

Provider Information

BF – Breastfeeding

BF-MK MILK INTAKE

OUTCOME: The parent/family will understand the signs of adequate milk intake.

STANDARDS:

1. Explain the feeding duration should be at least 15 minutes on each side, encouraging the baby to nurse longer as the baby desires. Feeding will take less time as the baby grows.
2. Explain the feeding frequency should be an average of every 2–3 hours, 8–12 times in 24 hours in the first weeks. Feeding will spread out as the baby grows.
3. Explain diaper change patterns in the first week beginning with a few diapers each day to at least 6–8 diapers changes in 24 hours by 1 week of age.
4. Explain transition of stool from meconium to transitional stool (brown, mushy) to breastfed stool (yellow with white seeds) when the white, mature milk comes in.

Highlights of Milk Intake

- Provide education on alternative methods for soothing and feeding her baby emphasizing not giving a pacifier to the baby
- The mom should breastfeed her baby on demand or baby-led feeding
- Frequent feeding to helps to assure optimal milk production
- Learn how to know if the baby is getting enough breast milk
- How to keep feeding the baby breast milk if the mother is separated from her infant
- Discuss if the mom plans to exclusively breastfeeding after discharge
- Education to the mother about the advantages of having her infant stay with her in the same room twenty-four hours a day (rooming-in policy.)
- Help the mother to understand that no restrictions should be placed on the frequency or length of feeding,
- Understand that newborns usually feed a minimum of eight times in 24 hours
- Recognize cues that infants use to signal readiness to begin and end feeds
- Understand that physical contact and nourishment are both important

The importance and duration of Breastfeeding:

Exclusive breastfeeding is sufficient to support optimal growth and development for the first 6 months of life. Breastfeeding should begin within 1 hour of birth and is made possible by skin to skin contact between mother and baby immediately after the baby is

born. Breastfeeding mothers should be encouraged to breastfeed exclusively for the first six months of their baby's life and to start feeding their baby solid foods at 6 months while continuing to breastfeed. Breastfeeding should be continued for at least the first year of life and beyond as mutually desired by mother and baby.

How often should the mother breastfeed?

Early and often! Mothers should begin breastfeeding within one hour of birth. Then breastfeed at least 8 to 12 times every 24 hours to make plenty of milk for your baby. This means that in the first few days after birth, your baby will likely need to breastfeed about every hour or two in the daytime and a couple of times at night. Healthy babies develop their own feeding schedules. Follow your baby's cues for when he or she is ready to eat.

How long should feedings be?

Feedings may be 15 to 20 minutes or longer per breast. But there is no set time. Your baby will let you know when he or she is finished. If you are worried that your baby is not eating enough, talk to your baby's doctor.

Learn your baby's hunger signs.

When babies are hungry, they become more alert and active. They may put their hands or fists to their mouths, make sucking motions with their mouth, or turn their heads looking for the breast. If anything touches the baby's cheek – such as a hand – the baby may turn toward the hand, ready to eat. This sign of hunger is called rooting. Offer your breast when your baby shows rooting signs. Crying can be a late sign of hunger, and it may be harder to latch once the baby is upset. Over time, you will be able to learn your baby's cues for when to start feeding.

Follow your baby's lead.

Make sure you are both comfortable and follow your baby's lead after he or she is latched on well. Some babies take both breasts at each feeding. Other babies only take one breast at a feeding. Help your baby finish the first breast, as long as he or she is still sucking and swallowing. This will ensure the baby gets the "hind" milk – the fattier milk at the end of a feeding. Your baby will let go of the breast when he or she is finished and often falls asleep. Offer the other breast if he or she seems to want more.

What to Generally Expect at This Stage

During a growth spurt, a baby will suddenly begin to feed more frequently, perhaps for longer periods of time than he/she had been, and may be very fussy. His/her sleep patterns may also become very erratic (sleeping much more or not sleeping at all).

Generally, the major growth spurts occur at 2, 3, and 6 weeks, then 3 and 6 months. Of course, there will be other times where you might notice other frequency days, and this will actually continue into the teenage years.

Many mothers question whether their babies are feeding more because the baby is truly hungry or simply because they find the nipple soothing.

If the mother feels that her baby has had an excellent feed (you can hear gulping; your breast is much softer after having begun with a very full breast; your baby seems generally relaxed), here is what to do:

- Put her back to the breast, preferably the same one you just used. He/she might have nodded off before being completely finished nursing. (Sometimes it only takes another 5 minutes of a feeding for a baby to be fully satisfied.)
- Take a short walk. If the mother feels confident that the feeding was sufficient, try a short walk. Sometimes babies have a hard time settling in and, when they start to become fussy, most mothers think they are still hungry. The best test is to see what happens when you put him/her in the stroller or in a sling and go outside. If he/she falls asleep immediately (most babies do once they get into fresh air), he/she is not hungry. If he/she screams her way around the block, he/she is.

Common Issues for Mom at This Stage

Quite often, moms feel anxious that their babies are feeding frequently and are fussy because they have a low milk supply. You can distinguish a true growth spurt from an issue with your milk supply by the duration of time this goes on. Growth spurts are temporary, often ending as fast as they began; low milk supply will stick around until you take measures to increase it.

Go with your baby's cues. Nurse frequently. If your breasts feel softer than and not as full as they typically do, this is normal. Soft breasts does not equate to lost milk supply. If the baby is feeding frequently, he is teaching your body to produce more milk. Your body will respond accordingly. If your supply remains low, take measures to increase it immediately.

Common Issues for Baby at This Stage

Fussiness is the most noticeable issue. A mom's gut response is to feed because he/she knows that will have the most soothing effect. If the baby is fed frequently during this stage, the fussiness may subside. In addition, if sleep patterns are disrupted, the baby may be harder to relax or settle because he/she is overtired. It may seem like an endless cycle at a certain point, but stay calm and focused on giving the baby what he/she needs and this stage.

Breastfeeding Stages	
Day 3	<p>Your baby is feeding frequently and for longer periods of time. Sore nipples continue to be the most common issue in the first three days postpartum. At this stage, even with a properly latched baby, nipple sensitivity is still prevalent because of postpartum hormonal changes. However, if nipples are cracked, bleeding, or blistering, the latch-on needs help. Contact a healthcare provider immediately.</p> <p>Some moms also find that their milk has started to transition from colostrum to transitional milk by Day 3. They often feel a heaviness to their breasts, which indicates that their milk is starting to "come in." Feeding frequently will combat any discomfort. with frequent feedings, you can avoid severe engorgement.</p>

	<p>Jaundice is common in breastfed babies. However, by breastfeeding frequently (at least 8 to 10 times a day) in the first 3 days of life, you can greatly reduce the chances that your baby will require higher intervention, such as phototherapy (going under bilirubin lights.)</p>
<p>First 2 weeks</p>	<p>The baby should be waking every 2 to 3 hours to feed, with the feedings lasting anywhere from 15 minutes to almost an hour. Sleep patterns will vary, but many babies -- when fed frequently throughout the day -- may give their parents a good 4 to 5 hours of sleep at night. Babies should also be back to, or have surpassed, their birth weight at this stage.</p> <p>One of the most common complaints from new mothers at this stage is that their baby is feeding too frequently. If this is the case, ensure that you are finishing one breast before offering the other. This way, you can be sure that your baby is getting to the rich, fatty hindmilk, which should hold him/her for a longer time in between feedings. This will also make a difference if the baby has been having problems with weight gain.</p> <p>Along the same lines, if your baby is feeding for over an hour and never seems satisfied, your milk supply should be assessed by your physician.</p> <p>At this stage, the baby should be waking on their own, every 2 to 3 hours, to feed. If his/her weight gain is adequate, urination and bowel movements are normal, and there is no evidence of jaundice, it is not necessary to wake the baby up. Babies begin to learn sleep/wake rhythms very early on.</p> <p>By this point, your milk should be in and well established. Your breasts are stimulated because the baby is feeding every 2 to 3 hours. There may actually be times where you feel you cannot hold out until the next feeding because you are so full. This is very normal and, over time, your breasts will get back to their pre-pregnancy shape and size.</p> <p>If baby is not having at least 6 wet diapers and 3 stools in 24 hours, make sure to wake baby to feed every 3 hours and call your baby's healthcare provider. Stools should be changing from black, tarry, and sticky to yellow, curdy and liquidy.</p>
<p>3 weeks to 6 months</p>	<p>For most mothers and babies, breastfeeding settles into a comfortable pattern now. Do not be tempted to "schedule" the feedings – baby will do this for you.</p> <p>Continue to "drain" at least one breast very well at each feeding. If baby will not do this, use a pump to help "drain" each breast at least once a day.</p> <p>Babies get very adept at latching. Some mothers may introduce a bottle with a slow flow nipple and occasionally use it when they must be away from baby. Mothers who are returning to work may gradually start to stockpile some milk.</p>

	Some babies change their stooling pattern around 6 weeks of age; they may start to stool less frequently, however, the consistency of their stools should be the same.
At 6 months	<p>Around 6 months of age, most babies will show an interest in solid foods. (Some physicians may recommend that you delay solids if you have a strong family history of food allergies.)</p> <p>Breast milk is still the most important nutrient for a baby. However, babies have a need for additional nutrients as well, including more iron, at this age. Introduce foods gradually to your baby's diet. Whenever possible, nurse before feeding solids.</p> <p>Some babies like baby food, prepared commercially or at home in a blender. Other babies prefer appropriate finger foods instead.</p> <p>Many babies nurse very quickly at this age (3-5 minutes at the breast) and may become very distracted at the breast. You may find it easier to nurse in settings that are more private.</p> <p>Mastitis and yeast are still possibilities, although less common.</p> <p>Most babies, unless they have a food sensitivity, have outgrown their fussiness by now.</p>
At 1 Year	<p>Many mothers continue to breastfeed beyond 12 months, even though they may have planned to stop by one year.</p> <p>Mothers may continue to breastfeed beyond 12 months, for as long as mother and baby want to continue.</p> <p>Most babies nurse infrequently at this age - only once or twice a day. Others may wish to nurse more often as they begin to explore and their world expands.</p> <p>Ideally, a baby will wean gradually as they are ready to let go of breastfeeding. If a mother initiates weaning, it is recommended that it be done gradually in order to avoid mastitis or engorgement.</p>

Click here for a Patient Education Handout for the mother on [Milk Intake during breastfeeding](#).

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