

# SMART PLAN FOR BREASTFEEDING YOUR BABY

Take a breastfeeding class to learn how to get breastfeeding off to a great start. **Ask your nurse for help with early feedings.** To support your breastfeeding goals, the nurses at FHN Memorial Hospital Birthing Center have taken 15 hours of additional training to assist in your breastfeeding success.

## FOLLOW THESE STEPS FOR SUCCESSFUL BREASTFEEDING:

- Watch the video “A Mother’s Touch: Breastfeeding in the first hour”  
<https://med.stanford.edu/newborns/professional-education/breastfeeding/breastfeeding-in-the-first-hour.html>
- Babies are born with reflexes that help them learn to breastfeed.
- Feed your baby as soon after birth as possible! Try to breastfeed your baby within 30 minutes following a vaginal birth or in the recovery room following a cesarean delivery, and before the baby’s bath. Your breasts first make colostrum: rich, concentrated, yellow or clear drops of food perfectly designed to nourish baby, and to protect and coat their intestines. Colostrum is released when they suck, even if you don’t see it! Ask your nurse or Lactation Consultant to show you how to hand express a few drops onto baby’s lips to start them off right.
- Spend time skin-to-skin with your baby before and between feedings.
- Breastfed babies feed 8-12 times over 24 hours, which is about every 1-3 hours. Let your baby breastfeed as often and as long as they continue to suck actively on the first breast, then offer the other breast. Newborns feed often through the night because they are naturally more awake at night. Ask your nurse for help getting the baby to latch.

## POSITIONING AND ATTACHMENT OF THE BREAST

- There are many ways to hold your baby when breastfeeding. You can feed your baby sitting up or laying down. Be sure you are comfortable and in a well-supported position.
- Your baby should be facing you, tummy to tummy.
- You need to hold your baby close, so they can get a comfortable, deep latch.
- The baby should have more than the nipple in his or her mouth.
- Listen for baby’s swallows.
- With practice, breastfeeding gets easier.
- If you have pain or other difficulties, ask for help from your nurse or Lactation Consultant.
- Proper positioning and attachment to the breast will:
  - make breastfeeding more comfortable.
  - prevent sore nipples.
  - lessen the chance of engorgement.
- Help your baby get more milk, which means they will grow and develop properly. Relax and enjoy this close time with your baby.



## “MOMMY, PLEASE FEED ME ON DEMAND WHEN YOU SEE ME...”

- Dreaming of eating in my sleep
- Small body movements or sounds or stirring in my sleep
- Turning head toward the chest of the person holding me
- Bumping head on the person holding me
- Opening my mouth
- Putting my hand to my mouth

## IF I AM CRYING, I AM REALLY HUNGRY.

- Crying is the last sign of hunger; your baby will need to be calmed down before they will be able to latch effectively and breastfed.

## WHEN YOU FEED YOUR BABY ON DEMAND

- You will make all the milk your baby will need.
- Your baby's hunger and thirst will be satisfied.
- Your baby's needs will be met and both mom and baby will be calmer.
- Your baby will gain weight well and have fewer digestive problems.
- Your baby will know you are there when they need you and will feel protected.

## A NOTE ABOUT PACIFIER OR FORMULA USE IN THE EARLY DAYS OF BREASTFEEDING

- When the newborn roots, sucks on their hands or fists and/or fusses, they are exhibiting feeding cues and need to be fed. When the baby receives a pacifier rather than nursing during the first few weeks, they do not receive the calories needed to regain the weight lost after birth. Newborns need milk to stimulate bowel movements and decrease the development of jaundice.
- Babies become easily confused and have trouble latching on when bottles are given the first week. Just one bottle of formula changes the digestive tract establishment of good bacteria that can protect your baby from disease. Bottle feeding also interferes with latching-on. The latch-on to your breast is completely different than the baby's sucking from a bottle. Let them learn from you first.

- Research has shown that breastfed infants who use a pacifier in the first month of life breastfeed for a shorter period of time. The use of a pacifier has been associated with a lower milk supply. Engorgement and sore nipples are also more common if the infant uses a pacifier in the early weeks of life.
- In 2005, the American Academy of Pediatrics recommended the use of pacifiers during sleep as it was thought that it might decrease the risk of SIDS. Specifically, they stated:
  - "The pacifier should be used when placing the infant down for sleep and not be reinserted once the infant falls asleep. If the infant refuses the pacifier, he or she should not be forced to take it."
  - Pacifiers should not be coated in any sweet solution.
  - Pacifiers should be cleaned often and replaced regularly.
- If you choose to use a pacifier when you are "nursed out," then hold your baby close to you while you give it for a short period of time rather than simply using it to get them to sleep while they are in a crib or bassinet. Be careful that you do not become dependent on the use of the pacifier to keep your baby from expressing their feelings.

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