Newborns are a vulnerable group with unique health problems. The newborn population is varied and complex. Primary care physicians are the first line of contact for healthy term and late preterm infants at birth, medically complex term, and moderately and extremely preterm infants after discharge from the hospital. The needs of healthy term infants vary from those of term corrected preterm infants and medically complex term infants. Each of these newborn populations have distinctive health issues, requiring timely diagnosis and appropriate medical and/or surgical care and follow-up to ensure optimal outcomes. Many conditions in term infants can be benign and may only require reassurance. However, identifying benign conditions from more serious life-threatening conditions can be challenging due to similarities in symptomatology and lack of diagnostic studies. There are also less complex issues affecting term infants, such as challenges with breast-feeding and gastroesophageal reflux, that can be overwhelming for term corrected preterm infants. The issue of *Pediatric Annals* will provide a comprehensive overview of the evidence and practices surrounding common newborn health problems for the primary care physician.

Dysmorphisms present in newborns can be benign or associated with other serious congenital anomalies. Benign conditions may require periodic follow-up, but mostly parental reassurance. Differentiating benign from complex congenital anomalies is important. In the article, “A Review of Benign Congenital Anomalies,” Drs. Wisdeen Wu and Deepak Kamat provide an overview of common newborn anomalies and management guidelines.

One of the issues affecting newborns is establishing an adequate feeding pattern associated with good growth and subsequently good neurodevelopment. Primary care physicians are the recipient of parental questions regarding feeding and lack of weight gain. In the article, “A Guide to Feeding Term and Preterm Newborns,” Drs. Sarah E. Kolnik and Zeenia C. Billimoria elaborate on the mechanics of feeding, nutrition type and practices, differences in term and preterm feeding, and common feeding challenges.

There are myriad feeding challenges; the most common one being gastroesophageal reflux. Gastroesophageal reflux is benign in most newborns; however, it causes significant anxiety to parents. When pathologic, it can affect newborn growth, ability to feed by mouth, and ability to discharge safely due to risk for aspiration and respiratory distress. In the article, “Assessment and Management of Gastroesophageal Reflux in The Newborn,” Drs. Shilpi Chabra and Eric S. Peeples highlight the differences between gastroesophageal reflux and pathologic gastroesophageal reflux disease, and summarize clinical findings, diagnostic studies, and management strategies.

Sleep is one of the most overlooked components for adequate growth and neurodevelopment. Newborn sleep difficulties are another area of consternation for parents. Sleep patterns vary in term and preterm infants. In the article, “Newborn Sleep: Patterns, Interventions, and Outcomes,” Dr. Theodore V. De Beritto provides a brief review of fetal, preterm, and term infant sleep development, challenges of sleep in the hospital environment, and common interventions for healthy sleep patterns.

Medically complex newborns require support devices and close multidisciplinary monitoring after discharge. This population of infants is on the rise. Many infants are discharged home on respiratory support such as nasal cannula and nasogastric feeds. More and more the burden of re-
Responsibility falls on the primary care physician to aid in the care of these infants. In the article, “Monitoring of Infants Discharged Home with Medical Devices,” Drs. Pradeep Velumula, Sanket Jani, Neelakanta Kanike, and Sanjay Chawla briefly review common medical devices and provide guidance on managing infants with them.

We hope these articles on care of the newborn help provide guidance to the primary care physician on diagnosis and management of common newborn health problems and available resources in the community for the physician, parents, and infant.

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About the Guest Editors

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