

Script for Helping mothers with breastfeeding

Mothers Concern	Reason	What you can say	Teaching opportunities
<p>I'm afraid my baby isn't getting enough nourishment from me.</p> <p>My baby doesn't seem satisfied after breastfeeding.</p> <p>My baby is fussy and nothing helps.</p> <p>My baby seems hungry all the time.</p> <p>I couldn't breastfeed with my last baby either.</p>	<p>Worried about baby's nutrition or adequacy of colostrum</p> <p>Perceived inadequate milk supply</p> <p>Unsure of ability to breast feeding</p>	<p>That's great that you want to breastfeed! By breastfeeding you are giving your baby the best start in life.</p> <p>Did you know that a newborn's stomach only holds about a teaspoon at a time for the first couple of days?</p> <p>Your breastmilk is very easily and quickly digested- it is perfect for your baby's digestion.</p> <p>Even one bottle can affect the way a newborn organizes its suck.</p> <p>Did you know that giving the baby formula can reduce your milk supply? Your milk supply develops according to your baby's needs – if baby doesn't breastfeed, your milk supply will be less.</p> <p>Breastfeeding helps your body know to produce milk and helps your milk supply develop for what your baby's needs. If you use bottles now, your body will think there is no baby- you may lose your milk and you may not be able to breastfeed at all after a short time.</p> <p>Do you know how to tell if your baby is getting enough milk?</p>	<ul style="list-style-type: none"> ▪ Reassurance, assistance with breastfeeding technique, & education re: physiology of breastfeeding ▪ Negative effects on baby of giving formula: reduced milk supply, nipple confusion, baby won't get benefits of breastfeeding. ▪ Process of milk production: Normally, the amount of milk produced is minimal for the first 1 to 2 days' postpartum, but increases dramatically by 2–3 days' postpartum as lactogenesis occurs in response to drop in progesterone after delivery ▪ Normal feeding patterns of infant, frequency and duration of feeding: irregular patter of feeding (cluster feeding) is normal; babies don't eat on schedule. (2. p160) ▪ Assist with proper latch on and position: Signs of effective latch: wide angled mouth opening, chin deep into breast-head tilted back, latched behind base of nipple, lips flanged back, tongue visible under areola, gliding jaw movements, rhythmic sucking bursts with swallows ▪ How to observe baby for adequate intake: audible swallows, at least 6 urinations/day and 3-4 stools /day by 4th day of life, yellow bowel movements by day 5, and regain of birth weight by 10-14 days ▪ Assist with breast pumping for each feeding that baby is supplemented with formula to stimulate production and provide expressed breast milk ▪ No weight gain or up to 7% weight loss by 5 days of age may be normal ▪ Rest as much as possible when baby sleep
<p>I'm having trouble breastfeeding. I'm ready to give a bottle of formula.</p>	<p>Challenging – pain, discomfort, lack of confidence or knowledge.</p>	<p>I hear you saying that breastfeeding has been a challenge. Many moms I talk with have felt the same way – you're not alone. I want to do what I can to help you feel better and meet your goals.</p>	<p>Being uncertain is normal. Let mother know there are people and places to get more information. Provide reassurance and praise.</p>

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I don't think I'm making enough milk.	Perceived insufficient supply.	Many mothers have that concern when they first start to breastfeed, but their supply turns out to be fine. Can you tell me why you might think you aren't making enough milk? (Might need to move to another box based on answer)	Education regarding normal stages of milk production (colostrum to transitional to mature milk) and normal physiologic amounts Education on growth spurts, feeding frequency, 8-12 feed/day
I can't breastfeed because of the shape and/or size of my nipples. (Flat or inverted)	Anxiety over breast feeding Unsure of ability to breast feed	Your baby knows no other shape or size. Let's try pumping for a few minutes before you breastfeed– it may make it easier for your baby to latch on.	<ul style="list-style-type: none"> ▪ Anatomy of breast with deep latch techniques. ▪ Shells, pre-pump for breastfeeding ▪ Lactation referral
My baby doesn't like my breasts. I'm not good at this.	Perceived or actual difficulty in establishing breastfeeding	That's great that you want to breastfeed! By breastfeeding you are giving your baby the best start in life. Did you know that newborns often sleep a lot in the first few days? Offer the breast when baby is awake and pump every 2-3 hours if baby is not breastfeeding after 24 hours. Skin-to-skin between feedings or at feeding time may help initiate feeding behaviors; look for feeding cues within 45 minutes of skin-to-skin.	<ul style="list-style-type: none"> ▪ How to read feeding cues: increased alertness, physical activity, mouthing, rooting, sucking movements or sounds, rapid eye movements, cooing or sighing, fussiness. Crying is a late indicator of hunger. ▪ Process of milk production: ▪ When to worry about adequate intake: ▪ Normal feeding patterns of infant: Observe positioning of baby during a feeding – look for ways to improve positioning to help with latch.
My nipples are sore.	Anxiety over breast feeding Reduced pain tolerance Unsure of ability	If the baby is not latching on correctly it can make your nipples sore – let's evaluate the latch-on with the next breastfeeding	<ul style="list-style-type: none"> ▪ Appropriate latch and positioning of infant. ▪ Correct detach from breast post feed or to reposition ▪ Care of breast / nipple i.e. shells, colostrum, lanolin, gel pads

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<p>I'm really tired and formula is just as good as breast milk.</p>	<p>Unaware that giving formula disrupts the ability to establish and maintain an adequate milk supply.</p>	<p>Using the bottle now may make it hard for your baby to breastfeed because he may get confused between the hard bottle nipple, and your own soft warm nipple. Using the bottle now may cause you to have breast problems including engorgement and infections. It might seem like you'll never sleep again if you keep breastfeeding, but you will. You won't need to get up to prepare bottles in the middle of the night if you can learn to breastfeed comfortably! We can work on a plan to get you more rest during the day so you have the energy to feed at night.</p> <p>Breast milk is better than formula because it has been shown that BF babies have better immunity protection and developmental outcomes, less infections, less SIDS in the first year, less diabetes, overweight, obesity, high cholesterol and asthma as older children or adults than babies who are not breastfed.</p>	<ul style="list-style-type: none"> ▪ Importance of establishing a milk supply and the factors involved in establishing a milk supply: system of supply and demand → if baby isn't demanding/ breastfeeding, milk supply decreases ▪ Process of milk making production and importance of having the baby nurse. ▪ Alternative positioning techniques for increased comfort. ▪ "Supplementation can prevent the establishment of maternal milk supply, have adverse effects on breastfeeding, alter infant bowel flora, sensitize the infant to allergens & interfere with maternal-infant bonding."
<p>My baby won't wake up to breastfeed.</p> <p>My baby falls asleep when feeding and then he's hungry again.</p>	<p>Fear baby may be starving</p>	<p>I can see that you are concerned about your baby, as you have been told he needs to eat very often.</p> <p>Breastfeeding can be very relaxing for baby. Can I show you some ways to keep baby alert at the breast?</p>	<p>Education regarding normal newborn sleep patterns. Normal newborn breastfeeding patterns, cluster feeds, etc. We can put your baby skin to skin and see if being near the "cafeteria" will interest him in nursing, even if he's asleep.</p> <p>Feed baby undressed, tickle baby's feet and talk to baby while feeding. Gentle touches remind baby that they are feeding. Breast massage every so often to help with milk flow.</p>

Teaching Points to Use with Mothers Requesting Formula by Jackie Kampp, MSN, RN, FNP-S Jeanette Panchula, BSW, PHN, RN, IBCLC

Sample Script for Nurses to Educate Mothers About Supplementation Document by Mary Sullivan with collaboration from Donna Yukhiro, Wendy Fisher and Bonnie Henson,