

Breastfeeding



THE OHIO STATE UNIVERSITY

WEXNER MEDICAL CENTER


How do I know if it is working?

Providing breast milk to your new baby helps to prevent allergies and infections. It is also easy for the baby to digest and has everything your baby needs to grow.

Breastfeeding can take some learning and practice for both you and your baby. Both of you may be tired and need more rest at first. Use this information to help you know if you are meeting your baby's feeding needs. Ask your nurse, lactation consultant, or doctor if you have any questions or concerns.

First feedings

You will be encouraged to put your baby to breast very soon after delivery.

- **If your baby is not latching on to either breast after 5 or 10 minutes, place the baby on your chest, skin to skin.** Wait a few minutes. Watch for signs or cues that the baby may be interested in feeding, then try again.
 - Try to feed the baby on cue, rather than on a timed schedule. However, try at least every 3 hours if your baby is not waking up to feed.
 - If your baby falls asleep after sucking for a few minutes, he or she may be sucking for comfort instead of hunger. This is important for baby too.
 - If your baby has 2 good feedings in the first 12 hours of life, you and baby are doing well. A "good feeding" means actively sucking for at least 10 minutes and a deep latch on your breast.
 - **If your baby is not having good feedings, your nurse may encourage you to hand express** breast milk to be fed to your baby a different way. Your nurse will check the baby's blood sugar to make sure he or she does not have low blood sugar, called hypoglycemia.
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- You can decide with your nurse or lactation specialist which method is best. Continue to offer the breast as baby cues.
 - Baby should have 5 or 6 good feedings in the first 24 hours. **If not, ask for help because there may be a need for an alternate feeding plan.**
 - After the first day, baby should have 8 good feedings or more per day. If your baby is not feeding at least 8 times after the first day, continue to try skin to skin and offer the breast at least every 3 hours.
 - If your baby is not meeting this goal, it may affect your baby's health and your milk supply. Your care team can work with you to decide the best feeding plan.

Watch for feeding cues

- Wiggling and stirring from sleep
- Opening mouth or smacking lips
- Turning head from side to side
- Rooting where baby opens his mouth wide and turns his head toward your touch of his cheek with your nipple or finger
- Stretching
- Putting hands up to mouth or sucking fingers

If your baby is crying, turning red and moving arms and legs, you will need to calm your baby before he or she can feed. Talk to your baby in a calm and soothing voice. Cuddling or placing baby skin to skin on your chest can help him or her calm down. As your baby calms down, offer the breast again.

Alternate feeding plans

If you or your baby has problems that will not allow you to directly breast feed, an alternative feeding plan may be needed. This may also occur if you are separated from your baby. Ask your nurse and care team about the best options for you and your baby.

Formula may be needed in addition to your breast milk to reach the amounts needed.

Talk to your doctor or health care team if you have any questions about your care.

For more health information, contact the Library for Health Information at **614-293-3707** or e-mail **health-info@osu.edu**.