

Infant Feeding Plan

All of the points below are important to get breastfeeding off to a good start. Check the boxes below for how you wish to feed your baby in the hospital. Share it with your health care provider and take it with you to the hospital to share it with hospital staff.

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| <input type="checkbox"/> 1st Hour: Please help me begin breastfeeding within 1 hour of delivery. This means placing my baby skin-to-skin as soon as possible after birth and helping me with breastfeeding when my baby shows hunger signs (awake, alert, mouthing, licking lips). |
| <input type="checkbox"/> Rooming In: I would like to room in with my baby 24 hours a day to give him plenty of skin-to-skin time and so I can learn my baby's feeding cues. |
| <input type="checkbox"/> Skin-to-Skin: During our stay, I want to be able to hold my baby skin-to-skin as much as possible. A blanket may be placed over us, but please not between us. |
| <input type="checkbox"/> No Bottles or Pacifiers: Please do not give my baby pacifiers or bottles (formula or sugar water). If there is a medical need, first let me speak to a lactation consultant. |
| <input type="checkbox"/> Routine Exams: Please do routine newborn exams while skin-to-skin. Do not take my baby away from me unless my baby needs medical treatment that cannot be done in my room. |
| <input type="checkbox"/> Breastfeeding Help: Kindly teach me how to have a good latch and how to position my baby. Please teach me my baby's early hunger signs and how to tell if my baby is breastfeeding well. Please remind me how to know if my baby is getting enough breastmilk (number of wet and messy diapers, weight gain amount, etc.) |
| <input type="checkbox"/> C - Section: If I have a cesarean surgery, I would like to hold my baby skin-to-skin as soon as possible after the operation. If at first I am unable to do so, please allow my partner to hold our baby skin-to-skin. |
| <input type="checkbox"/> Milk Supply: If my baby is unable to breastfeed or is away from me due to medical reasons, I want to start pumping within 6 hours of delivery. Please remind me to call WIC for an electric pump if needed. I may need one after I leave the hospital. |
| <input type="checkbox"/> Discharge Bags: Please do not give me a formula bag or show me any advertising materials for baby formula. |
| <input type="checkbox"/> Breastfeeding Support At Home: I would like to have a hospital lactation consultant's phone number in case I need help with breastfeeding when I get home. |

Hospital Staff: Please speak to me or my partner with any concerns about this plan.