Helping Nurses Help Moms

Breastfeeding in the first few days can be a real challenge, and as nurses we never want the mother to feel as though we are forcing her to do it. Many mothers give up because they do not receive the support or information they need and are looking for in the hospital. It is our job to use the most encouraging language we can to assist the mother in a vulnerable state. These scripts do not replace the need for continued breastfeeding education, which is a core competency of the maternity services staff. Each staff member’s breastfeeding education and skills should be evaluated routinely to ensure competency.

Purpose:

- To provide you with a script of different responses that can be used to assist mothers with various breastfeeding challenges. This will help you feel more like a patient advocate for both the mother and infant.
- To assist you in effectively communicating with other staff when developing a breastfeeding plan for the patient.
- To provide you with a reference that can be changed to fit your facility’s protocols or personal style, and to encourage thinking outside of the box. This reduces inconsistent breastfeeding information given by healthcare providers, which is the number-one complaint of patients.

Encouraging a mother to breastfeed is a critical part of your job. It might help you to think of the mother not as your patient for whom you have a lessons checklist to complete before discharge but as your friend who is asking for your help in a time when she doubts her ability to provide adequate nutrition for her infant.

Thank you for your dedication to Texas mothers and infants.

Veronica Hendrix, LVN, IBCLC, RLC
Texas Ten Step Coordinator
Sample Scripts

Mother: I'm having trouble breastfeeding. I'm ready to give a bottle of formula.

Nurse: What I hear you saying is that breastfeeding has been hard for you. Breastfeeding can be really challenging, especially when you're in pain or experience discomfort each time you're feeding your baby. A lot of the moms I take care of describe feeling exactly the way that you do — so you're not alone. I want to do everything I can to help you feel better and to be successful with breastfeeding. You're making such an important decision for you and your baby, and I'm so proud of your commitment. Would you be willing to let me observe the next feeding so I can help make breastfeeding more comfortable for you? I would love to help you.

Mother: I still want formula; bring me a bottle.

Nurse: I understand, and I want you to feel supported in every decision you make. We are a Texas Ten Step facility, which means we are committed to supporting the health of breastfeeding mothers and infants. I am going to (Our policy states that I am to) provide you with some information to go over regarding the risks associated with early formula-feeding. We believe in your right to make your own decisions, and we want to provide you with the best research-based information before you decide, just as we would inform you of the risks of other medical decisions. I am happy to go over any questions that you might have after you read the information.

Mother: I want my infant taken to the nursery so that I can sleep.

Nurse: I understand that you're tired — you've had a long day! You did such a good job with your labor, and I want you to get the rest that you deserve. This facility is called a Texas Ten Step facility. That means we are committed to breastfeeding support — to helping you get started and keep going with the perfect food designed especially for your baby. It also means our nursery is reserved for more medically fragile infants. We don't have the

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staff or room to monitor healthy infants in the nursery. Plus, we know that infants do much better with frequent, close contact with their mothers. Getting plenty of rest is important, and it’s normal for the newborn to have frequent, small feedings throughout the day and night. It might seem like you’ll never get enough sleep again, but you will. One of the great things about breastfeeding is that you won’t need to get up and prepare bottles during the night. How about we work on a plan to help you get more rest throughout the day while you bond with your new baby at the same time? Would you like me to ask your visitors to leave when it’s time to feed the baby? That way you don’t have to ask them. There are other tips I can give you that you can use at home. (Also here you might discuss the safety of leaving the infant at the nurses’ station to be monitored by a ward clerk or other staff, as that might be the scenario for your hospital. Safety is key!)

**Nurse 1:** The baby took a bottle of formula all night long, so he didn’t even want to breastfeed.

**Nurse 2:** I worked so hard with that mom yesterday, and I’d really like to help her breastfeeding successfully. She was really excited about breastfeeding, so I’m sure we can get her back on track. Let’s go in together and talk with her about making a plan for her evening feedings. Our working together will help her to feel supported during the day and at night.

**Nurse 1:** The baby took 3 ounces with every feeding; the mother just gave him the whole bottle!

**Nurse 2:** It’s so hard when parents don’t understand newborn stomach capacity and the importance of pacing a feeding. Did you try using the belly ball visual with them? Something that helps me is to give a bottle of formula with a limited quantity in it, like 15 mL, so that parents don’t have the opportunity to feed the entire amount. Thanks for working with her — if you come back tonight, would you mind reinforcing what I’m going to go over with her today? I just want to give her the most consistent information we can, and I think she will feel totally supported if you and I are helping her with the same plan. I’ll make sure and document why she is asking for formula and that we are working on a plan together to help her. I really appreciate your help.