



Breast Feeding Tips

Procedure/Treatment/Home Care
Si usted desea esta información en español,
por favor pídasela a su enfermero o doctor.

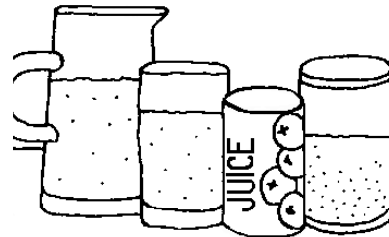
#248

Name of Child: _____ Date: _____

Breast Feeding Tips

To get enough milk

- Drink eight 8-ounce glasses of liquids every day, such as juice, water, and milk.
- Eat a well-balanced diet, including five fresh fruits and vegetables every day. Don't eat many snacks and desserts that have a lot of sugar and fat. They fill you up so you don't have room for healthy foods.
- The best way to get your body to make more milk is with baby sucking. For the first few weeks, nurse your baby every 8 to 12 times every 24 hours.
- Start feeding with the breast that you left off with at the last feeding. If last time you did the right breast, then left, this time do the left breast, then right.
- When the baby stops nursing on one breast, switch to the other side. It's best if the baby is on the first breast for more than 10 minutes.
- After your baby gets enough milk, he or she may just need to suck for a while.



**Drink plenty of liquids every day,
such as juice, water, and milk.**



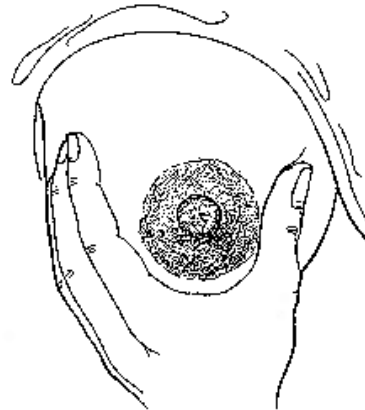
**Take your time nursing.
Put your feet up, relax, enjoy
and cuddle your baby.**

To keep getting milk

- Nurse your baby every time he or she wants to suck. The more often your baby nurses, the more milk you make.
- Drink plenty of liquids every day, such as juice, water, and milk.
- Offer your baby the second breast at each feeding. Sometimes your baby will take it, sometimes your baby may not.
- Eat a well-balanced diet, including five fresh fruits and vegetables every day.
- Get enough rest. Take a nap when your baby naps.
- Take your time nursing. Put your feet up, relax, enjoy and cuddle your baby. If you try to make your baby nurse in a hurry, you might make less milk.
- To make more milk, nurse more often or longer.

To help your baby latch on

- Gently squeeze some milk out of your breast with your hand before you put your baby to your breast. Your baby will taste it right away, and want to suck.
- If your breast is full, use your hand to hold it away from your baby's nose. When your baby is sucking, the tip of the nose should touch your breast. If your baby's nose is covered, he or she may pull away to get air. It might look like your baby doesn't want to suck, but your baby wants to suck and breathe!
- If your baby falls asleep before he or she is done nursing, gently wake your baby up. You may move his or her feet, or burp your baby. If your baby stays asleep, you may need to express your milk from that breast, so you'll keep making milk.
- If your baby seems to not like one breast, start nursing on that side when your baby is calm, awake, and hungry. When your baby looks for something to suck on, it is an early sign that he or she is hungry. Crying babies are not as patient. In time, your baby will learn to like both breasts.



Gently squeeze some milk out of your breast with your hand before you put your baby to your breast.

Help for sore nipples

- If your nipples are tender, expose them to air. Wear a blouse that is soft and loose.
- It is easier on your nipples to nurse every 2 to 3 hours, than to nurse every 4 to 5 hours. If you wait too long, your breasts will get too full and your baby will be so hungry he or she will suck harder.
- Soap can dry your nipples and may make them crack. Wash your nipples with clear water. Put breast milk on your nipples and let them air dry.
- Use a mild ointment. A thin layer of pure lanolin can be left on while your baby nurses. (Lanolin is made from sheep's wool, so do not use it if you are allergic to wool.) If you want to use something else, ask your doctor or breast feeding specialist, first.
- Don't use bra pads that are coated with plastic. Plastic keeps air out and moisture in, which can make your nipples more sore.
- If your baby has a mouth infection, called thrush, it can make your nipples sore. If you see white patches in your baby's mouth, call your doctor for medicine. Thrush is a common infection, and not serious. Both mom and baby should be treated.
- Your nipples may be tender for the first minute or two of nursing. They may be tender for the first week. If your nipples are sore after the first week of nursing, tell your breast feeding specialist or doctor.

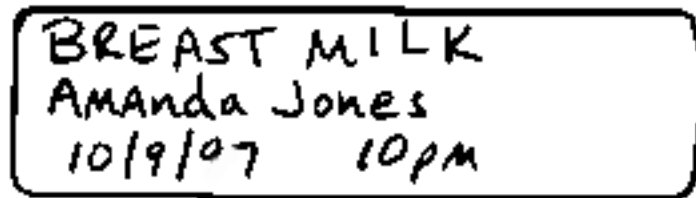
Using bottles of breast milk

- If you will ever be away from your baby at nursing time, you will need to pump your milk so your baby can take it from a bottle. It is best if you wait until your baby is 3 weeks old and feeding well at the breast before you offer him or her a bottle.
- You can collect breast milk by hand expression or pump.
 - You can store it in the refrigerator for up to 48 hours.
 - You can freeze it for up to 3 months in a refrigerator freezer.
 - You can freeze it for up to 6 months in a chest freezer.
- Before you collect breast milk, wash your hands with soap and water.
- Store breast milk in plastic containers.
- Label each bottle "breast milk," with the date you pumped it.
- Freeze only 2 or 3 ounces in a container. If your baby is hungry, you can always use more than one bottle.
- Thawed breast milk can be kept in the refrigerator for 24 hours. If it has been in

the refrigerator for more than 24 hours, throw it out. Do not refreeze it.

- To warm milk for a feeding, heat a cup of water on the stove and take it off the heat. Put the bottle in the warm water until

the milk is room temperature. Never microwave breast milk. Microwaved milk can easily burn a baby's mouth. Microwaves do not heat liquids up evenly, so part can be cool while another part in the same bottle can be very hot. Milk can also lose some healthful qualities when it is microwaved. Feed the warmed milk to your baby within one hour. Throw away any warmed milk your baby does not take.



**Label each bag "breast milk,"
with the date you pumped it.**

Other tips

- Your baby should have two or more stools a day. Babies 4 to 6 weeks old may have fewer stools. They may only have a bowel movement once every 5 days. If the stool is loose, they are not constipated.
- On a baby's second day of life, he or she should have 3 wet diapers.
- By the time your baby is 5 days old, he or she should have 6 to 8 wet diapers each day.
- Breast milk is perfect for your baby. A normal, healthy, full term baby who is breast fed does not need solids or other extras until about 5 or 6 months of age. (Some of your friends and relatives may not know this, and may tell you breast milk is not enough for your baby. Smile, nod, be nice to them, and breast feed your baby anyway.)



**Breast milk is
perfect for your baby.**

If you want to learn more about breast feeding, here are some other booklets we have. If you want any of them, ask your nurse or doctor:

- Breast Feeding Your Baby (354)
- How to Make More Breast Milk (499)
- What to Eat When You Breast Feed (490)

- How to Use the Breast Pump (60)
- How to Handle and Store Breast Milk (339)
- Is Your Breastfed Baby Getting Enough to Eat? (439)

Now that you've read this:

- Tell your nurse or doctor what you will do differently, now that you have read these breast feeding tips. (Check when done.)



If you have any questions or concerns,

- call your child's doctor or call _____

If you want to know more about child health and illness,
visit our library at The Emily Center at Phoenix Children's Hospital
1919 East Thomas Road
Phoenix, AZ 85016
602-546-1400
www.phoenixchildrenshospital.com

Disclaimer

The information provided at this site is intended to be general information, and is provided for educational purposes only. It is not intended to take the place of examination, treatment, or consultation with a physician. Phoenix Children's Hospital urges you to contact your physician with any questions you may have about a medical condition.

Thursday, November 6, 2008 • DRAFT in family review
#248 • Written by Nancy Brown, RN • Illustrated by Dennis Swain
This handout is also available in Spanish as #762/248s



Name of Health Care Provider: _____ Number: 248
For office use: Date returned: _____ db nb

Family Review of Handout

Health care providers: Please teach families with this handout.

Families: Please let us know what you think of this handout.

Would you say this handout is hard to read? Yes No

easy to read? Yes No

Please circle the parts of the handout that were hard to understand.

Would you say this handout is interesting to read? Yes No

Why or why not?

Would you do anything differently after reading
this handout? Yes No

If yes, what?

After reading this handout, do you have any
questions about the subject? Yes No

If yes, what?

Is there anything you don't like about the drawings?

Yes No

If yes, what?

What changes would you make in this handout to make it better or easier to understand?

Please return your review of this handout to your nurse or doctor or send it to the address below.

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Thank you for helping us!