

# Infant Daily Report

## DROP-OFF INFORMATION

Child name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Arrival: \_\_\_\_\_ I last ate at: \_\_\_\_\_ I last woke up at: \_\_\_\_\_ Last diaper change: \_\_\_\_\_

Notes: \_\_\_\_\_

## ABOUT YOUR CHILD'S DAY

Today I: \_\_\_\_\_

Notes: \_\_\_\_\_

## FEEDING

I WAS HUNGRY AT: <i>(time goes here)</i>	I ATE: <i>(what they ate goes here)</i>	I WAS FULL AFTER: <i>(ounces/amount goes here)</i>	NOTES:

## DIAPER CHANGES

TIME:	TYPE <i>(circle)</i> :	INITIALS:
	WET / BM	
	WET / BM	
	WET / BM	
	WET / BM	
	WET / BM	
	WET / BM	

## NAPS

FROM:	UNTIL:

### Strong4Life Tip:

Babies don't need juice. Juice can replace the breastmilk or formula they need to grow, and it can lead to tooth decay.

For feeding tips from the experts at Children's Healthcare of Atlanta, visit [Strong4Life.com](http://Strong4Life.com)

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### Strong4Life Tip:

Even after starting solids, breastmilk or formula provides most of your baby's nutrition. After 6 months, focus on introducing new foods instead of focusing on how much food she eats.

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### Strong4Life Tip:

When your baby is full, he may turn his head away or push away the bottle or spoon. Letting your child decide when he's had enough helps him build a healthy relationship with food.

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### Strong4Life Tip:

As your baby gets older, offer new textures and encourage him to feed himself with his hands or baby utensils. Remember, a messy baby is a learning baby.

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## NAPS

FROM:	UNTIL:

**Strong4Life Tip:**  
 To easily track your child's milestones, download CDC's free Milestone Tracker app or visit [www.cdc.gov/Milestones](http://www.cdc.gov/Milestones).

For feeding tips from the experts at Children's Healthcare of Atlanta, visit [Strong4Life.com](http://Strong4Life.com)

# Infant Developmental Milestones

Use the “Today I” line to communicate healthy child development milestones to support a strong teacher/family connection.

## FEEDING MILESTONE:

- Showed I was hungry by (putting my hands in my mouth, making sucking noises, pointing toward food, trying to climb in my highchair) (SED2, CLL3)
- Showed I was full by (turning my head away, pushing the spoon away, shaking my head “no,” throwing food on the ground) (SED2, CLL3)
- Practiced feeding myself by (helping my teacher hold my bottle, picking up food with my fingers, trying to grab the spoon) (PDM2, PDM6)
- Tried a new food, \_\_\_\_\_, and loved it! (PDM2, SED2, CLL3)
- Tried a new food, \_\_\_\_\_. I didn’t love it this time, but I’ll try it again later (PDM2, SED2, CLL3)
- Explored a food with a new texture, \_\_\_\_\_, and did great chewing and swallowing it (PDM4)
- Practiced drinking water from an open cup (PDM6)

## SOCIAL/EMOTIONAL DEVELOPMENT:

0-2 MONTHS	2-4 MONTHS	4-6 MONTHS	6-9 MONTHS	9 MONTHS-1 YEAR
Calmed myself <i>(by bringing hands to mouth, etc.)</i>	Copied my teacher’s facial expression	Liked looking at myself in the mirror	Was sad when my parent left, so we played _____	Brought my teacher a book I wanted to read
Tried looking for my teacher	Had fun playing _____ with my teacher	Had fun playing _____ with my teacher	Played with my favorite toy, _____	Had fun playing peekaboo or pat-a-cake
Smiled at my teachers	Smiled at my teachers	Smiled when _____ came in the room	Copied my teacher _____ <i>(sound or gesture)</i>	Was sad when my parent left, so we played _____

## MOVEMENT/PHYSICAL DEVELOPMENT:

0-2 MONTHS	2-4 MONTHS	4-6 MONTHS	6-9 MONTHS	9 MONTHS-1 YEAR
Held my head up	Practiced rolling over	Had fun rolling over	Stood while holding on	Pulled up to stand, walked holding on
Started to enjoy tummy time	Did tummy time and pushed up on my elbows	Sat with support	Sat up on my own	Took a few steps
Did tummy time and was able to lift my head up	Followed moving things with eyes from side to side	Rocked back and forth on my hands and knees	Crawled	Stood alone

## LANGUAGE AND COGNITIVE (LEARNING, THINKING, PROBLEM-SOLVING) DEVELOPMENT:

0-2 MONTHS	2-4 MONTHS	4-6 MONTHS	6-9 MONTHS	9 MONTHS-1 YEAR
Made cooing or gurgling sounds	Babbled and copied sounds I heard	Responded to my name being called	Responded when teacher said “no”	Waved “bye-bye”
Turned my head toward teacher or friend when I heard her talking	Reached for a toy	Was jabbering, saying _____	Played peekaboo	Said “mama” or “dada” or “uh-oh”
Fussed to tell my teacher I was done with tummy time	Recognized my teacher from a distance	Was curious to explore _____	Pointed at _____	Had fun making music