.
- Keep soft objects, toys and loose bedding out of your baby's sleep area.
- Do not smoke while you are pregnant or let anyone smoke around your baby.
- Do not use pillows, blankets, sheepskins or crib bumpers anywhere in your baby's sleep area. This includes mesh-style bumpers.
- Make sure nothing covers your baby's head during sleep.
- Dress your baby in light sleep clothing, such as a one-piece sleeper or sleep sack; do not use a blanket.
- Your baby should not sleep in an adult bed, on a couch or chair — alone, with you, a sibling or anyone else.

*Babies with certain medical conditions may have to sleep on their tummies. Consult with your pediatrician.

For more information on crib safety guidelines, contact the Consumer Product Safety Commission at **(800) 638-2772** or **cpsc.gov**.

Adapted from materials from the Safe to Sleep campaign: safetosleep.nichd.nih.gov



NORTON
Children's

Answers to common questions about SIDS

Q. What is the best way to reduce my baby's risk for SIDS?

A. Placing your baby on his or her back to sleep is the best way to reduce the risk of SIDS.

Q. Will my baby choke if placed on his back to sleep?

A. No. Healthy babies naturally swallow or cough up fluids — it's a reflex all people have. Babies might actually clear such fluids better when on their backs.

Q. What if my baby rolls over during sleep? Do I need to put him in the back sleep position again if this happens?

A. No. Rolling over is an important and natural part of your baby's growth. Most babies start rolling over on their own around 4 to 6 months of age. If your baby rolls over during sleep, you do not need to turn him over onto his back. The important thing is that during the entire first year, your baby start off every sleep time on his back to reduce the risk of SIDS, and that there is no soft, loose bedding in the baby's sleep area.

Q. I placed my babies to sleep on their stomachs, and they are fine. Was that wrong?

A. Prior to 1992, most babies slept on their stomachs — and most of them survived. But many babies died. And when that happened, we did not discuss it. There were no TV public service announcements or stories about the tragic loss of life. We now know that the back sleep position is the safest and lowers the risk of SIDS by half, and we are talking about it! Therefore, placing a baby on his or her back to sleep for every sleep time is the best way to reduce the risk of SIDS.

Q. Are pacifiers OK for babies at sleep time?

A. Yes. Give your baby a dry pacifier that is not attached to a string or snap for naps and at night to reduce the risk of SIDS. But don't force the baby to use it. If the pacifier falls out of your baby's mouth during sleep, there is no need to put it back in. Wait until your baby is used to breastfeeding (3 to 4 weeks) before trying a pacifier.

Q. Is it OK for my baby to sleep in his swing?

A. No. Sitting devices, such as car seats, strollers, swings, infant carriers and infant slings are not recommended for routine sleep. It's important for your baby to sleep flat on his back to keep his airway open and unobstructed.

Q. My baby was born prematurely and was on her stomach most of her time in the hospital. Is it OK to continue placing her on her tummy at sleep time?

A. No. Babies are continuously supervised and monitored in the hospital. All babies, even those born preterm, should be placed on their backs for all sleep times when nearing for discharge in the hospital and always at home for the entire first year of life.

For information about SIDS and the Safe to Sleep campaign, call **(800) 505-CRIB** (2742) or visit nichd.nih.gov/SIDS.