A TINYBREATHER GUIDE

FREE GUIDE

The Safe Sleep Checklist

10 things every new parent should know
— *before tonight.*

By **Ajevan**, a new dad · **TinyBreather**

8 PAGES | 5-MINUTE READ

BASED ON AAP 2022 & CDC GUIDANCE

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THE PROMISE

> *Every parent checks their baby's breathing at 3 AM. This checklist won't stop the worry — but it walks you through what the AAP recommends, so you're not guessing.*

— Ajevan, a new dad and founder of TinyBreather

After our daughter was born, I was checking her breathing up to twelve times a night — usually at 3 AM. Nobody handed us a simple, honest plan. This is the list I wish someone had given me that first week home.

WHAT YOU'LL LEARN

1. The 10 safe sleep rules — 5 non-negotiables and 5 more that matter
2. A printable bedtime routine — and what to do when your baby wakes
3. A simple, no-guesswork room setup checklist
4. Five common myths — and what AAP and CDC guidance actually says
5. Your own 7-day sleep log to fill in on screen

This guide offers general educational information based on publicly available AAP (2022) and CDC safe sleep guidance. It is not a substitute for medical advice — always talk to your pediatrician about what's right for your baby. TinyBreather is not affiliated with or endorsed by the AAP or CDC.

THE 10 RULES · PART 1

Five non-negotiables

1

Back Is Best — Always

Every sleep, every nap, every time. Side and stomach sleeping are linked to a higher risk of SIDS (sudden infant death syndrome). Once your baby can roll both ways on their own, you don't need to keep turning them back.

2

The Empty Crib Rule

Soft items and loose bedding raise the risk of suffocation. Keep the crib bare: a firm mattress, a fitted sheet and a sleep sack instead of a blanket. Stop swaddling once baby starts trying to roll; skip anything weighted.

3

Keep the Room Comfortably Cool

Overheating is linked to a higher risk of SIDS. Keep the room comfortable for a lightly dressed adult — many US sources suggest about 68–72°F (20–22°C). Dress baby in no more than one layer more than you'd wear, and use a thermometer rather than guessing.

4

Share a Room, Not a Bed

Room-sharing (same room, separate sleep surface) for at least the first 6 months is linked to a lower risk of SIDS. Bed-sharing raises the risk of SIDS and suffocation, especially with smoking, alcohol, sedating medication or a sofa.

5

A Flat, Firm Surface Only

Soft or inclined surfaces raise the risk of suffocation. Use a crib, bassinet or play yard that meets current safety standards — never a sofa, armchair or soft mattress. If baby falls asleep in a car seat, swing or bouncer, move them to a flat surface as soon as you safely can.

THE 10 RULES · PART 2

...and five more that matter

6

Pacifier at Bedtime

AAP guidance notes that offering a pacifier at sleep times is linked to a lower risk of SIDS. If you're breastfeeding, wait until feeding is going well. If it falls out after baby is asleep, you don't need to put it back in — and never hang it around baby's neck.

7

Breastfeeding, If You're Able

Breastfeeding is linked to a lower risk of SIDS, especially exclusive breastfeeding. It's one factor among many — every baby, breastfed or formula-fed, is safest when the rest of this checklist is followed.

8

No Smoking — Anywhere

Secondhand smoke, including vaping, is one of the strongest risk factors for SIDS. Smoke-free spaces before and after birth both matter — in the home and in the car.

9

Tummy Time When Awake

Supervised tummy time while awake builds neck and shoulder strength — but only when someone is watching. Sleep always happens on the back.

10

If You're Ever Worried

Checking on your baby is normal and doesn't mean something is wrong. If your baby ever seems unresponsive or is struggling to breathe, call 911 right away. If you're otherwise genuinely concerned, don't wait or try to "test" it yourself — check on them directly and call your pediatrician's after-hours line.

THE ROUTINE

The Bedtime Routine

30 min before bed

- Dim the lights, lower your voice
- Warm bath (optional, but it signals sleep)
- Fresh diaper + sleep sack — not a blanket
- Quiet feeding

10 min before bed

- Short story or lullaby
- Place baby in the crib drowsy but awake, on their back
- Say the same phrase every night: “Sleep tight, I love you”
- Leave the room

If baby wakes or cries

- **Pause.** Give it a minute or two — a lot of newborn noise is active sleep, and babies often settle on their own.
- **Assure.** A hand resting gently on baby’s chest or tummy, a quiet shush, the same calm words. Baby stays on their back — no picking up yet.
- **Tend.** Too hot? Too cold? Wet diaper? Hungry? Young babies are often genuinely hungry.
- **Hold.** Pick up, feed if it’s hunger, calm fully, then back in the crib on their back. There’s no failure in this step.

This is a short version of the P.A.T.H. Ladder from The Complete Baby Sleep System. If your baby ever seems unwell, skip the steps and check on them right away.

THE ENVIRONMENT

The Room Setup Checklist

- **Temperature**
  About 68–72°F (20–22°C) — comfortable for a lightly dressed adult. Put the thermometer at crib height.
- **Lighting**
  Blackout curtains for sleep, plus a dim night light for feeds and diaper changes.
- **Sound**
  White noise is optional — some families find it helpful. Keep the machine across the room, at a low volume.
- **Crib**
  Firm, flat mattress with a snug fitted sheet only. Nothing attached to the sides.
- **Clothing**
  A season-appropriate, non-weighted sleep sack. No hats indoors for sleep.
- **Monitor**
  Optional. Keep cords at least 3 feet from the crib. No consumer monitor has been shown to reduce SIDS risk — the safe sleep rules do the protecting.
- **Air**
  A ventilated, smoke-free room, with no strong scents or plug-ins near baby.

> Tip: check the back of your baby's neck. Sweaty means too warm; cool to the touch may mean it's time for another layer. Hands and feet often feel cool — that alone isn't a sign baby is cold.

SET THE RECORD STRAIGHT

Myths Worth Dropping

MYTH

"Babies sleep better on their tummy."

MORE ACCURATE

Back sleeping lowers the risk of SIDS, and most babies get used to it quickly.

MYTH

"A little blanket is fine."

MORE ACCURATE

Loose blankets can cover a baby's face and raise the risk of suffocation. A sleep sack is the safer choice.

MYTH

"My baby hates the crib, so it doesn't apply to us."

MORE ACCURATE

Most babies resist a new sleep surface at first — consistency over several nights usually helps.

MYTH

"We bed-shared with our older child and it was fine."

MORE ACCURATE

Bed-sharing raises the risk of SIDS and suffocation for every baby. Risk is about probability, not any one night, so it's worth reconsidering even if nothing happened before.

MYTH

"Checking on my baby constantly makes me a better parent."

MORE ACCURATE

Occasional checking is completely normal. If it's costing you all your own sleep, that's worth addressing too — for your sake, not just your baby's.

TRACK IT

Your 7-Day Sleep Log

Fillable on screen — tap any cell to type

DAY	BEDTIME	WAKE-UPS	TOTAL SLEEP	ROOM TEMP	NOTES
Mon					
Tue					
Wed					
Thu					
Fri					
Sat					
Sun					

What's next?

You now know the safe sleep rules — that's the biggest thing you can act on tonight. When you're ready for the next step, **The Complete Baby Sleep System** is the full 30-day plan: the complete **P.A.T.H. Ladder** for night wakings, the **Settling Steps** for bedtime (no cry-it-out), age playbooks for 0–12 months, and a toolkit for your own exhaustion.

Read the first 8 pages free **See the full system — $29**

46-page PDF · 138 tap-to-fill fields · 30-day money-back guarantee