

# BREASTFEEDING BASICS

## FOR PROVIDERS



### Encourage and Affirm

- Self-efficacy makes all the difference. (Loke & Chan, 2013)
- Most medications and vaccinations are safe for use during breastfeeding, with few exceptions. (ACOG, AAP)
- Interruption of lactation is associated with adverse health outcomes for the woman and her child. (ACOG)
- Obstetric care providers should discuss the medical and nonmedical benefits of breastfeeding with women and families. (Bartick et al, 2017)
- With the proper support, most parents can successfully breastfeed. (Bell, 2017)



### Pumping

- Most families find that double electric pumps are best.
- Encourage parents to contact their insurance company or local WIC to understand their options.
- Encourage parents to unpack and familiarize themselves with their pump before baby arrives.



### Birth

- Refer parents to a hospital that supports breastfeeding.
- Encourage parents to practice skin to skin immediately after birth.
- Stress that baby will be very sleepy for the first few days and may need to be encouraged to stay awake and feed.
- Clarify that 10-12 feedings a day should be the goal, on demand instead of scheduled.



### Latching

- Encourage parents to choose the position that is most comfortable for them.
- Baby should be lined up tummy to tummy with parent, nipple to nose.
- Once aligned, mom should wait for “wiiiiide” open, then push as much nipple as possible towards roof of baby’s mouth.
- Mantra: “If it hurts, ask for help!”



### Colostrum

- Help parents to understand colostrum as a thick, yellow milk that comes out in drops for the first few days.
- Encourage families that although colostrum is small in quantity, it is the perfect first food for baby.
- Share that colostrum is chockful of immune boosting properties and nutrients.
- Discuss newborn tummy size and how every drop counts!
- Share that colostrum is followed by mature milk on day 3-4.
- Prepare parents that breasts will get VERY full once mature milk comes in.
- Encourage parents to Feed, Feed, Feed!



### Hunger signs

- Some common hunger signs to share with parents are:
  - Stirring from sleep
  - Rooting
  - Searching for breast
  - Hands to mouth
- Clarify that if baby is crying, they are well past hunger signs and may need to be calmed to initiate a feed.
- Inform parents that nursing often provides comfort and warmth, in addition to food.





## Dispel Myths

- Explain there is no need to prepare nipples in advance.
- Inform parents that breast size does not impact breastfeeding.
- Make clear that physiological inability to breastfeed is rare.
- Emphasize that breastfeeding is not supposed to hurt.
- Share the health benefits for both mom and baby.
- Clarify that breastfeeding assists in forming \*healthy\* attachment and bonding.



## Self Care

- Help to dispel myths about necessary diets by advising that parents eat when hungry, drink when thirsty, and simply listen to their body.
- Encourage parents to rest whenever they can.
- Share that many parents benefit from a nursing “station” stocked with a comfy seat, water, snacks, and nursing pillow.



## Referrals and Resources

- Encourage families to ask fo help at the first sign of trouble.
- Share resources to help families find a support group (virtual, local, or both!)
- Help families locate community help for after hospital.

### LOCAL LC RESOURCES FOR PARENTS:

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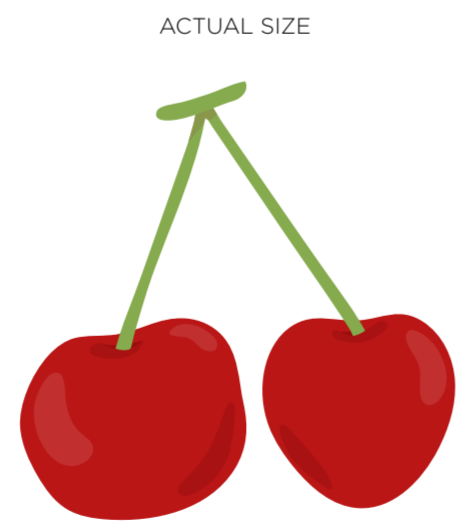
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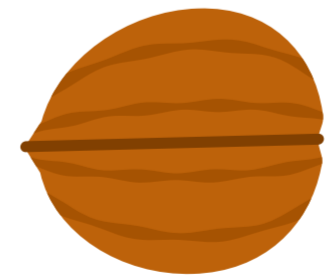
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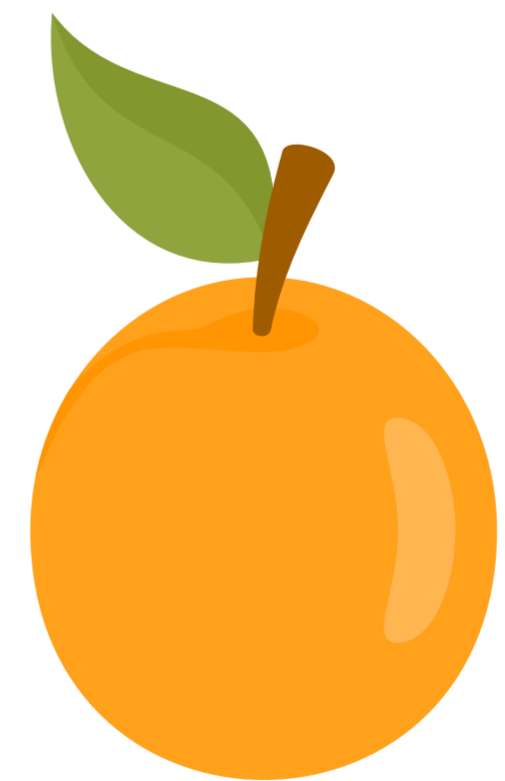
# NEWBORN TUMMY SIZE



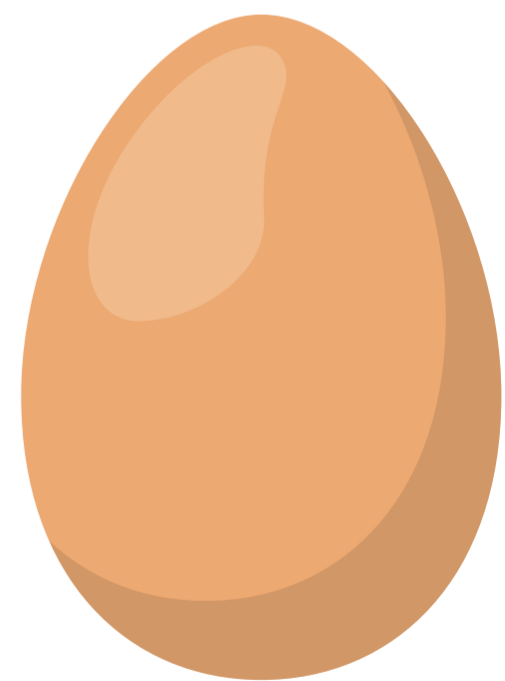
**DAY 1:**  
5-7 ml is about the size of a large marble or a cherry



**DAY 3:**  
22-27 ml is about the size of a ping pong ball or a walnut



**ONE WEEK:**  
45-60 ml is the size of an apricot or plum



**ONE MONTH:**  
80-150 ml is about the size of a large chicken egg