



Caring for Yourself & Your Newborn

ECHN  Charitable Foundation
FAMILY BIRTHING CENTER

AT MANCHESTER MEMORIAL HOSPITAL

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Congratulations!

Congratulations on the birth of your new baby! We know that being a new parent can be difficult, especially during the first weeks. This guide was written to help you navigate through the first few weeks and months with your baby. It includes useful information and helpful hints about caring for you and your new baby.

Always remember that the SBM Charitable Foundation Family Birthing Center and your health care providers are here to help you, any time you need it. Just call 860.647.4735



Caring for Yourself

Changes to Your Body

Postpartum

The word “postpartum” means “after birth.” It is a word used to define the six weeks after your baby is born when the pregnancy-related changes in your body are gradually reversed. The changes discussed below are many of the things that will occur over these six weeks.

The Uterus

Now that the baby is born, the uterus begins the slow process of shrinking back to its normal size. Your uterus will shrink about the width of one finger a day. After about ten days, it will be small enough to be hidden inside your pelvis where you can no longer feel it.

Afterbirth Pains

As the uterus shrinks, its muscle fibers contract, causing afterbirth pains. This mild cramping is most noticeable in the first 3-4 days following delivery, particularly for women who have had previous deliveries. If you are breastfeeding, you may feel more cramping during feeding. If necessary, you can take acetaminophen or ibuprofen on your doctor’s advice and place something warm on your belly for relief. On a positive note, these cramps help shrink the uterus faster and reduce blood loss after delivery.

Lochia (vaginal discharge)

Lochia is like a heavy period with bright red bleeding, beginning right after you give birth. It will get lighter and go away within 3-6 weeks. The color changes from bright red, to pinkish-brown, to creamy yellow and then stops. If you are not breastfeeding, you can expect to see your first normal period within 6-8 weeks of the birth. If you are breastfeeding, you may not have a period this soon. Be aware that even before you get your first period, you can still get pregnant again. If bleeding that has slowed down and changed color then goes back to bright red, you may be overdoing it. If so, get plenty of rest and if the bleeding doesn’t slow down, call your doctor.

When to call your doctor:

- If you soak more than one pad per hour
- If you pass a clot bigger than 1.2 inches in diameter
- If there is a foul odor to the lochia

Changes to Your Body

Perineum

The perineum is the area between the vaginal opening and the rectum. The perineum should be rinsed and cleaned with warm water every time you go to the bathroom. You can use the squeeze bottle you used in the hospital, a handheld shower nozzle or a sitz bath that you can buy from a pharmacy. Gently pat dry with toilet paper or moist wipes. Washing or wiping should occur from front to back to prevent contamination of the birth canal and avoid potential infection. Change sanitary pads frequently to absorb the discharge and avoid infection.

If you have had a tear or an episiotomy, it may take up to six weeks to heal. Follow the above care instructions; an episiotomy will heal quickly if kept clean and dry. If you are experiencing pain in this area, the occasional use of antiseptic spray or pads may provide some relief. Stitches do not need to be removed – they will dissolve on their own. You may see tiny pieces of stitches in your underpants or in the toilet as they dissolve. In addition, you may feel some itching or pulling as this area heals.

When to call your doctor:

- Increased perineal pain
- Increased swelling
- Foul-smelling discharge

Changes to Your Body



How to Care for Yourself after a Cesarean Birth

If you have had a cesarean birth, look at your incision every day. It is okay to get the incision wet – just pat dry gently. If you have small adhesive bandage strips on the incision, do not remove them; let them fall off by themselves. You may trim the curling edges.

A cesarean birth is major surgery. It is important that you give your body time to heal. Do not lift anything heavier than your baby, return to work or have intercourse until you have seen your doctor at your six-week checkup. You also should not drive for 3-4 weeks.

When to call your doctor:

- Redness or swelling of the incision area
- Extra tenderness or pain
- Drainage or bleeding
- Temperature of more than 100.4° F

Changes to Your Body

Common Discomforts

Muscles/Joints

In the day or two following childbirth, you are likely to have aches and pains in your muscles and joints, especially in your abdomen, neck, shoulders, arms and back. The joints of your hands and fingers may feel stiff because of extra fluid in those areas. All of this discomfort will resolve with time, as you resume your normal activities.

Varicose Veins

If you have developed varicose veins during pregnancy, leg elevation and use of an elastic support hose when walking or standing is recommended for the first 6 weeks following delivery.

Hemorrhoids

Hemorrhoids are swollen, irritated veins of the rectum. The itching and burning is best treated with the use of cold compresses, topical ointments and pain medications that your doctor has prescribed. Your doctor may also recommend that you take a laxative or stool softener. Make sure you include lots of vegetables, fruits and grains in your diet as well.

Bowels

Your bowels may be slow to get moving again after delivery. You most likely won't have your first bowel movement for 2-3 days after delivery, which may cause you to feel bloated or gassy. You can ask your doctor if you should take a laxative or a stool softener to make it easier for you to pass your first bowel movement. In addition, walking can help your bowels begin to return to normal.

Bladder

Your bladder may not empty right away after delivery. Your nurse will try to help you to urinate on your own, but if you cannot, a tube called a catheter may need to be inserted into your bladder to empty the urine. Once you start urinating, you may find that you go frequently as your body gets rid of all the extra fluid it collected during your pregnancy.

When to call your doctor:

- You are using the bathroom frequently but only passing small amounts of urine
- It stings or burns when you urinate
- You have a fever of more than 100.4° F with the above symptoms

Changes to Your Body

Eye Hemorrhages

Sometimes when you push really hard to deliver your baby, you can have bleeding beneath the “white” of the eye. This clears by itself without special treatment in a few weeks.

Hair Loss

A few weeks after delivery, you may find that you are losing large amounts of hair. This is normal and your hair will soon return to its normal growth cycle, but it may take several months.

Skin Changes

The hormones that helped you stay pregnant and grow your baby also may have caused many skin changes. If you developed blotches on your face, a “dark line” on the lower abdomen or red rashes on your skin, you can expect them to disappear gradually over several months following childbirth. Unfortunately, stretch marks fade gradually to silvery lines, but do not disappear altogether.

Nutrition

Many women are surprised that after delivery, they don’t seem to have lost any weight. In fact, you can weigh more after you deliver than you did before because of the extra fluids you are carrying from the pregnancy and from the IV fluids you received during labor.

Eating a well-balanced diet that includes foods high in iron and calcium, like meats and dairy products, can help get you back to normal. Breastfeeding mothers generally burn about 500 extra calories each day. This helps with postpartum weight loss. Drink plenty of juices, milk and water and avoid sodas and caffeinated beverages.

Breastfeeding moms can eat pretty much anything they want. If something you eat seems to affect your milk so that your baby becomes irritable, try to cut that food out of your diet for a couple of weeks and see if it makes a difference. Continue to take your prenatal vitamin or other multivitamin.

Bathing

Doctors prefer that postpartum moms take showers instead of baths. If you want to soak your perineum in warm water, it is preferred that you use a sitz bath, which can be bought at your local pharmacy. A sitz bath is less likely to cause infection than a regular bath.

Changes to Your Body

Breast Care

Whether you are breastfeeding or bottle feeding, you can expect your milk to come in 3-5 days after delivery. You can wear a supportive bra for comfort, but avoid underwire bras as they may cause plugged ducts. Ice packs or cold compresses held on the breasts for 20 minutes can be soothing and reduce swelling. Take acetaminophen or ibuprofen with your doctor's permission. A daily shower is all the cleaning your breasts and nipples require.

Breastfeeding

If your breasts are uncomfortably full, take a warm shower or place warm soaked cloths on the breasts and then feed the baby. Use cold packs between feedings, but warm packs before feedings. Full breasts may make it difficult for the baby to latch on, so use a pump or hand express some milk to soften the breast a bit. This overfull feeling will subside within a few days. Watch for signs of mastitis, which is a red, sore area on the breast (it may be under the arm or up to the shoulder), fever higher than 101° F and flu-like symptoms. Call your doctor if you develop these symptoms. See page 14 for more information about breastfeeding.



Formula Feeding

Breasts will fill and get firm and sore. Apply ice packs to breasts – not warm soaked cloths. Avoid breast stimulation or expression of milk. Expect to be uncomfortable for 24-36 hours. See page 30 for more information about formula feeding.

Exercise

Increase your activities gradually! Exercise may be started after one week, and one of the best first exercises you can do is to go for a walk. If the weather is pleasant, you and your baby can go outside. Make sure to protect the baby from direct sun and crowded places. Remember to not lift anything heavier than the baby. Avoid climbing a lot of stairs.

Adjusting to Your Life After Baby Arrives

Emotions

The birth of a baby can be a time of many confusing emotions. You may feel a range of emotions, from happy to sad to worried and scared. A baby puts large demands on your time and you will be constantly thinking about the baby or doing something for the baby. However, as challenging as they are, these early weeks and months go by quickly and you should do your best to enjoy them to the fullest. New parents can benefit from the help of family and friends. Don't feel like you have to do it alone. If someone is willing to help, let them!

Baby Blues

Three days or so after the baby is born, you find yourself at home, on little sleep, with your milk just coming in and the baby needing to be fed every two hours. On top of all that, your loved ones are calling or visiting and you feel stressed out because you feel the need to entertain them all. Who wouldn't get the blues?

About 80% of new mothers experience what is called the baby blues, which start about 72 hours after the baby's arrival. This happens partly because your body's hormonal balance is working to get back to its pre-pregnancy state. Other reasons this happens are fatigue, stress and the difficulty of adjusting to this major life change. Fathers can experience these blues as well, but their response tends to be different from the female response. Women may get emotional and experience mood swings, while men may take up a new hobby that takes them out of the house for significant periods of time.

If you feel that you are getting the blues, remember that this is normal and should only last from a few days to a week or so. Try to minimize visitors, and for those who do come, let them help you fold laundry or do the dishes and don't worry about entertaining.

Partners should be aware that asking, "What's wrong?" all the time only puts more stress on the new mother because she really has no answer to that question. If these feelings last more than two weeks, consult with your doctor, as you could be experiencing postpartum depression and may require treatment.

Adjusting to Your Life After Baby Arrives

Postpartum Depression

Postpartum depression may start as early as 2-3 days after delivery, or could take several weeks or months to develop. Women struggling with postpartum depression may experience symptoms similar to those of baby blues, but they will be more intense.

Other symptoms may include:

- Loss of appetite
- Crying spells
- Feelings of hopelessness or loss of control
- Over concern or no concern at all about the baby
- Fear of touching the baby
- Little or no concern about your own appearance
- Inability to sleep or need of excessive sleep

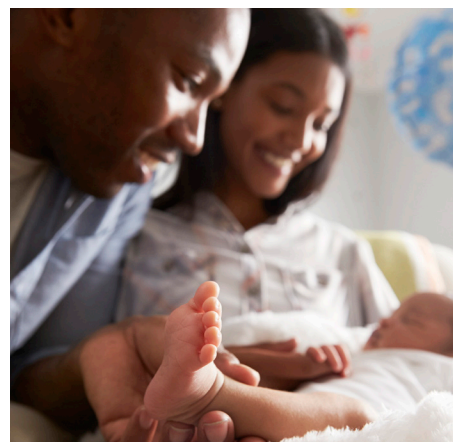
Although healthcare providers are not sure what causes such extreme reactions, most believe postpartum depression stems from the physical and emotional adjustment of having a baby. It is important to realize that these symptoms are not a sign of weakness or inadequacy.

At the onset of these changes, contact your healthcare provider. Treatment may include medication, counseling or a combination of both, and in some, more severe cases, hospitalization. With proper treatment, most women recover fully. Above all, remember postpartum depression is a real condition and help is available. Please call your healthcare provider to see what can be done.

The New Father/Partner

Sometimes, the father/partner experiences feelings of neglect or loneliness after the baby joins the family because it seems like the mom and baby are getting all of the attention. It is important to remember that things do get better and the mom will soon have more time for her partner. Meanwhile, it is important to share your feelings and communicate!

The mom can help this transition by making sure that she includes the father/partner in the baby care. You can plan some time for a walk together or a quiet dinner when the baby is sleeping. Healthy adult relationships are important to the baby's emotional well-being, as well as your own.



Adjusting to Your Life After Baby Arrives

Sexual Relations

It is recommended that you avoid intercourse until after you have seen your doctor for your six-week checkup. Do not use tampons and do not douche. Once you do resume sexual relations, you may find that you have some vaginal dryness, especially if you are breastfeeding. This is normal and can be relieved by using a personal lubricant. Until you make a decision about birth control, use condoms, as they prevent infection (including HIV) and prevent pregnancy.

You and your partner might find that fatigue, the demands of the baby and concerns about discomfort may make it difficult to resume your sexual relationship. It is important to discuss this with each other. Set some time aside just for the two of you so that you can get “reacquainted.” If the problems continue, discuss them with your healthcare provider.

Tips to Stay Rested

New parents have said that the toughest thing about life with a new baby is the extreme fatigue that goes along with it. You start with the end of pregnancy when all of the discomforts make it hard to sleep and then labor takes more of your energy. After delivery, visitors, nurses and your own discomforts interrupt your sleep in the hospital. Now you are home and the baby needs your care and attention around the clock.

Suggestions that might help:

- Take it easy for at least two weeks
- Take care of yourselves and the baby
- Let the visitors take care of housework and other chores
- Sleep when the baby sleeps
- Keep things simple and relaxed at home
- Be sure to ask for what you need. Do not expect others to know
- If you have older kids, arrange for someone to watch them, so you and the baby can nap
- Use any relaxation techniques you know. You can try your childbirth breathing and some relaxing music



Caring for Your Newborn

Is Your Baby Sick?

Fever

A newborn's normal temperature should be between 97.6° F and 99.6° F. If you suspect the baby has a fever, take his or her temperature with a digital thermometer. Place the tip of the thermometer in the armpit and gently hold the arm down to maintain good skin contact. If the reading is above 100.4° F, your baby may have a fever. Check again in 30 minutes and if his or her temperature is still high, call your pediatrician about what steps to take next.

Your doctor may ask you to check the baby's temperature using the rectal method. You might want to consider purchasing a digital thermometer designed specifically for taking an infant's rectal temperature. Follow the manufacturer's instructions. Ear-type (tympanic) thermometers are okay for older children, but the above methods are better for infants. Pacifier-style thermometers and thermometer strips are no more accurate than feeling the baby's skin to see if it is warm.

A baby with a fever should be dressed lightly, encouraged to drink lots of fluids, and may be given acetaminophen drops (with your doctor's permission). DO NOT use aspirin because of the danger of Reye's syndrome (a rare condition that affects children and causes swelling of the liver and brain).

When to call your pediatrician:

- A baby less than 2 months old with a fever greater than 100.4° F (especially if accompanied by poor feeding, pale skin, vomiting, lethargy or irritability)
- Any child with a fever over 103° F
- Fever plus a rash, or fever lasting more than 2-3 days

Colds

Babies are nose breathers, so a cold can be particularly distressing to them. Colds can take 7-10 days to run their course. You may use a soft rubber bulb syringe before feedings and sleep to clear nasal passages. Do this as little as possible to avoid irritating the nose. Thick and dry nasal secretions may be softened with a few drops of warm water or salt water in each nostril 3 or 4 times a day. (Make salt water by dissolving ¼ teaspoon salt in ½ cup of warm water). A cool mist vaporizer may also help, as well as elevating the head of the crib with a thin pillow or blanket under the mattress (NOT directly under the baby's head). Remember that colds are caused by viruses caught from others, NOT by fresh air or cool weather.

When to call your pediatrician:

- Advice needed on how to medicate the baby properly
- Coughing to the point of vomiting, deep chest cough, labored breathing and wheezing
- Colds lasting longer than two weeks
- Fever developing several days after a cold begins

Is Your Baby Sick?

Vomiting/Diarrhea

Dehydration is the main concern with a baby who is vomiting and/or has diarrhea. A young infant can become dehydrated in as little as four hours if the symptoms are severe. Water or juice is not enough to replace fluids lost this way. In fact, too much plain water can actually be harmful to the baby. Oral electrolyte solutions, sold near the formulas in drug stores and groceries, may be necessary. Illnesses with these symptoms are very contagious, so wash your hands frequently and well after all diaper changes and before preparing food.

When to call your pediatrician:

- Baby unable to retain clear fluids or not interested in drinking
- Bloody stools
- Bright yellow or green vomit
- Diarrhea lasting longer than 7 days
- Fever (over 100.4° F)
- Signs of dehydration: decreased urine (several hours without detectable output), dry, tacky mouth, sunken eyes and lethargy

Is Your Baby Sick?

Jaundice

Jaundice is a common occurrence in newborns related to their immature livers and inability to effectively break down old blood cells. This causes a substance called bilirubin to build up in their systems which, in turn, causes a yellow discoloration of the eyes and skin. Low levels of bilirubin are harmless, but if the level becomes high enough, it can have serious consequences.

Signs of jaundice may include:

- Decreased bowel movements
- Excessive sleepiness/lack of activity
- Yellow tint to skin and eyes

Your doctor may ask you to bring the baby in for a simple blood test to determine whether your baby's jaundice needs to be treated. Treatment may be as simple as increasing feedings to help the bilirubin pass out of the baby's system in the urine and stools, or it could include the use of special lights that help break down the excess bilirubin. This is called phototherapy and usually requires that the baby return to the hospital for a day or two.

Ear Infections: 6 Symptoms to Look out for

Babies get ear infections more easily because the Eustachian tube in their ear is shorter and more horizontal, so it is easier for bacteria to travel from the nose and throat area to the middle ear. Symptoms may begin just as the baby seems to be improving from a cold.

Symptoms may include:

1. Increasing irritability or restlessness
2. Disrupted sleep
3. Seeming more comfortable when held upright (because lying down causes increased pressure and pain)
4. Eating less (because sucking and swallowing hurts)
5. Fever
6. Redness or swelling behind the ear

Breastfeeding Basics

Congratulations on your decision to feed your baby in the healthiest way possible.

The American Academy of Pediatrics states: “[We are] committed to improving the health of all children. We recognize breastfeeding’s role in creating the best possible health, developmental, and psychosocial outcomes for the infant. Therefore we recommend breastfeeding as the sole source of nutrition for infants for about the first six months; breastfeeding in combination with solid foods through at least twelve months; and continued breastfeeding thereafter for as long as mutually desired by mother and baby.” The benefits of breastfeeding extend beyond the baby, to the mother and other family members. Breastfeeding education and support can help you have a good breastfeeding experience.

The following information covers only the very basics of breastfeeding in the early months. Your nursing staff and lactation consultants will work together to provide additional support during your hospital stay.

Benefits of Breastfeeding

The benefits of breastfeeding are well-known and all other feeding options are very different from it. In addition, the more breast milk an infant receives over time, the more of the benefits the child receives.

Some specific benefits to the child are:

- Contribution to higher IQ, better eyesight, improved vaccine effectiveness and better jaw and dental development
- Decreased risk and severity of diarrhea and stomach viruses, ear infections, bronchitis, pneumonia, asthma and urinary tract infections
- Possible protective effect against Sudden Infant Death Syndrome (SIDS), allergies, diabetes, childhood cancers and obesity

Breastfeeding also benefits the mother:

- Assistance with postpartum weight loss
- Decreased risk of osteoporosis, diabetes, and breast, ovarian, endometrial and uterine cancers
- Lower risk of postpartum bleeding

Breastfeeding Basics

Feed your baby on cue (8 times a day minimum)

Babies show you signs of hunger. These signs are also called cues, and include:

- Fussing or crying
- Moving mouth and tongue
- Putting hands in mouth
- Rooting (opening mouth wide and turning head to the side)
- Smacking noises
- Small sounds

Your baby will show you these cues many times throughout the day and night. To be sure your baby eats often enough, put your baby to breast as soon as you see these cues. It can be normal for babies to “cluster feed” (feed frequently during a several hour period), to feed more often at night, and to feed at only one breast per feeding.

Keep your baby close to you - day and night

By keeping your baby close, you are more likely to notice early feeding cues. A baby who is held skin-to-skin is more likely to cue during early hunger and will feed every 2-3 hours, which is important in the early weeks. They will also be more relaxed and have better feedings.

Encourage your baby to have a deep latch on the breast

Babies who are latched and positioned properly on the breast are better able to massage the milk out of the breast and feed better. When the baby’s tongue is massaging the breast, not the nipple, you are more likely to have pain-free feedings and avoid sore nipples.

Note the number of baby’s bowel movements and wet diapers each day

Adequate bowel movements are generally a good sign that your baby is getting enough milk each day. Regular weight checks at your baby’s doctor’s office are another good way to know that your baby is getting enough milk to grow well. Expect 1-2 bowel movements and 1-2 wet diapers in the first two days, increasing to 2-4 bowel movements and 2-4 wet diapers in the following two days. Once your mature milk has come in, expect at least 4 bowel movements and 6 wet diapers every 24 hours. It can be normal for bowel movements to become less frequent after 5 weeks of age.

Breastfeeding Basics

Your baby is receiving enough milk to grow appropriately if:		
From 0 - 4 days of life	From 5 days - 5 weeks of life	After week 5
<ul style="list-style-type: none">• Your baby is feeding frequently (at least 8-12 times in 24 hours)• Your baby has not lost more than 7% of birth weight• Your baby has 1-2 wet diapers and bowel movements in the first two days• Your baby's output increases to 2-4 wet diapers and bowel movements the following two days	<ul style="list-style-type: none">• Your baby cues to feed frequently (at least 8-12 times in 24 hours)• Your baby has regained his or her birth weight by 14 days• Your baby is gaining at least 4-8 ounces each week• Your baby has at least 3-4 yellow, loose bowel movements and 6 wet diapers each day	<ul style="list-style-type: none">• Stooling patterns may change dramatically after 5 weeks of age. It can be normal at this age for a healthy, exclusively breastfed baby to have a decreased amount of stool each day or to have no stool for several days. Your baby should still have at least 6 very wet diapers each day

Avoiding Common Breastfeeding Difficulties

Many mothers report that breastfeeding is sometimes difficult during the first month, after which it usually gets considerably easier. Breastfeeding difficulties are often avoidable and when they do arise, address them as soon as possible. Access to appropriate breastfeeding information and support is very important during this time. Below is a list of common difficulties and how to lower your risk of experiencing them:

Low milk supply/slow weight gain

While many mothers worry that they don't have enough milk, true milk insufficiency is rare. Usually, by following some basic breastfeeding guidelines, a mother makes enough milk for her baby.

- Keep your baby close, day and night
- Feed your baby at early feeding cues beginning within an hour of birth
- If your baby is not cueing frequently (at least 8-12 times in 24 hours), wake your baby to feed every 3 hours during the day and every 4 hours at night
- Encourage your baby to latch on to the breast with a wide-open mouth and flanged lips (making sure the lips are not tucked in)
- Allow your baby to finish the first breast before offering the second breast

Breastfeeding Basics

- Remember that often one breast is enough for a feeding
- Avoid artificial nipples (bottles and pacifiers) for at least the first 4 weeks
- Avoid formula, unless medically necessary
- Compressing and massaging the breast during feedings will keep the baby alert and actively swallowing

Plugged ducts/breast infection

A plugged duct is a milk duct that is not draining properly. It may feel like a sore, hard spot on your breast. A plugged duct that becomes infected can cause mastitis (breast infection). To help prevent mastitis, you can:

- Either wear no bra or a very loose, non-underwire bra
- Feed your baby frequently on early feeding cues (8-12 times in 24 hours)
- Allow your baby to finish the first breast before offering the second breast
- Encourage your baby to latch on to the breast with a wide-open mouth and flanged lips (making sure the lips are not tucked in)
- Get adequate rest (sleep when the baby sleeps)
- Avoid use of a pacifier

How to Position and Latch Your Baby at Your Breast

When a baby is latched and positioned correctly at the breast, the baby is more likely to feed well and the mother is less likely to experience sore nipples.



Positioning

A baby who is positioned correctly at the breast is more likely to latch on well. Try to position baby belly-to-belly when offering the breast.

Breastfeeding Basics

Sore nipples

While it may be normal to experience slight nipple soreness during the first 1-2 weeks, breastfeeding should not be painful and any soreness should not last through an entire feeding. Nipple trauma (blisters, cracks, etc.) is a sign of an incorrect latch and/or suck.

- Encourage your baby to latch on to the breast with a wide mouth (like a yawn) and flanged lips (making sure the lips are not tucked in)
- Position your baby with the bottom lip on the edge of your areola, then pull your baby toward the breast when he or she opens wide
- Hold your baby belly-to-belly when offering the breast so that it is not necessary for your baby to turn his or her head to latch on to the breast
- Feed your baby on early feeding cues when he or she is more relaxed
- If you need to take your baby off the breast, release the suction first by inserting a finger into the corner of your baby's mouth
- Avoid using any soap or lotions on your breast (other than purified lanolin sold exclusively for the treatment of sore nipples)
- Avoid artificial nipples (bottles, pacifiers) for at least the first 4 weeks
- Allow your nipples to be exposed to air
- Contact your lactation consultant if sore nipples do not resolve



Breastfeeding Basics

Engorgement

It is normal to experience breast fullness between days 2-5. This is a sign of onset of mature milk. This feeling will usually diminish within 3-5 days.

- Feed your baby frequently, on early feeding cues (8-12 times in 24 hours) beginning within an hour of birth
- Allow your baby to finish the first breast before offering the second breast
- Encourage your baby to latch on to the breast with a wide mouth (like a yawn) and flanged lips (making sure the lips are not tucked in)
- Avoid water or formula supplements unless medically necessary
- If your breasts are feeling uncomfortably full, apply heat prior to feeding or pumping and cold after feeding or pumping
- Pumping will signal your breasts to make more milk. If your baby is having difficulty latching on, you can pump to soften the breast, but resist the urge to pump for more than a minute or two. Hand expression can also help soften the breast and relieve discomfort

Take Precautions Regarding Maternal Medication

Many mothers are advised to temporarily or permanently wean their baby from the breast because a prescribed medication is not safe for the breastfed baby. Most medications are safe to use while breastfeeding and of those that are not, a safe alternative usually exists. Check with your provider or lactation consultant before taking any medication while breastfeeding.

Breastfeeding Basics

Milk Storage Guidelines

Freshly expressed breast milk may be safely stored for the following amount of time:

- Room temperature: capped until next feeding within 4 hours
- Refrigerator: up to 5 days (at 32-39° F)
- Home freezer: up to 3 months
- Deep freezer: 6-12 months with a constant temperature of 0° F

You need to use care in storing and reheating your breast milk, to preserve nutrients.

- You may keep thawed breast milk (previously frozen) safely in the refrigerator for 24 hours
- Freeze breast milk in small portions, generally 2-4 ounces per container, to reduce waste
- Leave additional space in the top of the container if you intend to freeze the breast milk, because liquids expand when they freeze
- If storing breast milk in plastic bags, use breast milk storage bags or disposable bottle bags and double-bag the breast milk
- If breast milk will be stored in the refrigerator or freezer, write the date on the container
- To defrost milk, run the closed container or bag under warm running tap water or place in a bowl of warm water
- Microwaving expressed breast milk is NOT recommended. Microwaving breast milk changes various properties of the breast milk and may make the milk so hot that it burns the baby's mouth
- It is normal for the color of breast milk to vary and for the cream to rise to the top. Gently swirling the milk distributes the cream into the rest of the milk



Breastfeeding Basics

Renting or Purchasing a Pump

Manchester Hospital's Family Birthing Center rents Medela Symphony hospital grade breast pumps. Also available are personal use pumps, replacement parts for Medela and Spectra pumps and other breastfeeding supplies at reduced prices.

Call 860.647.4790 for more information.

Community Breastfeeding Resources

ECHN Lactation Consultants	860.647.4790, option 2
Lactation Consultant for patients of Manchester Ob/Gyn	860.742.6231
Family Birthing Center at Manchester Memorial Hospital	860.647.4735
La Leche League of CT warm line	860.563.6624

Write in helpful phone numbers below for easy access

La Leche League Leader in my area _____

Lactation Consultation in my area _____

My baby's healthcare provider _____

My healthcare provider _____

Additional notes:

Breastfeeding Log

Breastfeeding Log

Mark the number of feeds, wet diapers and bowel movements (BMs) your baby has every 24 hours. The solid pink boxes indicate the minimum number to expect for the day as a sign that your baby is receiving enough milk.

Day 1											
Feeds (offer breast at least every 3 hours)											
12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	9 am	10 am	11 am
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wet diapers											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bowel movements (BM color: black meconium)											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Day 2											
Feeds (6 feedings in 24 hours minimum)											
12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	9 am	10 am	11 am
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wet diapers											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bowel movements (BM color: black meconium)											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Breastfeeding Log

Day 3

Feeds (8 feedings in 24 hours minimum)

12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	9 am	10 am	11 am
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wet diapers

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Bowel movements (BM color: black/green/brown)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Day 4

Feeds (8 feedings in 24 hours minimum)

12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	9 am	10 am	11 am
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wet diapers

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Bowel movements (BM color: yellow/brown)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Breastfeeding Log

Day 5											
Feeds (8 feedings in 24 hours minimum)											
12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	9 am	10 am	11 am
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wet diapers											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bowel movements (BM color: yellow/seedy)											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Day 6											
Feeds (8 feedings in 24 hours minimum)											
12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	9 am	10 am	11 am
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wet diapers											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bowel movements (BM color: yellow/seedy)											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Breastfeeding Log

Day 7

Feeds (8 feedings in 24 hours minimum)

12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	9 am	10 am	11 am
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wet diapers

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Bowel movements (BM color: yellow/seedy)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Day 8

Feeds (8 feedings in 24 hours minimum)

12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	9 am	10 am	11 am
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wet diapers

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Bowel movements (BM color: yellow/brown)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Breastfeeding Log

Day 9

Feeds (8 feedings in 24 hours minimum)

12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	9 am	10 am	11 am
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wet diapers

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Bowel movements (BM color: yellow/seedy)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Day 10

Feeds (8 feedings in 24 hours minimum)

12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	9 am	10 am	11 am
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wet diapers

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Bowel movements (BM color: yellow/seedy)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Breastfeeding Log

Day 11

Feeds (8 feedings in 24 hours minimum)

12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	9 am	10 am	11 am
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wet diapers

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Bowel movements (BM color: yellow/seedy)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Day 12

Feeds (8 feedings in 24 hours minimum)

12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	9 am	10 am	11 am
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wet diapers

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Bowel movements (BM color: yellow/brown)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Breastfeeding Log

Day 13

Feeds (8 feedings in 24 hours minimum)

12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	9 am	10 am	11 am
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wet diapers

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Bowel movements (BM color: yellow/seedy)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Day 14

Feeds (8 feedings in 24 hours minimum)

12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	9 am	10 am	11 am
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wet diapers

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Bowel movements (BM color: yellow/seedy)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Breastfeeding Log

Day 15											
Feeds (8 feedings in 24 hours minimum)											
12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	9 am	10 am	11 am
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wet diapers											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bowel movements (BM color: yellow/seedy)											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Formula Feeding

Preparing Formula

Your baby's doctor will help you decide what brand and type of formula is appropriate. Once you know what brand you are looking for, the next decision to make is whether to use ready-to-feed, liquid concentrate or powder. Ready-to-feed is the most expensive and powder, the least.

It is very important to follow the instructions on the formula container exactly. If you need to add water you can use tap water, unless you have well water, or are not sure of the safety of your water supply. If that is the case, you should use bottled water or water that has been boiled for approximately one minute and then cooled to room temperature.



Bottles, nipples, pacifiers and other utensils used to prepare formula or feed the baby should be clean. If the water in your home is chlorinated, you can simply use your dishwasher or wash the utensils in hot tap water with dishwashing detergent and then rinse them in hot tap water. For non-chlorinated water, place the utensils in boiling water for five to ten minutes.

How to Bottle Feed

Your baby should be held while being fed. Bottle feeding, like breastfeeding, is a social interaction. It is an important part of the bonding and learning process for you and your infant. Babies like to look at your face while they feed. It has been recommended that you consider switching the arm that you use to hold the baby during a feeding to give him or her some variety.

Some busy parents might consider propping the bottle with a blanket or a toy. This however places the baby at risk for inhaling or choking on the milk or for milk to enter the middle ear which could cause an infection. Instead, at feeding time choose a comfortable seat with arms or a pillow to support your arm as you cradle the baby in a semi-upright position. Allow the milk to fill the nipple completely and then touch the baby's lips or cheek with the nipple until he or she opens the mouth. Place the nipple in the mouth and allow him or her to suck and swallow naturally.

Formula Feeding

Bottle Feeding Safety Tips

- Check the expiration date
- Wipe the top of all multi-use containers before opening
- Always follow manufacturer instructions exactly
- Use only BPA free bottles
- Prepared bottles and opened cans of liquid formula can be kept in the refrigerator for up to 48 hours
- Prepared formula can be left out at room temperature for up to 2 hours
- Discard the unused formula left in the bottle after a feeding. Bacteria from the baby's mouth will multiply in the warm formula
- Cold or room temperature formula is safe for a baby, however may not be preferred. You can warm formula by running hot tap water over the bottle or letting the bottle sit in a pan of hot water. DO NOT use the microwave. Test the temperature of the formula before feeding by shaking the bottle well and sprinkling a few drops on the insides of your wrist

Burping and Spitting Up

Burp your baby after about 2-3 ounces. Hold the baby up on your shoulder or sit him or her in your lap with one hand cradling the head and chin and the other supporting the back. Pat or rub the back for 3-5 minutes. If the baby does not burp, it may just mean that there is no extra air in the tummy, and you can resume the feeding.

It can be natural for babies to spit up small amounts of formula when they burp or drool. Larger amounts may mean the baby has eaten too much for his or her tiny tummy. If you are concerned about the amount your baby is spitting up consult the doctor.

Formula Feeding

How Much to Feed

As a general rule, babies that are between birth and six months of age need 2 to 2 1/2 ounces of formula for every pound of body weight per day. So, if your baby is 8 1/2 lbs, he or she might be expected to drink 22 ounces of formula over a 24 hour period.

In the first month, your baby is likely to eat every 3-4 hours so that means anywhere from 2-4 ounces at a feeding. It is a good idea to wake a baby after 5 or 6 hours if the baby doesn't wake to feed on his or her own.

From one month to six months your baby will gradually increase to taking 6-8 ounces at approximately 4 or 5 feedings in a 24-hour period. Babies generally let you know when they have had enough to eat by refusing to open their mouths or by being fidgety and distracted. Allow the baby to decide when the feeding is over even if the baby has not taken as much as you expected. The baby will likely make up for it at a later feeding.

Some babies seem to want to eat more than expected, but all they really want is more sucking time than they can get with the bottle. Try using a slower flow nipple or allow the baby to use a pacifier or suck on a clean finger until he or she settles down.

Introducing Solid Food

When your infant reaches approximately 5-6 months of age the baby will begin to sit on his or her own and grab for things to put in his or her mouth. This is the time to talk to your pediatrician about whether you should begin introducing solid foods into baby's diet.

Infant Care

Bathing

You do not need to bathe your baby every day and in fact, every other day is enough and better for the skin. Daily cleaning of the hands, face and diaper area is all that is required. Bathing your baby in warm water up to the chest is more comfortable and is acceptable, even if the umbilical cord has not yet fallen off. There are three important things to keep in mind when bathing your newborn.

- Keep the baby warm
- Wash from clean to dirty (face and eyes first, diaper area last)
- NEVER leave the baby alone in any amount of water, for any length of time

Choose a warm, comfortable place to bathe your baby with no fan, open window or air conditioning nearby. Assemble all of the bathing necessities within arm's reach of the bathing area so you never have to leave the baby to get something you need.

Begin by using plain water for the face and eyes and then bathe the rest of the body and head with a mild soap, ending with the diaper area. Powders, creams and lotions are not necessary unless your doctor recommends it.

If the water becomes cool while bathing, carefully add warm (not hot) water. Dry and dress your baby immediately after the bath to keep him or her warm.

Nail Care

Although most babies are born with nails that are long enough to scratch their faces, it is not recommended that you cut them for at least two weeks. Use an emery board to gently file the nails to keep them short. When you are ready to cut the nails, wait until baby is asleep and the hands are relaxed and use a baby scissor or clipper. Cut them straight across and then file the corners.

Umbilical Cord Care

You can expect the umbilical cord to fall off by the time you go to the baby's two-week doctor's appointment. You may notice yellowish drainage as it dries and some drops of blood when it separates. During bathing, gently dry the cord and keep it outside of diaper for further air drying.

When to call your pediatrician:

- Redness
- Swelling
- Pus-like drainage
- A foul odor

Infant Care

Diapering

After the first week of life you can expect at least 6-8 wet diapers a day and 3-4 soiled diapers. A breastfed baby's bowel movements (stools) can be expected to be yellow and seedy looking, with a mild odor, and a formula-fed baby will have firmer stools with a stronger odor.

Clean the diaper area using a washcloth with plain water or alcohol-free, fragrance-free wipes. Daily use of creams and powder is not needed.

Girls – Gently wipe from front to back.

This will help avoid a possible urinary tract infection. It is not unusual to see a few drops of blood in the first few

days in response to the mother's hormones that passed to the baby. You may also notice a creamy white discharge, which is normal and should just be gently wiped away. There is no need to separate the labia to clean unless there is stool that needs to be removed.

Boys – Wash the baby's genitals gently, taking care to clean any stool or other debris from beneath the testicles. If the baby was circumcised, you may want to place some petroleum jelly on the end of the penis to keep it from sticking to the diaper for a day or two. If uncircumcised you should not pull your newborn's foreskin back to clean. Your doctor will discuss this further with you as your baby gets older.

When to call your pediatrician:

- Diaper rash that does not resolve within a few days
- Hard, pebble-like stools (constipation)
- No urine in 24 hours
- No stool in 48 hours
- Very wet and frequent stools (diarrhea)



Safe Sleep Top Ten

Back to sleep... tummy to play

We do not know for certain what causes Sudden Infant Death Syndrome (SIDS), but we do know what makes it significantly less likely to happen. Follow these Safe Sleep Top 10 from the National Institute of Health's Back to Sleep campaign to keep your baby as safe as possible.

1. Always place your baby on his or her back to sleep, for naps and at night. The back sleep position is the safest, and every sleep time counts.
2. Place your baby on a firm sleep surface, such as on a safety- approved* crib mattress, covered by a fitted sheet. Never place your baby to sleep on pillows, quilts, sheepskins or soft surfaces.
3. Keep soft objects, toys, and loose bedding out of your baby's sleep area. Do not use pillows, blankets, quilts, sheepskins or pillow-like crib bumpers in your baby's sleep area, and keep any other items away from your baby's face. Wearable sleepsacks or blanket sleepers are a safe alternative to loose blankets if needed for warmth.
4. Do not allow smoking around your baby. Do not smoke before or after the birth of your baby, and do not let others smoke around your baby.
5. Keep your baby's sleep area close to, but separate from, where you and others sleep. Your baby should not sleep in a bed or on a couch or armchair with adults or other children, but he or she can sleep in the same room as you. If you bring your baby in bed with you to breastfeed, put him or her back in a separate sleep area, such as a bassinet, crib, cradle, or a bedside co-sleeper (infant bed that attaches to an adult bed) when finished.
6. Think about using a clean, dry pacifier when placing the infant down to sleep, but don't force the baby to take it. (If you are breastfeeding your baby, wait until your child is 1 month old or is used to breastfeeding before using a pacifier).
7. Do not let your baby overheat during sleep. Dress your baby in light sleep clothing, and keep the room at a temperature that is comfortable for an adult.
8. Avoid products such as sleep positioners that claim to reduce the risk of SIDS because most have not been tested for effectiveness or safety.
9. Do not use home monitors to reduce the risk of SIDS. If you have questions about using monitors for other conditions talk to your health care provider.
10. Reduce the chance that flat spots will develop on your baby's head, by providing "Tummy Time" when your baby is awake and someone is watching. Change the direction that your baby lies in the crib from one week to the next and avoid too much time in car seats, carriers, and bouncers.

** For more information on crib safety, contact the Consumer Product Safety Commission at 1.800.638.2772.*



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