

PRENATAL LACTATION EDUCATION CHECKLIST- Provider Key

- 1 Human milk is FAR SUPERIOR. Formula is irritating and constipating and causes microscopic bleeding of the gut. There are no studies to prove it is better than cow's milk.
- 2 Evaluate breast. The areola should be soft and pliable and the nipple should become more erect and evert when stimulated. Breasts should be fairly equal in size. Risk factors are previous breast surgery, one breast significantly larger than the other especially if the areola is very large also, and/or inverted nipples. If normal, reassure and educate mom that her breasts are normal and should work well for nursing.
- 3 The short and long-term benefits for the baby. Including less O.M., RSV, URI, SIDS, Diarrhea, DM, non-allergic. Linked to less lymphoma, higher IQ, Chrohn's disease, HTN, Lower Chol, MS. Lowers lower respiratory disease by 80% and O.M. by 60%. Baby much less likely to be hospitalized and if hospitalized will be in fewer days. **Breastfeeding saves lives.** The short and long-term benefits for the mother and father. Includes less breast, uterine, or ovarian cancer. Oxytocin and prolactin play a part in bonding and mood enhancement. Mother with improved weight loss and less osteoporosis. Father saves money and if baby has less illness mom has more time for father. The benefits for society. Environmentally friendly and less medical care costs and sick time usage by parents. No or less bottles to wash or buy. **For mother and baby to receive full benefits of breastfeeding baby must be fully nursed for a minimum of six months The AAP and WHO recommendations are respectively, minimum 1 year and 2 years and beyond.**
- 4 Myths-see handout
- 5 More Myths-see handout
- 6 Diet- assess for History of family food allergies. Proteins most likely to set up an allergic response are egg whites, nuts, fish/seafood, or dairy products. If a family or infant food allergy is identified it should ideally be limited/eliminated for at least six months until baby's gut more mature. Limit OTC meds, caffeine, and alcohol.
- 7 Delay return to work till after the third growth spurt if possible. If must return sooner may suggest to take one day off mid week until after the third growth spurt. Start off pumping twice a day until milk supply fully established. At 3-6 months may be able to decrease to one pumping and then around seven months most moms able to stop pumping. Should just nurse when at home before and after work. Another option is to choose to partially nurse 1-4 times or more a day before and/or after work. **Encourage at least 2 nursings a day.**
- 8 **Safe co-sleeping and nursing slings/carriers encouraged.**
- 9 Breast problems and feeding problems. Discuss proper positioning and latch on as most important to prevent nipple sores. **If it hurts take baby off and reposition.** This is imperative! Engorgement-prevention is the key nurse frequently, if occurs use hot or cold compresses and cabbage leaves. May pump to help relieve. Breast shells if nipples are flattened and baby having difficulty latching on. Discuss treatment and prevention plugged ducts and mastitis. **KEEP NURSING!**

Note: Premature babies are especially at risk if not breastfed. Mom's of premature babies need to be taught about low milk supply and lactation aids. Do not allow the neonatologists or nursing staff to feed the baby with a bottle. Suggest they cup feed the baby when mom is not available. They are operating under the outdated belief (that has been disproven by the research) that it is easier for a preemie to learn to feed from a bottle than the breast. **This is not true and introducing the bottle first at this critical time causes breast refusal and breastfeeding failure.**
- 10 Discuss the changing dynamics- how breastfeeding is consistent with babies development. The third month is the "magic month". The baby will be in some sort of schedule and the baby will have become very efficient at nursing completing most feedings within 20 min or less. Expect that most babies will now nurse less often usually 6-8 times per day. Stooling is much less and one large stool every other day is normal. Mother's weight loss may begin and her breasts will be less swollen and more efficient at making milk. At six months solids introduced and soon breastfeeding will become even more rewarding and mom will have more freedom. **ENCOURAGE Natural WEANING! Remind about the growth spurts.**
- 11 **Baby to abdomen immediately upon delivery and not removed for one hour (or longer) till baby latches on and completes a nursing. Then feed frequently up to 30 times the first day.**
- 12 **Give Handout, "Is my Baby getting enough milk?"** There are over thirty causes of not enough milk it is almost never because the woman's is unable to produce it, so educate them to call and get help if she thinks her milk supply is low. This applies to infants of all ages. Consider use of fenugreek, Motilium (TM), or Reglan (TM). **Caution parents not to test a baby by feeding with a bottle. REMIND ABOUT relactation**-some moms get discouraged during the first few weeks and quit nursing thinking that it will improve the situation only to find out it worsened it. If this happens, mom can restart her milk by nursing or pumping her breasts 8-12 times per day for 5- 45 minutes. The more stimulation her breasts get the faster her milk comes back. It can take from 3 days to 2 weeks to get your milk to return. Discuss advantages of tandem nursing if there is a small child at home.