

Breastfeeding Assessment Form

How you and your Healthcare professional can recognise that your baby is feeding well		By day 10-14	
What to observe/ask about	√/X		
Nappies			
Urine output – at least 6 wet, heavy nappies in 24 hours		Stools: Around 6 weeks when breastfeeding is more established, this may change with some babies going a few days or more without	
Dirty nappies/Stools – 2 or more in 24 hours, £2 coin size, soft & yellow		stooling. Breastfed babies are never constipated and when they do pa a stool it will be soft, yellow and abundant.	
Feeds			
8 - 12 feeds (at least) in last 24hours		See responsive feeding insert	
Feeds for 5 – 40 minutes at most feeds & comes off breast			
spontaneously			
Baby takes deep rhythmic sucks & you will hear swallowing		Initially there are rapid sucks, quickly changing to a 1:1 or 2:1 suck/swallow ratio (may have pauses in between). Right at the end of the feed, there may be flutter sucking.	
Generally calm & relaxed during feeds and content after most feeds			
Mum offering 2 nd breast – baby feeds, or not, according to appetite			
Your baby			
Baby has normal skin colour, alertness		waking for feeds & good tone	
Is gaining weight		Has regained birth weight by 3 weeks old	
Your breasts			
Nipples are same shape at end of feed as the start			
Nipple shields not used, or only used for short term		Use of a dummy can mask hunger cues and therefore possible	
No dummy use until breastfeeding established (6-8weeks)		detrimental effects on lactation.	
Breasts & nipples comfortable.		Hand expression, why its useful & how to do it	

If any responses not ticked: watch a full breastfeed, develop a care plan including revisiting positioning and attachment and/or refer for additional support. Care plan (refer to specialist support where needed):				
Name of HCP:	Date:			



Infant feeding and relationships: Responsive Breastfeeding

Feeding Cues

Developed by Women's and Newborn Services Royal Brisbane and Women's Hospital

Early Cues - "I'm hungry"







Stirring

Mouth opening

Turning head Seeking/rooting

Mid Cues - "I'm really hungry"



Stretching





Increasing physical movement



Hand to mouth

Late Cues - "Calm me, then feed me"



Crying









Colour turning red

Responsive breastfeeding supports the development of a reciprocal, close, loving relationship between you and your baby.

It means putting your baby to your breast whenever you want or when:

- baby shows feeding cues
- baby is distressed or lonely
- your breasts are full
- you simply wants a sit down and cuddle

Breastfed babies cannot be overfed or 'spoiled' by frequent feeding.

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What to look for:

Keep baby close to you so that you can recognise his feeding cues:

- rapid eye movements,
- sucking fingers and fists,
- rooting (opening their mouth as though they were about to breastfeed),
- moving and wriggling.

These are all signs that your baby is getting ready for a feed.

Crying is the last sign of hunger and by then your baby maybe too distressed to feed effectively. Try to soothe him before you offer a feed. Skin to skin contact is great for calming your baby at any time.



Conversations with your Healthcare professional			
Conversations with your nearthcare professional			
All mothers:			
Building a happy baby: the importance of closeness & responsiveness for you and your baby			
How best to hold your baby for feeding			
How to be sure your baby is feeding well			
Where you can access feeding and other support for mums and babies			
Has vitamin D been discussed?			
Caring for your baby at night			
Milk only until 6 months, the introduction of solids foods at around 6 months.	NB		
	6W		
When and how to access support for this discussed at the 6 week contact			
Breastfeeding mothers:			
The value of breastfeeding for feeding, comforting and protecting your baby			
Maximising the amount of breastfeeding your baby gets			
Responsive feeding –reciprocal relationship –more than just food (discuss insert)			
Hand expressing your breastmilk-why it can be useful and how to do it			
Breastfeeding when out and about with your baby —tips to make it easy			
How to continue breastfeeding if you are return to work			
If you are giving your baby formula:			
If you are giving your baby formula: How to sterilise equipment and make up feeds safety			
How to sterilise equipment and make up feeds safety			