



Breastfeeding your NICU baby



**NORMAN
REGIONAL**
Health System

NormanRegional.com

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Welcome to Norman Regional Health System **Congratulations from our family to yours!**

Our goal is to provide knowledge and support for your family's newborn feeding plan. Please know we are here to help in any way possible.

Wishing you many happy breastfeedings,
Your Lactation Services Team

Pam
Debbie
Crystal
Jayme
Sarah

Resources

Breastfeeding help

Norman Regional HealthPlex Lactation Services

405.515.3532

Ask for the NRH lactation consultant during business hours, 7 a.m. to 7 p.m. After discharge, call the number listed above.

Oklahoma Breastfeeding Hotline

877.271.MILK (6455)

24/7 urgent call service • Free of charge
Text "OK2BF" to 61222 for non-urgent issues.

Oklahoma Breastfeeding Resource Center

obr.c.ouhsc.edu

Coalition of Breastfeeding Advocates (COBA)

okbreastfeeding.org

La Leche Ligue

LLL.org

Norman Pediatric Associates

405.321.5114

Jennifer Woods, RN, IBCLC

Oklahoma Mother's Milk Bank

okmilkbank.org

405.297.LOVE (5683)

Milk Storage

hmbana.org

Academy of Breastfeeding Medicine

bfmed.org

Droplet

firstdroplets.com

Breastpump Rental/Purchase

Norman Regional Home Medical Equipment

405.307.6620

718 N. Porter

Norman, OK 73071

Open Mon–Fri, 8:30 a.m. to 5 p.m.

ProSource Medical Equipment and Supplies

405.691.3237 or 888.691.3237

6801 S. Eastern Ave.

Oklahoma City, OK 73149

Lakeside Women's Hospital

405.936.1568

11200 N. Portland

Oklahoma City, OK

Mercy Retail Pharmacy

405.752.3590

4300 W. Memorial Rd.

Oklahoma City, OK 73120

Expressing breast milk for your hospitalized baby

Congratulations on the birth of your baby! Mother's milk is by far the best food for premature and sick infants. Your milk is like medicine for baby and can provide necessary nutrients to promote good health, growth and even combat infection.

Whether you have decided to express milk for a short time or to breastfeed for 1-2 years, every drop counts. Pumping breast milk is something only you can do for your baby and is one way for you to participate in your baby's care while in the NICU.

Use a hospital grade double electric breast pump to establish a good milk supply. Norman Regional HealthPlex provides these pumps for use at the hospital when you are an inpatient or when you are visiting your baby in the NICU. A manual breast pump can be provided if you do not have an electric pump at home however it is less powerful and may NOT establish an adequate milk supply for your premature or sick baby. Check with your insurance company to find out how you can get an electric breast pump for use at home.

Regular and frequent pumping for the first 2-3 weeks is very important. This will help your body know how much breast milk to make later. Pumping both breasts at the same time will save you time and increase your milk supply. Some moms can express more colostrum in the first 2-3 days with hand expression. Ask your nurse or lactation consultant to show you how!

Getting started

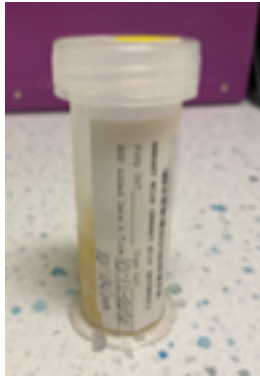
1. **Wash your hands with soap and water.**
2. **Massage your breasts before and while pumping.** Massaging while pumping can help increase the amount of milk expressed. This is called "hands on" pumping (see picture). Soften the breasts as much as possible when pumping as milk left in the breast will tell your body to make less milk.



3. **Center flange on nipple.** If your nipple is rubbing on the flange try the next size bigger. Ask your lactation consultant for a bigger flange if the ones provided do not fit.
4. **Adjust the suction to a comfortable level.** Pumping should not be painful. It is important to find a comfortable level for you.
5. **Pump both breasts for 10-20 minutes, 8-10x per day (or every 2-3 hours).** The hospital pump will start fast then slows after 2 minutes. If your milk flow starts before 2 minutes you can push the button with the milk drops to slow the pump.
6. **Hand express a few minutes after pumping or until the milk flow slows.** This is an important part to expressing breast milk. It will help you establish

your milk supply and is helpful when your breasts are full and you are not near a breast pump. (See hand expression section)

- 7. Date and time the labels and place them on the bottles. Place the colored sticker(s) on the lids.** The bar code on the labels will match the bar code on baby's bracelet. The breast milk and bracelet will be scanned to ensure it is the right milk for the right baby. The colored sticker is a second identifier.



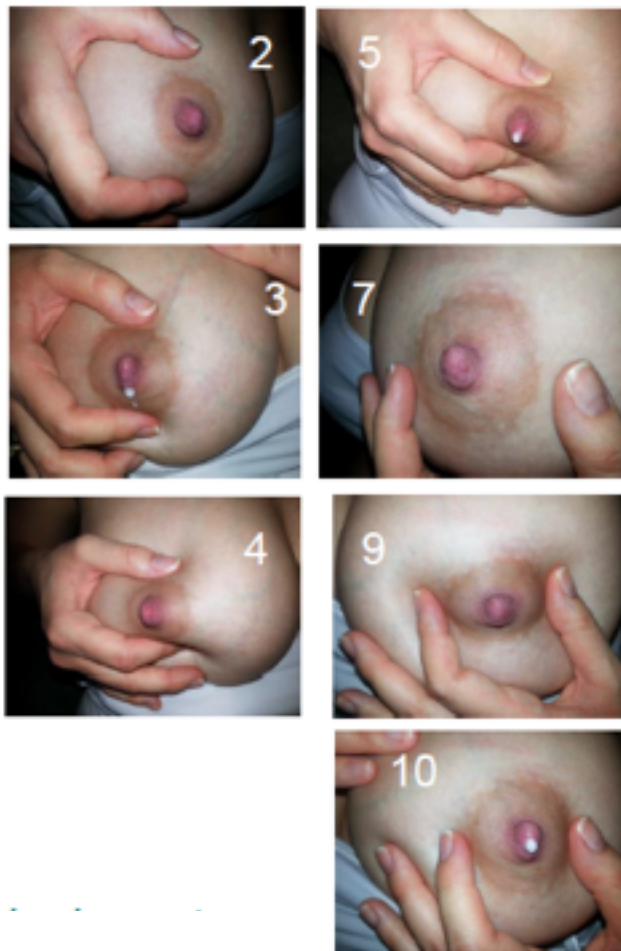
- 8. Record the amount of milk you pumped on the pumping log sheet.** If your milk supply seems to be decreasing after mature milk is established, notify your lactation consultant.
- 9. Wash your pump supplies with warm, soapy water and rinse well.** (See cleaning guidelines section from the CDC.)
- 10. Refrigerate breast milk within one hour for preterm or sick babies.** The NICU will store your milk for your baby. If it will be more than 48 hours before you can bring the milk to your baby place it in the freezer. Use an insulated container with ice or an ice pack to transport your milk to the hospital.

Hand expression

Hand expression is a handy skill to have whenever you need to empty your breasts and you are not with your baby or your baby is temporarily unable to breastfeed. In the first few days after birth, hand expression can be more effective at removing colostrum than using a breast pump. If your baby needs a supplement in the first week or so, use hand expression to provide the milk needed.

Hand expression routine

1. Apply heat, massage, and stroke breasts
2. Position fingers behind areola
3. Press back toward the chest
4. Compress fingers together to express milk
5. Relax and repeat, getting a rhythm going
6. Express for 5-7 minutes
7. Move fingers to a different position
8. Massage and stroke the breast
9. Press back toward the chest
10. Compress fingers together to express milk
11. Express milk for 3-5 minutes
12. Massage and stroke breasts
13. Move fingers to a different position
14. Express milk for 1-2 minutes
15. Complete cycle takes 20-30 minutes



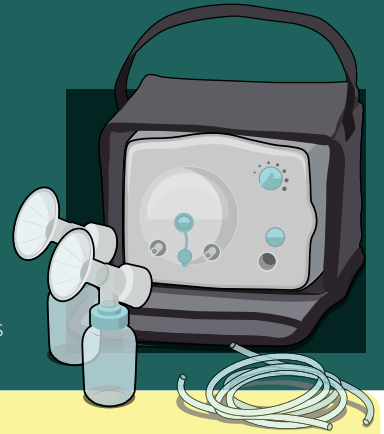
Watch these videos while you are hand expressing to see the technique in action.

- vimeo.com/65196007
- med.stanford.edu/newborns/professional-education/breastfeeding/hand-expressing-milk

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How to Keep Your Breast Pump Kit Clean

Providing breast milk is one of the best things you can do for your baby's health and development. Pumping your milk is one way to provide breast milk to your baby. Keeping the parts of your pump clean is critical, because germs can grow quickly in breast milk or breast milk residue that remains on pump parts. Following these steps can help prevent contamination and protect your baby from infection. If your baby was born prematurely or has other health concerns, your baby's health care providers may have more recommendations for pumping breast milk safely.



BEFORE EVERY USE

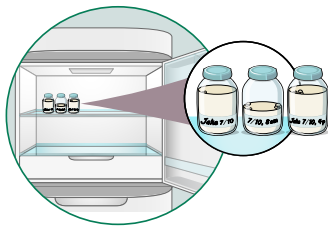


Wash hands with soap and water.

Inspect and assemble clean pump kit. If your tubing is moldy, discard and replace immediately.

Clean pump dials, power switch, and countertop with disinfectant wipes, especially if using a shared pump.

AFTER EVERY USE



Store milk safely. Cap milk collection bottle or seal milk collection bag, label with date and time, and immediately place in a refrigerator, freezer, or cooler bag with ice packs.

Clean pumping area, especially if using a shared pump. Clean the dials, power switch, and countertop with disinfectant wipes.

Take apart breast pump tubing and separate all parts that come in contact with breast/breast milk.

Rinse breast pump parts that come into contact with breast/breast milk by holding under running water to remove remaining milk. Do not place parts in sink to rinse.

Clean pump parts that come into contact with breast/breast milk as soon as possible after pumping. You can clean your pump parts **in a dishwasher** or **by hand** in a wash basin used only for cleaning the pump kit and infant feeding items.

Follow the cleaning steps given on the next page.



Centers for Disease
Control and Prevention
National Center for Emerging and
Zoonotic Infectious Diseases

The first milk

Milk production begins at 4 months of pregnancy. The first milk is called colostrum. Colostrum is thick, clear or yellow milk that comes in very small amounts. You may have difficulty expressing colostrum with a pump. Some moms are able to collect more with hand expression. It is normal if you are only able to express drops of colostrum sometimes. Your breasts will produce colostrum for about 72 hours after delivery when your mature milk transitions in. If you had problems during pregnancy or delivery, your mature milk supply may take longer to come in. It is important to continue expressing regularly despite the amount collected.

Breastfeeding in the NICU

Premature babies can regulate the suck/swallow/breathe patterns around 34 weeks gestation. Once breastfeeding has begun, it can take some time for baby to learn how to remove milk from the breast. Your baby may need to be supplemented with a bottle after breastfeeding initially. Be sure to tell your baby's nurse and neonatologist that you would like to breastfeed so they can get you started as soon as possible! Check out this helpful video for breastfeeding preterm babies: firstdroplets.com.

Skin to skin

Skin to skin (sometimes called Kangaroo Care) can be done in the NICU when the baby is stable. There are many benefits with skin to skin for baby, mom and dad. During skin to skin your body will maintain baby's temperature, facilitate bonding, decrease stress and increase milk supply. You may express more milk if you pump right after doing skin to skin. Dad should do skin to skin with baby, too! Ask the baby's neonatologist and nurse when you can start.



Pasteurized donor breast milk

When a mother does not have enough or any milk for her baby, a doctor can prescribe donor milk. Donor milk from the Oklahoma Mother's Milk Bank is freely given to the milk bank by healthy breastfeeding mothers and is tested and processed for safety.



Goals

- Get your double electric pump for home use, before you discharge.
- Skin to skin with baby as soon as possible.
- Pump 8-10 times in 24 hours (including overnight) for at least 10-20 minutes
- Hand express after every session
- 500-700mL of breast milk in 24 hours by day 7
- 750-1000mL of breast milk in 24 hours by day 14

Troubleshooting

- **Pain:** Common causes may be using the wrong flange size, too much suction or pumping too long. Try using lanolin before and after pumping. Pumping should not be painful!
- **Low milk volume:** Common causes are pumping less than 8 times per day, using a poor quality pump, medications you are taking or stress.
- **If you are making more milk than your baby needs,** do not pump less often. This can decrease your milk supply fast. Milk can be stored up to 6 months in a regular freezer or 1 year in a deep freezer. Additionally, you may be able to donate some milk to the Oklahoma Mother's Milk Bank to help other hospitalized babies like yours!

Nutrition during lactation

- **Drink plenty of water.** Try drinking a tall glass of water every time you sit down to pump.
- **Eat 500 extra calories per day.** Add 500 to your base caloric goal at your ideal weight, more if you had multiples.
- **Caffeine in moderation.** No more than 300 mg per day (2-3 cups).
- **Continue taking your prenatal vitamin.**
- **Eat a healthy, well-balanced diet.** There is no need to avoid certain food groups.
- **Avoid smoking, ingesting or vaping marijuana during breastfeeding.** This can cause feeding problems and increase your baby's risk of SIDS.

Pumping diary

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Midnight							
1 a.m.							
2 a.m.							
3 a.m.							
4 a.m.							
5 a.m.							
6 a.m.							
7 a.m.							
8 a.m.							
9 a.m.							
10 a.m.							
11 a.m.							
Noon							
1 p.m.							
2 p.m.							
3 p.m.							
4 p.m.							
5 p.m.							
6 p.m.							
7 p.m.							
8 p.m.							
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10 a.m.							
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