## CENTER A Division of Kids First Pediatric Partners Katherine Shepherd, MD IBCLC • Stephanie Brennan, CFNP IBCLC Betsy Schorsch, RN IBCLC • Kasia Ceglinski, RN IBCLC • Yael Cohen, RN CBFS, IB per

Katherine Shepherd, MD IBCLC • Stephanie Brennan, CFNP IBCLC Betsy Schorsch, RN IBCLC • Kasia Ceglinski, RN IBCLC • Yael Cohen, RN CBFS, IBCLC pending

## **FEEDING PLAN**

Date:				
Mother's Name:		Baby's Name:		
Reason: O Jaundice	-	<ul> <li>Low Milk Supply</li> <li>Engorgement</li> </ul>	<ul> <li>Tongue Tie</li> </ul>	<ul> <li>Latching Difficulties</li> </ul>
2 0 1 0 1 0 1 0	er the breast Skin to skin At each feeding Every fee With nipple shield Breast rest	d		
	Attempt the latch O No more than a few minutes each side			
0 ( 0 ( 0 / 0	<ul> <li>Nurse the baby</li> <li>On one side</li> <li>On both sides</li> <li>As long as he/she desires</li> <li>For minutes</li> <li>Use breast compressions with feeding</li> </ul>			
0 /	oplementing After all feeds f not settled with breas EBM + supplement = _	tfeed ml per feeding		
\ 0 ) 0   0   0   0   0	<ul> <li>Pumping</li> <li>At least 8 times per day</li> <li>Only if feeding is less than a fair breastfeed</li> <li>Do insurance pumping times/24 hours</li> <li>Pump for 15 minutes double</li> <li>Power Pumping- see handout</li> <li>Other</li> </ul>			
0	actagogues ⁄lore Milk Plus- use as <sup>-</sup> enugreek 500mg, 2-4	directed capsules 3 times per da	ay with meals	



4709 Golf Rd., Ste. 1250, Skokie, IL 60645 847.676.5394 • www.kidsfirstpediatricpartners.com Next Appointment: