

# BREASTFEEDING BASICS

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## **BREASTFEEDING 101**

Congratulations on your new baby! We hope the following introduction to breastfeeding will help you and your infant's transition to this wonderful new stage in life.

### **Getting Started**

- Find a comfortable position so your body can relax. Use lots of pillows or a breastfeeding pillow to help support the baby and yourself.
- Hold your baby so he or she faces you (tummy to tummy) or do football position supporting the baby's head and allowing the rest of the baby's body to be tucked under your arm, hold your breast with your hand shaped in the letter "C."
- Tickle your baby's lower lip so he or she opens his or her mouth wide.
- Place your nipple and areola into his or her mouth as you pull him or her towards you.
- Your baby will begin to suck.
- If your baby is latched on properly, the bottom of his or her ear lobes will move a bit and his/her jaw will go up and down as he/she sucks and swallows. You should also make sure his/her lips are curled outward like a fish mouth. You should not be in pain.
- To take your baby off the breast, put your finger towards the corner of his or her mouth and "break the suction" as you push inward toward your breast and pull your baby away.

### **Feeding Schedule**

- Demand Feeding: Until your milk supply is well-established (usually 4-6 weeks), nurse your infant whenever he or she cries or seems hungry. We recommend 8-12 feeds in 24 hours.
- Signs of hunger: increased alertness or activity, opening the mouth frequently, putting his/her fingers in their mouth and rooting.
- After the first 4 weeks, babies receive adequate breast milk by nursing every 1- 3 hours.
- Rock your baby or carry him/her in a front pack or sling to soothe him between feeds but if he/she acts hungry after 1-1/2 hours feed him/her again. He/she will taper the frequency of the feeds as he/she grows.
- During the day, wake your baby up if it has been 3 hours since the last feed.
- During the night, allow your baby to sleep 3 hours for the first few week or so. Once 4-6 weeks 4 hours is OK.
- Newborns need to nurse 8 or more times per day in order to gain adequate weight.

### **Feeding Duration**

- Nurse your baby for 10-20 minutes each breast.
- Burp your baby in between switching breasts and at the end of the feeding.
- Alternate which breast you start with each time.
- Once babies get good at nursing they may only nurse for 5-10 minutes each breast and be done. Some babies may nurse one breast for 20 minutes or more and be done. That is perfectly normal as long as the baby is urinating and stooling well and gaining adequate weight.

### **How to Know your Baby is Getting Enough Breast Milk**

- For the first 2 weeks, your baby should have 3 or more good bowel movements per day and 6 or more wet diapers (infrequent BMs are okay after 2-3 weeks of age). Stools should quickly change from meconium stools in the first 2 days to breast milk stools ( usually yellow and seedy) but day 3-5.

- Your baby will act satisfied after a feeding.
- Your baby will be back to birth weight by day 10-14 of age.
- You may feel the letdown reflex every time your baby nurses.

### **Letdown Reflex**

- Tingling or milk ejection in the breasts during feedings.
- Enhanced by adequate sleep, adequate fluids, relaxed environment and reduced stress.
- If your letdown reflex is not obvious this may be normal as many women do not sense this. If your milk is not letting down that is a problem and ask for help.

### **Supplemental Bottles**

- Do not offer any routine bottles during the first 4 to 6 weeks after birth unless instructed to by your doctor or nurse practitioner.
- Supplemental bottles take away sucking time on the breast and breast stimulation, essential for making an adequate supply.
- After your baby is 6 weeks old and nursing is well established, you can offer your baby a bottle of expressed breast milk once a day to get him or her used to the artificial nipples.

Babies do not need extra water because breast milk provides enough water.

### **Pumping the Breasts**

- Invest in a good breast pump. Double electric pumps work best.
- Every time you miss a feeding, pump your breasts.
- If your breasts hurt, are very engorged and/or you are unable to nurse, pump your breasts until they are soft.
- Collect breast milk in plastic containers, collection bags made by many of the pump manufacturers, or bottles.
- Breast milk can be saved for 2-4 days in a refrigerator and up 3-6 months in the freezer turned on the lowest setting.
- To thaw frozen breast milk, either let it thaw in the refrigerator or place it in warm water bath or bottle warmer. Never microwave breast milk.

### **Sore nipples**

- Soothe a sore cracked nipple with purified lanolin after each feeding.
- Do not use alcohol on your nipples because they remove natural oils. Bathing with soap and water is fine.
- Coat your nipples with breast milk at the end of each feeding to keep it lubricated.
- Traumatized nipples can be from a poor shallow latch that causes friction to the tip of the nipple. Make sure the latch is deep and gets the entire nipple and most of your areola in the baby's mouth.
- Position the baby so he directly faces the nipple without turning his or her neck.
- Slightly rotate your baby's body so that his or her mouth applies pressure to slightly different parts of the areola and nipple at each feeding!
- Start your feedings on the side that is not sore!
- If one nipple is extremely sore, temporarily limit feedings to 5-10 minutes on that side or pump that side till it is better. A breast shield may also help but use it only temporarily.
- You can purchase "Soothies" breast pads that help soothe the sore nipples. If you only wear them during the day and use a regular breast pad at night, the pair of "Soothies" will last about 3 days.

### **Vitamin Supplements**

- Start breast-fed ( and formula fed) babies on a vitamin D supplements at birth, 400 IU daily, available in most baby vitamin preparations.

- Continue to take your prenatal vitamin while breast-feeding.

### **Mother's Medications**

- If the medication was okay to take pregnant than it is okay to take while breastfeeding. **Most prescribed medicines given during post partum are safe to take while breastfeeding.**
- Commonly used drugs that are safe to take while nursing include: Acetaminophen, ibuprofen, most antibiotics such amoxicillin, penicillin, erythromycin, cephalosporins; stool softeners, most asthma medications, cough drops, nose drops, eye drops, and skin creams.

**Try not to take large amounts of narcotic pain killers. They can make you and the baby excessively sleepy. Avoid any hormones such as progesterone, estrogen or any contraception method that involves hormones. These may disrupt your ability to make an adequate supply.**

*Consult your physician or the Mother's Resource Center if prescribed any drugs you are not sure of.*

### **Contact the office if any of the following problems occur**

- Your baby does not seem to be gaining weight.
- Your baby has less than six wet diapers per day.
- Your baby has less than 3 bowel movements per day during the first month.
- Your breasts are not full before feedings by day 5.
- Painful engorgement or sore nipples that do not respond to the recommended treatment.

### **Lactation Consultants**

- The experts when it comes to breastfeeding help.
- They can help with breastfeeding, the purchase of breast pumps, and answer most of your questions about basic breastfeeding management. We typically refer to the Mother's Resource Center at CRMC, (559)459-6288.