## LOOK! LISTEN! ACT!



## CALL YOUR HEALTHCARE PROVIDER RIGHT AWAY IF:

- Baby does not have a wet diaper for longer than 6 hours
- Urine is dark and smells strong
- Baby is lethargic, limp or docile
- Baby has dry mouth and no tears
- Baby is irritable
- Baby has inconsolable crying
- Baby has a sunken fontanel
- Baby is feverish
- Baby has yellow skin
- Skin when pinched remains tented up

#### WHERE TO FIND HELP

To locate a lactation consultant: www.USLCA.org

To find a variety of breastfeeding support services:

www.zipmilk.org

App for 24/7 breastfeeding support: www.pacify.com

Office on Women's Health Helpline: 800-994-9662

My local number for help:

WIC Offices • La Leche League
State Breastfeeding Coalitions • Baby Cafes
Local breastfeeding support organizations

# BREASTFEEDING PROBLEMS CAN HAPPEN!

## Know when and where to seek help!

Most breastfeeding mothers find that the early days of nursing a baby is a time of exploring and learning what works best for both mom and baby. With basic instruction and support from your healthcare providers, breastfeeding usually gets off to a good start. However, sometimes mother- nature throws you a curve ball and problems crop up that need attention right away. Learning



to recognize these problems and act on them quickly helps you meet your breastfeeding goals and enjoy a satisfying breastfeeding relationship.

## **GRUSES FOR GONGERN**

Make sure you are working with an IBCLC (International Board Certified Lactation Consultant) and contact your IBCLC or other knowledgeable lactation care provider immediately if:

### You

- Are a first time mother
- Had a cesarean delivery
- Have a history of low milk supply
- Are diabetic
- Are obese
- Are hypothyroid
- Have polycystic ovary syndrome
- Have tubular or asymmetric breasts
- Took prenatal SSRI medication
- Have sore nipples
- Think you don't have enough milk

#### Your Baby

- Is preterm or late preterm
- Small or large for gestational age
- Had vacuum extraction
- Lost more than 7% of birth weight
- Cannot be heard or seen to swallow colostrum or milk
- Is a twin or triplet
- Does not latch to the breast
- Has uric acid crystals after day 2
- Is jaundiced (yellow skin or whites of the eyes)
- Cries all the time/never satisfied after feedings
- Takes more than 30 minutes to feed
- Is extremely sleepy

#### What I need to know

Feed your baby 8-10 times each 24 hours during the early days.

Put a sleepy baby to breast when you see feeding cues...

- Rapid eye movements under eyelids
- Hand-to-mouth movements
- Small sounds

- Sucking movements of mouth
- Body movements
- \* Massage & compress the breast when baby pauses between sucks.
- \* Have your lactation consultant/nurse verify that baby is swallowing.
- \* Make sure you know when baby is swallowing.
- ★ If baby does not latch or nurse well, express your colostrum/milk and feed your baby 2-10 mL/feed (1-2 teaspoons) during the first 24 hours, 5-15 mL/feed from 24-48 hours (1-3 teaspoons), 15-30 mL/feed from 48-72 hours (3 teaspoons to 1 ounce or so), and 30-60 mL/feed (1-2 ounces) from 72-96 hours
- \* Consult your healthcare provider and LC if more supplementation is needed.