

FEEDING PLAN

Date: _____

Mother's Name: _____ Baby's Name: _____

- Reason: Weight Loss Low Milk Supply Tongue Tie Latching Difficulties
 Jaundice Sore Nipples Engorgement

1. Offer the breast
 - Skin to skin
 - At each feeding
 - Every _____ feed
 - With nipple shield
 - Breast rest
2. Attempt the latch
 - No more than a few minutes each side
3. Nurse the baby
 - On one side
 - On both sides
 - As long as he/she desires
 - For _____ minutes
 - Use breast compressions with feeding
4. Supplementing
 - After all feeds
 - If not settled with breastfeed
 - EBM + supplement = _____ ml per feeding
5. Pumping
 - At least 8 times per day
 - Only if feeding is less than a fair breastfeed
 - Do insurance pumping _____ times/24 hours
 - Pump for 15 minutes double
 - Power Pumping- see handout
 - Other
6. Galactagogues
 - More Milk Plus- use as directed
 - Fenugreek 500mg, 2-4 capsules 3 times per day with meals