

Pocket Card Tips

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LATCHES ASSESSMENT¹

- L:** Latch
- A:** Audible swallowing
- T:** Type of nipple/Shape after feeding
- C:** Comfort level – Breast/Nipple/General Feeding
- H:** Hold/Positioning
- E:** Elimination – Urine/Stool size & color
- S:** Satiation

POSITIVE MESSAGES²

- L:** Listen to your patients – ask open ended questions to learn more
- O:** Observe a feeding – this will give you a better idea of what is really happening
- V:** Validate her feelings and concerns – this will show that you value her
- E:** Empower her with Education and Encouragement!

AVERAGE INFANT INTAKE³

Age	Capacity of infant stomach
Day 1	2-10 ml per feeding
Day 2	5-15 ml per feeding
Day 3	15-30 ml per feeding
Day 4	30-60 ml per feeding

If a breastfed baby needs supplementation:

1. Supplement should be within the range of normal stomach capacity
2. Consider alternative feeding methods – avoid bottles
3. Initiate hand expression/pumping to help establish milk supply

TROUBLE SHOOTING

Sore Nipples:

1. Observe a feeding: Correct position and latch
2. Rotate positions – use least sore side first
3. Refer to IBCLC

Difficult Latch/Breast Refusal

1. Avoid bottle nipples – use alternative feeding methods prn
2. Skin to skin before and after feedings
3. Refer to IBCLC

¹*Management for Clinicians: Using the Evidence*, Jones & Bartlett Publishers, New York, 2010.

²*WIC Value Enhanced Nutrition Assessment*, WIC Staff News. Texas Department of State Health Services, 2017

https://www.dshs.texas.gov/wichd/nut/vena_newsletter/Vena_Articles/LoveMethod.sht. Accessed

³*Supplementary Feedings in the Healthy Term Breastfed Neonate*, Academy of Breastfeeding Medicine's Clinical Protocol #3, 2017