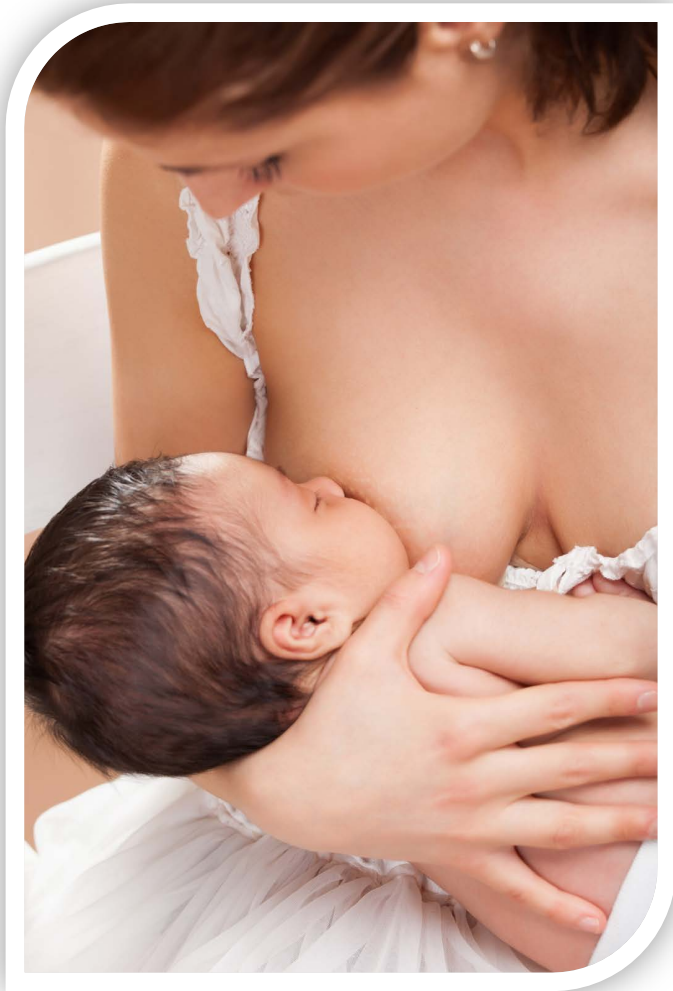


# Breastfeeding Your Baby



# Congratulations!

We are excited for you as you welcome your new baby. You made a great choice to breastfeed. Breastfeeding is the best nutrition for your baby. Your milk will change over time to meet your baby's needs.

National and international organizations recommend feeding your baby with **only breast milk for the first 6 months**. They also recommend that you keep breastfeeding until your baby is at least 1 or 2 years old.

This booklet will give you tips about breastfeeding and answers to questions you may have about breastfeeding.

## We Are Here to Help

Breastfeeding can be hard at first. Like any new skill, it takes time and practice for you and your baby to feel confident. Be patient and know that we can support you. We can keep helping you even after you go home.

All of our nurses are trained to help you while you're in the hospital.

## Why Is Breastfeeding Important?

- Babies who are breastfed have a lower chance of getting:
  - Ear infections
  - Diarrhea
  - Respiratory infections
  - Asthma
  - Obesity
  - Type I and type II diabetes
  - Some cancers
  - SIDS (Sudden Infant Death Syndrome)
- Moms who breastfeed have a lower chance of getting:
  - Heart disease
  - Breast, ovarian, and uterine cancers
  - Type I and type II diabetes

**Call your nurse  
for help with  
breastfeeding!**

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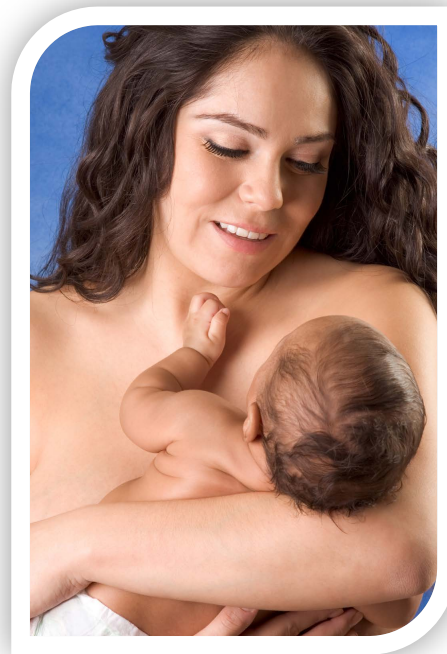
## Your Baby's First Day

### Rooming In with Your Baby

You and your baby will share a room so our nursing staff can help you learn how to take care of your baby.

With the help of our nurses:

- You can more easily hold, cuddle, look at, respond to, and get to know your baby.
- You will learn to recognize when your baby is getting hungry.
- Your baby will learn to recognize you.
- Your baby will be able to breastfeed on demand (whenever your baby is hungry).
- Your baby will probably cry less than babies in the nursery who are away from their mothers.
- Your baby can learn to breastfeed faster and gain weight sooner.
- You should feel more confident in taking care of your baby when you go home.



## The First 2 Hours after Birth

### Your Baby Is Ready to Learn

- Babies are awake and ready to breastfeed.
- Short bursts of sucking are normal.
- The mother's breasts are soft but have **colostrum**, a very rich food for your baby. Colostrum comes in small amounts. It helps build your baby's immune system.

### Skin To Skin

Hold your baby skin to skin as much as you can. Skin to skin means your baby is only wearing a diaper and you hold them on your bare chest. Skin to skin makes your baby feel safe. It helps keep your baby's heart rate, temperature, and breathing within a normal range.

Keep your baby safe by positioning their head turned to one side where you can see their face. Make sure your baby's nose and mouth are not covered and their neck is straight. Your baby's legs should be flexed (curled up) and their back covered with blankets. When the person doing skin to skin wants to sleep, move the baby to their bassinet or crib or to another caregiver who is awake and alert.

#### How does skin to skin help my baby?

Holding your baby skin to skin helps your baby:

- Stay warm
- Feel comforted by hearing your heartbeat
- Let go of the stress of being born
- Breastfeed easier
- Cry less
- Have better sleep
- Keep blood sugar normal
- Have less chance of getting sick
- Breathe at a good rate

#### How does skin to skin help me?

Holding your baby skin to skin helps you:

- Have less pain after the birth
- Start to bond with your baby
- Increase positive feelings toward your baby
- Feel more confident about caring for your baby

#### Can I do skin to skin if I have a C-section?

Yes! You can still do skin to skin if you have a C-section. Your nurse can help you put your baby on your bare chest, so you're comfortable. If you don't feel well enough to do skin to skin, we suggest that you ask a family member to take your place.





Your baby's stomach is the size of a cherry

## 2 to 24 Hours

### Your Baby Is Sleepy

- Babies sleep to recover from birth.
- Babies may not be interested in feeding and do not need very much.
- Babies are learning and may not latch well.
- Babies may have small feedings with short bursts of sucking.
- Mother's breasts are soft with small amounts of colostrum. This is the first milk and it's important for the baby to drink it.
- Your baby usually loses some weight.
- Your baby's stomach is about the size of a cherry and holds 1-2 teaspoons of colostrum for each feeding.
- On the first day of life, your baby may have only one wet and one dirty diaper. Poop may be black or dark green and sticky or tarry.

### What to Do

- Hold your baby skin to skin.
- Ask for help so you and your baby are comfortable.
- Try breastfeeding when your baby is showing early hunger cues like sucking on their hands, opening their mouth and turning their head, or sticking out their tongue.
- Keep track of your baby's feedings, wet and dirty diapers, and weight in the logs on pages 24 and 25 of this book.



## Common Questions and Worries

### I don't have any milk!

Many new moms feel like they don't have enough milk.

You won't start making a lot of milk at first. The first milk you have is called colostrum. You have this right away when your baby is born.

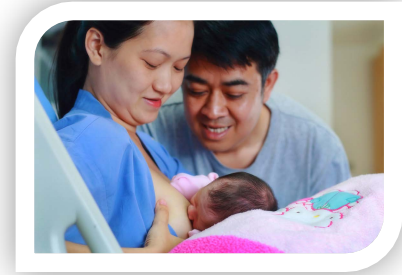
### What is colostrum?

Colostrum (coh-LOSS-trum) is the first milk you make. It is the most important food you can give your baby.

- Colostrum coats your baby's stomach and keeps bacteria from making your baby sick.
- Your baby's stomach will absorb colostrum quickly so your baby will need to eat more often.
- Your body makes just enough milk to fill your baby's stomach every time you need to feed your baby.
- When your baby eats more often, your baby will tell your breasts to make more milk.
- Colostrum looks thick and may be a yellow color.

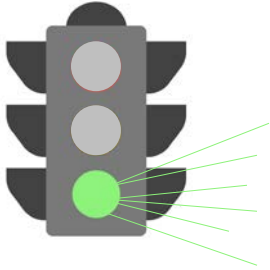
### How do I make enough milk?

- Breastfeed your baby **at least 8 times in 24 hours**, with feedings during the night.
- Let your baby breastfeed or hold your baby skin to skin. This tells your body to make more milk.
- Breastfeed your baby every time they're hungry.
- The more you empty your breasts, the more milk you will make. Breastfeeding, hand expression and pumping are ways to empty your breasts. Learn more on pages 7 and 20.
- Do not give your baby anything other than breast milk. If you give formula or another breast milk substitute, your baby might get full and won't breastfeed as often. You won't make as much milk and your baby will have a higher risk of illness.



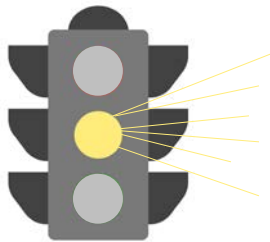
## Hunger Cues

It is important to catch the signs that your baby is getting hungry. This makes breastfeeding easier and helps you start earlier.



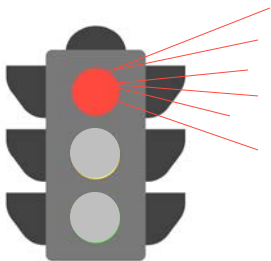
### I'm Hungry

- Licking lips
- Smacking or sucking sounds
- Opening mouth and sticking out tongue
- Turning head side to side with mouth open (rooting)



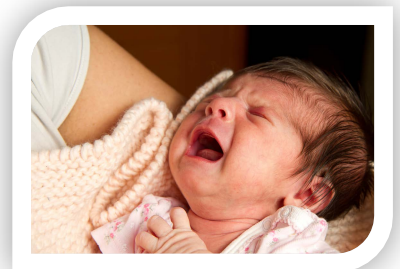
### I'm Really Hungry

- Hands to mouth
- Sucking on hands, fists, or wrists
- Fidgeting, squirming, or moving into breastfeeding position
- Fussing



### Calm Me Down and Then Feed Me!

- Frantic movements, waving around arms and hands, kicking legs out
- Crying, turning red
- Calm your baby down before trying to feed
- Swaddling, rocking, or gently patting your baby can calm them down before feeding





## Hand Expression

Hand expression means using your hand to help milk come out of your breast. A drop of milk can help you latch your baby because your baby can smell and taste your milk. Hand expressing can also help relieve the feeling of fullness in your breast. It can also help you make more milk. Ask your nurse to show you how to express your breast milk.

1. Start by gently massaging your breast. Try using small circle motions over all parts of your breast.
2. Make a “C” with your thumb above and your four fingers below. **Position** your “C” on your breast, with your thumb about ½” above your **areola** (the darker part of your breast around your nipple) and your index finger about ½” below.
3. **Press** your hand back toward your chest. If your breast is large, first lift your breast, then press back toward your chest.
4. **Roll** your thumb and fingers forward at the same time. This will gently compress your breast. You know you’re doing this right when you see a drop of milk spurt out from your nipple.

**Avoid sliding your fingers over your breast or pulling on your nipple. Those actions could cause pain or bruising.**

If you don’t see any milk, don’t worry! Just move your fingers a little and try again. Each woman’s body is different, so you may need to keep trying for a while until you find the spot on each breast where your milk comes out the easiest.

5. Now start over again. Position, press, roll...Position, press, roll...
6. When you don’t see any more drops of milk forming, turn your “C” to the right and left to fully drain your breast. Try using both hands on each breast.

## Having Trouble? Try One of These Videos

These 3 videos that show slightly different ways of hand expressing:

1. <http://newborns.stanford.edu/Breastfeeding/HandExpression.html> Click on “Breastfeeding” then click on “Hand Expressing Milk” (Jane Morton, Stanford University)
2. <http://vimeo.com/65196007> (English)  
<http://vimeo.com/73054360> (Spanish subtitles)  
(Maya Bolman and Ann Witt, Breastfeeding Medicine of Northeast Ohio)
3. <https://globalhealthmedia.org/portfolio-items/how-to-express-your-first-milk/?portfolioID=5623>



**Call your nurse or lactation specialist if you need help or if you're having pain while breastfeeding.**

### Learning to Latch

Latching correctly is important.

- When your baby latches correctly, they get more milk.
- Getting enough milk helps your baby grow properly.
- A good latch helps prevent nipple pain or soreness.
- A good latch makes sure your body will make enough milk for your baby.

### Steps to Latch Your Baby

- Be patient! You are both learning.
- Gently wake baby or respond to early hunger cues.
- Get yourself comfortable before trying to latch baby (use pillows, adjust your bed).
- Position your nipple upwards towards baby's nose.
- Bring baby's body close to you (tummy against you).
- Hand express a drop or two of colostrum.
- Make sure baby has a wide open mouth.
- Point nipple at the roof of baby's mouth.
- With mouth open wide bring baby onto breast (chin into breast first).
- If you need to unlatch baby, break baby's suction at the breast by putting your finger into the corner of baby's mouth to help break the suction. Then move baby away from your nipple.

#### **Video about Latching Your Baby**

Visit this link to see a helpful video about latching your baby.

<https://globalhealthmedia.org/portfolio-items/breastfeeding-attachment/>

## Signs of a Good Latch

- Baby has more of the bottom of the areola (the darker skin around your nipple) than the top.
- Lips are open outward like a fish (flanged lips).
- Baby's chin is touching your breast.
- Baby is sucking rhythmically with some pauses.
- Your nipple may be tender at the beginning of the latch, but you should not feel pain.
- The nipple is rounded after feeding.
- Baby's head is facing the breast, not turned to the side.

## Signs of a Poor Latch

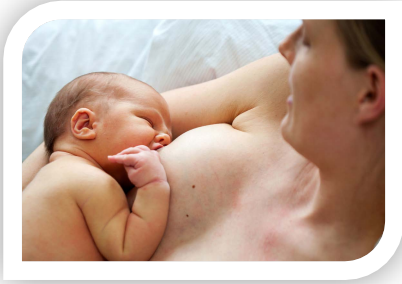
- You have pain that lasts throughout the feeding.
- Baby has only the nipple in their mouth.
- Baby can't stay latched for more than a suck or two.
- Baby's cheeks are dimpled.
- You hear a clicking or popping sound.
- The nipple is pointed after feeding.



Poor latch



Good latch



## Breastfeeding Positions

### Cradle

- Hold baby with your tummy to his tummy.
- Rest baby's head in the bend of your arm with his body close to you.
- Hold your breast with fingers under and thumb on top behind the areola.
- Follow the steps on page 8 to latch baby.



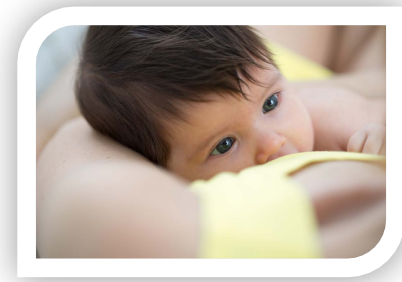
### Football

- This is a good position to use after a C-section.
- Bring baby close to your body on one side.
- Use a pillow at your side to support your baby's body and your holding arm.
- Point baby's legs behind your body and baby's head close to your breast.
- Support baby's head and upper back with your hand and forearm.
- Hold your breast with fingers under and thumb on top behind the areola.
- Follow the steps on page 8 to latch baby.



### Side-Lying

- You and baby lay on your sides tummy to tummy facing each other.
- Baby's mouth should be at your nipple.
- Use your free hand to lift breast up keeping fingers behind areola.
- Follow the steps on page 8 to latch baby.



### Laid Back

- Lie back on couch or chair for support.
- Put baby tummy to tummy with you. Put his mouth at your breast.
- Put a pillow under the arm that is supporting baby at the breast.
- With your other hand, support and offer your breast.
- Follow the steps on page 8 to latch baby.

## Breastfeeding after a C-Section

- Hold your baby skin to skin as much as you can.
- Find a position that works for you.
- Try the football hold. Cradle and cross-cradle holds might not be comfortable after a C-section.
- Prescription pain medicines are safe for you to use while you're breastfeeding.
- Your milk may take longer to come in.
- Feed often to baby's hunger cues.
- Hand express or pump after baby breastfeeds.
- Rest when your baby rests.
- **Ask for help. Be patient!**



## Your Baby's Second Day (24-48 hours)

### Feeding Frenzy: Your Baby will Feed A Lot

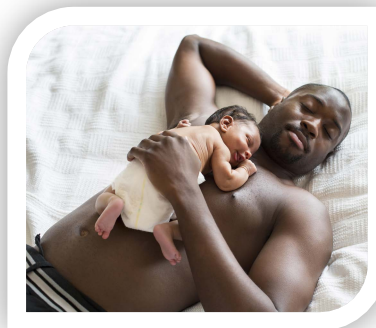
- Babies will wake up to breastfeed **a lot**. They'll feed 8 or more times in 24 hours.
- Babies act fussy and want to **feed all the time**. We sometimes call this a "feeding frenzy."
- You and your baby are still learning how to breastfeed.
- Your baby's stomach is growing and is a little bigger than a cherry.
- Your breasts are soft and have small amounts of colostrum.
- Babies usually lose weight.
- On day 2, your baby should have at least 2 wet and 2 dirty diapers. The poop should be changing in color to greenish black or greenish brown.

### What to Do

- Hold your baby skin to skin.
- Breastfeed when baby shows hunger cues.
- Take a nap when your baby sleeps. You will both be up at night to feed.
- Keep track of baby's feedings, wet and dirty diapers, and weight in the logs on page 24 and 25.



Your baby's stomach is a little bigger than a cherry.



You and your partner can hold your baby skin to skin.

## Sore Nipples

Your nipples might be sore or tender on your baby's second day. This is okay, but you should **not** have pain that lasts during the whole feeding.

- After a feeding, your nipple should be rounded, not pinched or flat.
- If your nipples are cracking or bleeding, call for help with latching.
- Most nipple pain gets better or goes away when you and your baby are positioned well.

If you are very sore:

- Call your nurse for help.
- Try different positions to lessen the pain.
- You can hand express some of your milk and spread it over your sore nipple. Let it air dry.
- Put lanolin on your dry nipples to prevent chapping and heal damage.

Also look at the Learning to Latch section on pages 8 and 9.

**Call your nurse  
for help with  
breastfeeding!**



If your nipples are very sore,  
call your nurse for help.

## Your Baby's Third Day (48-72 hours)



Your baby's stomach is the size of a walnut.

### Your Baby Will Be a Night Owl

- Babies should wake up to feed 8 or more times a day and several times at night.
- Babies drink with bursts of sucking and resting.
- Your baby's skin may be a little yellow (jaundice).
- Your baby's stomach is about as big as a walnut and can hold about 5 teaspoons of milk per feeding.
- Your breasts may start to feel full.
- Your baby should have at least 3 wet and 3 dirty diapers in 24 hours. Poop should be a green or mustard yellow color and have a seedy texture.

### What to Do

- Hold your baby skin to skin.
- Breastfeed when baby shows hunger cues.
- Take a nap when baby sleeps. You will both be up at night to feed.
- Ask for help so you and your baby are comfortable.
- Keep track of baby's feedings, wet and dirty diapers, and weight in the logs on pages 24 and 25.

### Mature Milk

Your mature milk will come 3 to 5 days after delivery. This means your milk has "come in." Mature milk is thinner and whiter than colostrum. There is also more milk volume than there was with colostrum.

Once your mature milk comes in, let your baby feed from one breast **completely** before you switch to the other breast. This helps your baby get the milk from the end of the feeding (hindmilk), which has more fat. Getting enough of the fatty milk helps your baby gain weight and grow.



## Breast Engorgement

When your baby is 2-5 days old, breasts may become swollen, hard, and painful. This is called **engorgement**. This happens because you are making more milk. This is normal, and might cause some mild discomfort. The swelling and discomfort usually get better after a few days.

Your baby may have a hard time latching. The milk may not flow well if your breasts get too swollen.

### What do I need to do?

- ☑ Keep breastfeeding often—at least 8 times each 24 hours and any time your baby shows signs of hunger.
- ☑ Allow your baby to breastfeed for as long as he wants.

If your baby is nursing well, you should hear plenty of swallows. Your breasts will feel softer after the baby breastfeeds.

### How can I relieve engorgement?

- Keep breastfeeding often.
- Take a warm shower or put a warm cloth on your breasts for about 5 minutes before breastfeeding.
- Gently massage your breasts and hand express some milk to soften the breast so that your baby can latch well.
- Pump or hand express to soften your breasts for comfort.
- **After** you feed the baby or pump you can put a cold cloth on your breasts for about 20 minutes.
- You can take medicine for the pain and swelling. Ask your provider about taking Tylenol or ibuprofen for this.

### What if I still have hard, painful breasts?

Call for help at 505-272-0480 or 505-272-6455 (MILK).

If your breasts stay engorged your baby may not be able to breastfeed and you may stop making enough milk. Sometimes women get a breast infection, called **mastitis**.

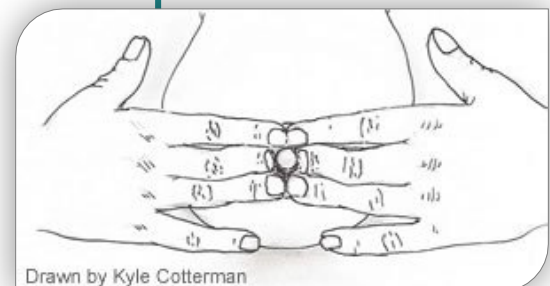
Call your doctor or provider right away if:

- You have a fever (temperature over 100.4°F or 38°C)
- Your body aches or chills
- Your breasts are so painful you cannot breastfeed
- One or both of your breasts are red and feel hot
- Your engorgement doesn't get better within 24 hours



### If the breast is too hard for baby to latch:

Put your fingers around the nipple and press back into the breast for 15 to 60 seconds. This helps soften the breast so the baby can latch and drink well. This is called **Reverse Pressure Softening**. The picture below shows reverse pressure softening.



Drawn by Kyle Cotterman

Reverse Pressure Softening



At 1 week old, your baby's stomach is about the size of an apricot.



At 30 days old, your baby's stomach is about the size of an egg.

## Your Baby's Fourth Day and Beyond

- Your baby should be feeding 8 or more times in 24 hours, including through the night.
- Your baby will eat several times at night.
- Your baby will have bursts of sucking and resting.
- You can hear your baby swallow milk.
- Your baby may lose more weight, but should start gaining after day 4.
- Babies may have a yellow skin color (jaundice).
- Your breasts will get full or firm by day 3 or 4 after birth. (This means you have more milk.)
- You may feel your milk “let down.” Let down is when your milk starts flowing in response to your baby’s sucking, pumping, or hand expression. Some things you may feel when your milk lets down are:
  - Tingling in your breast.
  - Cramps in your uterus the first week after delivery.
  - The baby’s sucking pattern changes and you hear the baby swallowing often.
- Your baby’s stomach stretches as she grows and can hold more breast milk per feeding.
  - By the time your baby is 1 week old, her stomach is about the size of an apricot and can hold 1.5 to 2 ounces.
  - By the time your baby is 30 days old, her stomach is about the size of an egg and can hold about 2.5 to 5 ounces.
- By day 4, your baby should have 6 to 8 wet diapers in 24 hours.
- Your baby should have 3 to 4 poops in 24 hours. (Some babies have more.) Poops should be yellow and seedy-looking by day 4.

### What to Do

- Keep feeding your baby often to help them grow and thrive.
- The more you breastfeed or pump, the more milk you’ll make.
- Keep track of baby’s feedings, wet and dirty diapers, and weight in the log on pages 24 and 25.

## Common Questions on Day 4

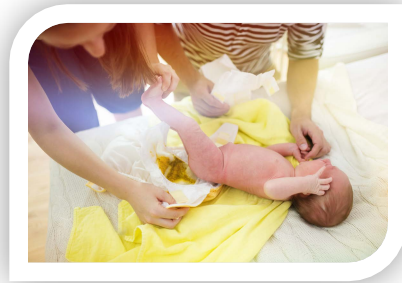
### How Do I Know My Baby Is Getting Enough Milk?

Here are some signs that your baby is getting enough milk:

- 6 to 8 wet diapers in 24 hours
- 3 to 4 poops or more in 24 hours. Poops should be yellow and seedy.
- Your baby's mouth is moist.
- When your baby is full, she will release the breast, relax her arms, and stretch out her legs.
- Your baby will gain weight by her 5<sup>th</sup> day of life. (She should regain her birth weight by 2 weeks.)

### What Do I Do If My Baby Won't Latch?

- Try calming your baby with skin to skin contact, rocking, or singing.
- Try breastfeeding in different positions or on the other breast. See page 10 for breastfeeding positions.
- Feed your baby using a different method (for example, spoon, cup, syringe, or other method). It's best to use your hand expressed or pumped milk. You can also get donor milk from a milk bank. If you cannot use breast milk, talk with your baby's health care provider for recommendations.
- If you need help, call 505-272-0480 or 505-272-MILK (6455).
- See pages 8 and 9 for learning to latch.



Poops should be yellow and seedy.

#### Tip for Moms: Make a Breastfeeding Box

It can be helpful to make a box where you can keep a few things you may need when breastfeeding. Here are some things you can put in the box:

- Water
- Snacks (fruit, granola bar, nuts)
- Nipple cream
- Lip balm
- New or clean breastpads
- Burp cloth and an extra swaddle blanket
- Something to read, like a magazine, baby care book, or your phone
- A breastfeeding log or breastfeeding app
- Notebook and pen



### Breast Milk Is Enough for Your Baby!

You have **everything** you need to feed your baby perfectly.

Breast milk is easy to digest.

Breast milk helps protect your baby from getting sick.



## Will My Breast Milk Be Enough for My Baby?

Breast milk is the best and only food your baby needs in the first 6 months of life. Formula and other foods are harder for your baby to digest. They'll also lessen your milk supply and can make it harder for your baby to learn to breastfeed.

- Your nipple feels different from a bottle nipple in your baby's mouth. Your baby needs to learn to recognize your nipple.
- When you only breastfeed, your body learns how much milk to make for your baby.
- If your baby is getting full on other foods or drinks, your baby might not want to breastfeed because she won't feel hungry.
- If your baby is having trouble growing, your baby's health care provider and a lactation nurse will help you to make sure your baby gets enough milk.
- If you're going to be separated from your baby, you can pump your breast milk to feed your baby.
- If your baby's health care provider prescribes a vitamin or medicine, give it to your baby and follow the instructions.
- ✗ **Do not** give your baby any other vitamins or medicines other than what your baby's health care provider prescribes.
- ✗ **Do not** give your baby water or tea. Your milk has all the water your baby needs.
- ✗ **Do not** give rice cereal or other solids until your baby is around 6 months old.

## Growth Spurts

Most babies grow very fast around 2 weeks, 6 weeks, 3 months, and 6 months.

- Your baby may want to breastfeed very often, usually for a few days. Make sure to breastfeed your baby when he acts hungry.
- After a few hungry days, baby may have a few sleepy days. You may hand express or pump for comfort if you need to.
- Remember, the more you breastfeed, the more milk you'll make. Giving formula during this time will lower your milk supply.

## Eating, Drinking, and Medicine

### What Can I Eat When I'm Breastfeeding?

Do your best to eat many different healthy foods, like:

- Fruits and vegetables
- Cheese, yogurt, milk
- Proteins like eggs, meats, and fish
- Whole grains, pasta, and bread

### How Much Water Should I Drink While I'm Breastfeeding?

Drink water whenever you're thirsty. Try to drink 64 ounces (8 cups) every 24 hours.

### What Medicines Are Safe to Take When I'm Breastfeeding?

It is safe to take:

- Prenatal vitamins
- Any prescription medicines that were ordered for you after delivery.

For all other medicines, ask your nurse or call our Lactation Clinic at (505) 272-0480 or our breastfeeding warm line at 505-272-MILK (6455).

If you're planning to take a medicine or drug that has not been prescribed by your health care provider, ask your provider before you take it. Some medicines and drugs, like alcohol and marijuana, can be passed to your baby in your breast milk. It is important to talk with your baby's healthcare provider before taking these medicines or drugs.





# Pumping

## Why Use a Breast Pump?

Sometimes you may be given a breast pump for extra help with breastfeeding.

Breast pumping can:

- help you make more milk
- help you have a good milk supply
- help you have expressed breast milk to feed to your baby
- prevent and relieve fullness, clogged ducts, and infection

## You Might Need a Breast Pump If:

- You are separated from your baby (if your baby is in the NBICU or if you are going back to work or school)
- You are using a nipple shield
- You lost a lot of blood during your delivery
- Your baby can't latch after the first day of life
- Your baby needs extra milk they can't get by breastfeeding
- You have multiples (twins, triplets)
- There is a specific concern for your milk supply



**Talk to your health care provider and lactation specialist about how often you should express breast milk for your baby.**

## How to Express Your Milk with a Pump

- Wash your hands before touching your pump parts.
- Start by massaging your breasts. This helps the milk start flowing.
- In the first few days after birth, express more milk by using hand expression rather than pumping. (See page 7 for instructions.)
- At first, express for about 10 to 15 minutes at a time. Expect to see just a little milk. Don't worry, every drop counts! **Every session sends signals to your body to make more milk.**
- Once your breasts start to make more milk (usually 2 to 4 days after your baby is born), it will get easier to express your milk by pumping.
- Once you start making more milk, express for 10 to 15 minutes or until the milk stops flowing.
- If you are separated from your baby, express your milk with a pump at least 8 times in 24 hours, including through the night.

### Storing Pumped Milk: Follow the Rule of 5

- 5 hours at room temperature
- 5 days in the refrigerator
- 5 months in the freezer

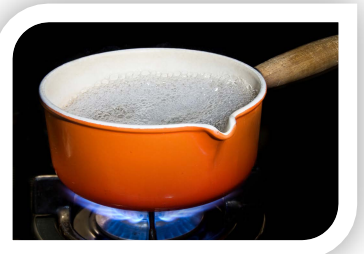
## Cleaning Your Pump Parts

After you pump:

1. Take apart your pump parts. Take apart every little piece, including the white membranes.
2. Set aside your tubing. It doesn't touch your milk, so it only needs to be cleaned if it gets dirty.
3. Wash your other pump parts in warm, soapy water right away.
4. Rinse them well in clear water.
5. Let them air dry on a clean towel.
6. Once a day, sanitize your pump parts in a "micro-steam" bag or boiling on the stovetop. This will kill any germs that might still be on your pump parts. Follow the steps on the micro-steam bags.



pumped breast milk



Once a day, sanitize your pump parts in a micro-steam bag or boiling on the stovetop

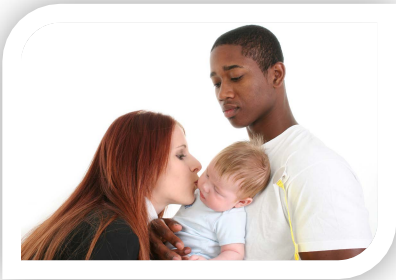
## Pumping Tips

- Make sure you're comfortable with the amount of suction. Start with low suction and increase the suction as it feels comfortable for you.
- Breast shields are the pump parts you hold against your breasts. Check with your nurse or lactation nurse to make sure you're using the shield that fits you best.
- Using a double electric pump can make pumping easier.
- Pumping both breasts at the same time is called double pumping. It can save time.
- Massaging your breast while you pump may help you express more milk.
- Holding your baby skin to skin can help you express more milk.
- If you're separated from your baby, looking at a picture of your baby can help.
- It is normal for one of your breasts to make more milk than the other.

## Going Back to Work

Planning ahead can help you reach your goals and get off to a good start.

- Talk about your feeding plans with your supervisor or human resources office.
- Remember, the law protects your right to breastfeed or express milk for your baby.
- Get a pump that works well for you.
  - Contact WIC or your insurance company to ask if they can help you get a pump.
- Look for a Breastfeeding-Friendly Caregiver.
- Questions? Call us at **505-272-6455 (MILK)**. We are here to help you!



### **The Law Protects Your Right to Breastfeed**

Federal and state laws protect your right to a break and a clean place to pump while working, so you can give breast milk to your baby.





# Breastfeeding and Pumping Log

Your Name \_\_\_\_\_



Date	Time	Left Breast: Minutes Feeding	Right Breast: Minutes Feeding	Other Feedings Not at Your Breast: Amount (mL)	Pumping on Left Breast		Pumping on Right Breast		Pee	Poop
					Amount You Pumped (mL)	Minutes You Pumped	Amount You Pumped (mL)	Minutes You Pumped		
1/1	10am	10 min	12 min	5 breast-milk	2 mL	15 min	3 mL	15 min	Yes	Yes~black



# Breastfeeding and Pumping Log

Your Name \_\_\_\_\_

Date	Time	Left Breast: Minutes Feeding	Right Breast: Minutes Feeding	Other Feedings Not at Your Breast: Amount (mL)	Pumping on Left Breast		Pumping on Right Breast		Pee	Poop
					Amount You Pumped (mL)	Minutes You Pumped	Amount You Pumped (mL)	Minutes You Pumped		
1/1	10am	10 min	12 min	5 breast- milk	2 mL	15 min	3 mL	15 min	Yes	Yes- black



# Questions? Call Us!

**A lactation nurse is here to help you!**

Call our breastfeeding helpline at 505-272-6455 (272-MILK).

Call the UNMH Lactation Clinic for an appointment at (505) 272-0480.

## **Other Phone Numbers:**

Mother Baby Unit: (505) 272-2370

Women's Special Care Unit: (505) 272-2518

NBICU (Newborn Intensive Care Unit): (505) 272-2127

ICN (Intermediate Care Nursery): (505) 272-1836

Outpatient Lactation Clinic: (505) 272-0480

Outpatient Newborn Clinic: (505) 272-5964

## **Online Resources**

<https://www.breastfeedinginc.ca/>

<https://globalhealthmedia.org/>

<http://kellymom.com/>

<http://www.llli.org/>

