

CPG0193 Breastfeeding – Preterm babies Transitioning from Nasogastric Feeding to Breastfeeding

Appendix 3

Assessment of Breastfeeding

When assessing a breastfeed the following factors should be considered:

1. Maternal history

- a. Are there any maternal medical conditions that will affect breastfeeding or delay lactogenesis e.g. polycystic ovary disease, hypothyroidism, anaemia, diabetes, obesity?
- b. Are there any anatomical concerns that may affect breastfeeding – flat, inverted or damaged nipples, any breast surgery, lack of breast growth in puberty or lack of breast changes during pregnancy?
- c. Are there any obstetric complications or risk factors that may affect breastfeeding or delay lactogenesis – e.g. postpartum haemorrhage, labour medications?
- d. Is the mother taking any medications which may affect breastfeeding?
- e. What is the mothers past breastfeeding history?
- f. What family and social support does the woman have for breastfeeding?
- g. Are there any emotional or mental health issues, which may affect breastfeeding?

2. Baby history

- a. What is the baby's gestation, Apgar's, current age, birth weight, current weight?
- b. What is the baby's birth history – were there any complications or birth trauma that may affect breastfeeding e.g. chignon, bruising?
- c. Does the baby have any medical or anatomical problems that might affect breastfeeding e.g. tongue tie?
- d. What is the baby's behaviour – alert, settled, sleepy, irritable, vigorous?
- e. Is the baby's urine and stool output appropriate for its age?
- f. What are the baby's vital signs? Do they indicate a potential problem?

3. Positioning and attachment

- a. Is the baby well positioned and correctly attached at the breast?
- b. Is the mother experiencing any pain or discomfort when the baby is breastfeeding?
- c. Is the baby able to maintain attachment or does the baby pull on and off or fall off easily?
- d. Have different positions been tried?

4. Frequency and duration of breastfeeding

- a. Is the baby showing appropriate feeding cues? Is the mother able to respond appropriately?
- b. Is the baby sucking strongly or is the baby's suck weak and disorganised?
- c. What are the baby's feeding patterns – how often and how long is the baby feeding, is the baby feeding from one or both breasts, is the baby active or sleepy during feeds?
- d. Is milk transfer occurring – is there deep sucking and swallowing?
- e. Does the mother feel signs of milk let down or softening of a full breast after a feed?
- f. Is the baby receiving any top up feeds and if so what, how much, method of top ups, and why?