About Returning to Work or School

During your baby's first month, a bottle or pacifier can be confusing to your baby. Therefore, it is better if you can delay the return to work or school until your baby is at least 4 to 6 weeks old.

If you must return to work or school, it would be best if you could continue to breastfeed during breaks or lunch. Check to see if your workplace or school has on-site child care so you can continue to breastfeed. If not, try to arrange for baby care close to where you are.

If you can't breastfeed during the day, learn to express breast milk using a breast pump. Starting a week or so before you return to work, pump twice a day in addition to nursing your baby. You can build up a supply of expressed milk by freezing small amounts each day. Once at work, pump every few hours to keep up your milk production. Breastfeed your baby often when you are not at work or school.

References available upon request. For breastfeeding assistance, call the Breastfeeding Support Hotline at the University of Nevada Cooperative Extension (702) 257-5583 or log on to www.nevadabreastfeeding.org

Latching-On

A baby is born with the ability to find its mother's breasts. Therefore, it is important to place your newborn baby skin-to-skin at your breast as soon as possible (preferably during the first hour). Your baby can smell your body's special scent and loves listening to your gentle words. This will encourage your baby to latch-on with little additional help. If you have to shower during the first 24 hours, do not use any soap or deodorant.

Your baby must take not only the nipple but most of the areola into its mouth. Make sure baby is calm and relaxed with the head slightly tilted back. Support the neck and shoulder with room to move. Tickle baby's lips with your nipple to encourage a wide, open mouth like a yawn. Immediately bring baby to your breast as its mouth is open. Make sure baby's nose is lined up with your nipple. Its chin and lower lip will touch your breast first. This allows baby's upper lip to reach up and over your nipple. This may seem a little "off-centered" with more areola visible at baby's upper lip, and less at the lower lip. However, this is the most comfortable latch for most babies.

Proper latch-on helps successful feeding and prevents sore nipples. Breastfeeding shouldn't hurt. If you have pain while breastfeeding, break the suction and try again. If you have sore nipples after each feeding, you may need to consult with a lactation specialist as soon as possible.
A supportive environment

Most moms need some help getting started and keeping going. These lists will help you prepare.

Before Delivery (by the 3rd trimester)
- Ask for support from your family, the baby’s father, your friends and others close to you. Help them understand your decision.
- Talk about your decision with your doctor and nurse. Have them give you the name and telephone number of a lactation specialist. Have that information ready and provide a copy to your family and friends.
- Learn as much as you can about breastfeeding. Check for free classes at your local hospital, WIC program, clinics and elsewhere.
- Plan for a comfortable place at home where you will be able to nurse. At first you may need a quiet, isolated place so the baby won’t be distracted.
- Arrange adequate help around the house. A new mom is often tired and needs to rest between feedings.
- A few women have inverted nipples, which may cause latch-on problems. Have your doctor or nurse check your breasts. If needed, ask for a referral to a lactation specialist for assistance.
- You will need nursing bras. Inexpensive ones can be found in many discount department stores.
- Designate whoever brings you to the hospital to inform the hospital staff about your decision to breastfeed.

At the Hospital
- Inform the nursing staff that you are going to breastfeed.
- Ask to have your baby brought to you within the first hour after delivery.
- Insist the nursery staff does not feed your baby formula or water.
- Place your baby on your chest, skin-to-skin. Let your baby find your breast.
- Nurse at least 8 - 12 times in each 24 hours. Watch for feeding cues.

4 - 6 Weeks After Delivery
- Continue to nurse 8 - 12 times in each 24 hours.
- Offer baby both breasts. Some babies are full after one breast. If your baby is gaining weight and seems satisfied, don’t worry.
- Burp baby after feeding as needed.
- Nurse your baby when you see feeding cues. Some cues are moving lips while sleeping, sucking on fist, bobbing head up and down. Crying is a late sign of hunger.
- During the early weeks, if your baby seems to be the non-demanding type, you may need to wake the baby up for nursing.

Common Positions

Football Hold
- Excellent position for moms with a Cesarean section and for large-breasted women.
- For mothers of twins, this is a good way to nurse them at the same time.
- Ideal for nursing premature or smaller babies.
- Great for babies who tend not to take enough of the nipple and areola into their mouths.
- Allows for eye contact between mother and baby.

Hold your baby like a running back tucks a football under the arm. Hold baby at your side on one arm, with elbow bent and your open hand firmly supporting baby’s head face up at the level of your breast. Your baby’s torso will rest on your forearm. Use a pillow to support your arm. A chair with a broad, low arm also may help.

Cradle Hold
This is the most common position. Cradle the baby in an arm. Your baby’s neck and shoulder should be resting comfortably in the crook of your elbow. Use your forearm to support your baby’s back. Your free hand needs to support your baby’s bottom.

Move baby across your body, tummy facing tummy, so that baby faces your breast, with its nose in line with your nipple. This allows the baby’s head to bend back and its chin to push into your breast.

Use a pillow on your lap to support your baby. Consider a chair with a low armrest for maximum comfort. You may place a pillow behind your back for support.

Lying Down
This is a good position after a Cesarean section or if you just prefer lying while feeding. Lie on your side, rest your head on a pillow.

Place another pillow under your upper leg for comfort and support. Lay the baby next to and facing you. The baby’s head should be next to your breast. You may support the baby with your free hand.

In general, proper positioning of the baby at the breast— “skin to skin” and “tummy to tummy” - is important in allowing baby to latch-on, whatever position you choose.