

How to choose a pediatrician



Start early, but do not panic if you are late

If you are expecting a baby, it is reasonable to start looking for a pediatrician during pregnancy, often in the second or early third trimester. This gives you time to ask for recommendations, confirm insurance coverage, and schedule a brief prenatal meeting if the practice offers one. Hospitals commonly ask for the baby's pediatrician before discharge, and many newborns need follow-up soon after going home, particularly for weight, feeding, and jaundice assessment.

If your baby has already arrived and you have not chosen a clinician, you still have options. Ask the birth hospital, your obstetric or family medicine clinician, trusted local parents, or your insurance directory for practices accepting newborns. The decision can be refined over time; choosing a pediatrician is not an irreversible commitment. If the first practice does not meet your needs, you can transfer records and establish care elsewhere.

Gather recommendations from people and systems you trust

Personal recommendations are useful because they reveal what a practice is like in real life: how quickly the office responds, whether clinicians explain

decisions clearly, and how families are treated when a child is ill. Ask friends, relatives, neighbors, childbirth educators, lactation professionals, and your own healthcare clinicians. Try to ask specific questions rather than simply, "Do you like them?"

Helpful questions include: Did the pediatrician take feeding concerns seriously? Was the office helpful when your child needed a same-day appointment? Were after-hours calls handled by a clinician, nurse line, or outside triage service? Did you feel pressured, dismissed, or supported during decision-making?

Online reviews can add context, but they should not be your only source. Reviews often emphasize scheduling or billing frustrations rather than clinical quality, and a small number of extreme experiences may not represent the usual standard of care. Use them to identify patterns, not to make a final judgment.

Check credentials, certification, and scope of care

A pediatrician is a physician trained in the medical care of infants, children, and adolescents. Many parents look for board certification, which generally indicates that the physician completed pediatric training and passed a specialty examination, with ongoing requirements for maintaining certification. Some families choose family medicine physicians who care for children and adults; this can also be appropriate, especially when the clinician has strong pediatric experience and access to pediatric referral networks.

Ask whether the clinician or practice is accepting newborns, which hospitals they are affiliated with, and how newborn care is coordinated after delivery. Hospital affiliation may matter if your baby needs inpatient care, readmission for hyperbilirubinemia, evaluation after birth complications, or specialty referrals. Also ask who covers care when your primary pediatrician is away. A well-designed practice should have clear call coverage, shared medical records, and consistent policies among clinicians.

If your baby is expected to have complex needs, such as prematurity, congenital anomalies, genetic conditions, cardiac disease, or feeding difficulties, ask how the practice coordinates with subspecialists. You do not need a pediatrician who personally manages every specialty issue, but you do need

someone comfortable with care coordination and longitudinal follow-up.

Evaluate access: location, hours, urgent visits, and communication

For a newborn, convenience is not superficial; it can directly affect care. A clinic that is difficult to reach may delay visits for feeding concerns, fever, respiratory symptoms, or weight checks. Consider travel time, parking, public transit, stroller access, elevator availability, and whether the office has separate waiting areas or infection-control processes for sick and well children.

Ask practical access questions before committing:

Does the practice offer same-day sick visits for infants?

What happens if your baby develops a fever or breathing concern after closing?

Is there an after-hours pediatric triage line, and who staffs it?

Are weekend or evening appointments available?

Can you schedule visits online or through a patient portal?

Does the practice offer telehealth for infant concerns when clinically appropriate?

How are lab results, newborn screening results, and specialist notes shared?

Telehealth can be helpful for selected follow-up questions, rashes, medication discussions, behavioral concerns, or triage guidance, but it is not a substitute for an in-person examination when a young infant is acutely ill, has respiratory distress, appears dehydrated, or needs weight and hydration assessment. A good practice will be clear about when virtual care is appropriate and when your child needs direct evaluation.

Confirm insurance, billing, and office policies

Before you fall in love with a practice, confirm that it accepts your insurance and that the individual clinician is in network. Ask about newborn enrollment deadlines because babies often must be added to an insurance plan within a specific period after birth. If you have a high-deductible plan, Medicaid, marketplace insurance, or dual coverage, the billing details may affect your out-of-pocket costs.

It is reasonable to ask about copays, billing for prenatal visits, separate charges for screenings, missed appointment policies, vaccine administration fees, and whether lactation or behavioral health services are billed separately. None of these questions should be treated as inappropriate. Transparent billing is part of family-centered pediatric care.

Also review office policies that may affect your relationship: vaccination expectations, antibiotic stewardship, late arrivals, forms for daycare or school, portal messaging, prescription refill timing, and how the practice handles requests for medical advice between visits. You are looking for policies that are evidence-based, consistent, and clearly communicated.

Use the introductory visit to assess fit

Many pediatric practices offer prenatal consultations, open houses, or short introductory visits. This meeting is not a full medical appointment for your baby, but it can help you assess whether the clinician's style matches your needs. Bring a short list rather than trying to cover every possible topic. If you already know that feeding, vaccination, circumcision, sleep, prematurity, or mental health support will be important for your family, ask about those areas directly.

Consider asking:

How soon after hospital discharge should a newborn be seen?

How do you approach weight loss, jaundice, and feeding in the first week?

What is your pediatric vaccine philosophy, and how do you discuss vaccine concerns?

Who answers urgent calls at night?

How do you handle developmental milestone concerns?

When do you refer to pediatric subspecialists?

How do you support parents who are anxious, sleep-deprived, or overwhelmed?

Pay attention not only to the answers but to the interaction. Does the pediatrician explain medical reasoning without condescension? Do they welcome questions? Are they comfortable saying, "I would need to examine the baby" or "Here is when I would want you seen urgently"? Clinical humility and clear boundaries are strengths, not weaknesses.

Look for evidence-based care and respectful shared decision-making

Pediatric care includes preventive medicine, acute illness assessment, developmental surveillance, injury prevention, nutrition guidance, immunizations, and family support. The clinician should be able to discuss benefits, risks, and uncertainties using evidence-based language. For example, vaccine counseling should be medically accurate and aligned with established public health recommendations, while still leaving room for respectful conversation.

Shared decision-making does not mean every medical choice is equally safe. It means the pediatrician explains what is recommended, why it matters, what alternatives exist when appropriate, and which situations require urgent evaluation. This is especially important for newborns because symptoms can be subtle and clinical status can change quickly.

Trust your observations about tone. You may prefer a warm and conversational clinician, a highly detailed one, or someone concise and direct. Any of those styles can work if you feel heard and if the clinician practices careful, current medicine. The goal is not to find someone who always agrees with you; it is to find someone you can trust when the decision is complicated.

Assess the whole practice, not only one doctor

Your experience will depend on more than the physician's personality. Nurses, medical assistants, front-desk staff, billing teams, portal responders, and covering clinicians all shape your baby's care. A thoughtful pediatrician in a disorganized system may still be difficult to rely on during urgent moments.

Notice whether the office seems clean, calm, and developmentally appropriate. Ask how long typical well-child visits last and whether the practice uses standardized screening tools for postpartum depression, developmental delay, autism risk, social needs, or lead exposure when indicated. Ask how immunization records are documented and shared with schools or childcare.

It is also worth asking how the practice handles continuity. Will you usually see the same pediatrician for well visits? If not, is there a team model? Can

clinicians see each other's notes easily? Babies often have frequent visits in the first year, so continuity helps clinicians recognize trends in growth, feeding, and development.

Know when the decision should be revisited

Even after careful selection, a practice may not turn out to be the right fit. Consider reassessing if you repeatedly cannot access care for urgent concerns, receive inconsistent advice without explanation, feel dismissed when reporting significant changes, or cannot get clear information about test results, referrals, or follow-up plans.

Switching pediatricians can feel uncomfortable, but families do it for many valid reasons: relocation, insurance changes, communication mismatch, scheduling barriers, or evolving medical needs. If you transfer care, request medical records, immunization history, growth charts, newborn screening results, hospital discharge paperwork, and specialist notes. A concise summary of your concerns and your baby's medical history can make the first visit with the new clinician more productive.