Proceed through steps 1-8 to assess breastfeeding adequacy and utilize the tips.

1. FREQUENCY OF NURSING

**Appropriate If:**
- Birth-4 months ............. 8-12 times/day
- 4-6 months ................. 5+ times /day
- 6-8 months ................. 4-5 times/day*
- 9-12 months ............... 3-4 times/day*
- 13 months ................. 1-3 times/day*

*Frequency could increase during growth spurts that occur typically at 7-14 days, 1 month, 2 months, 3 months and 6 months.

**Assess age appropriate solid food intake if nursing more than expected for age.**

2. LENGTH OF NURSING**

Healthy newborns should be allowed to determine the feeding length. Most will nurse 20 to 40 min/feeding.

**Appropriate If:**
Infant’s weight gain is within the normal recommended limits and the infant ends the feedings.

**Inappropriate If:**
A. Infant’s weight gain is below recommended normal limits.
B. One or more of the following is present:
   - Mother limits the time or schedules the nursing;
   - Infant’s (newborn to 4 months) nursing averages less than 5 minutes per feedings;
   - Infant’s nursing averages 60 minutes or more per feeding. This may indicate the infant has a poor or ineffective suck.

**The length of time that a baby nurses varies greatly among infants. The length of feeding alone is not sufficient to assess the adequacy of breastfeeding.**

3. NUMBER OF WET DIAPERS***
(In a 24-Hour Period)

Should be 3 or more after the 3rd day of life. Ask if the infant is receiving anything other than breastmilk.

***Water, glucose water, or other liquids given as a supplement will cause the number of wets to be falsely reassuring.

4. NUMBER OF STOOLS****

- By the 4th day of life — at least 3 soft yellow stools.
- During the first 6 weeks of life — multiple yellow (liquid or soft) stools per day.
- Six weeks and over — stool pattern varies. Many older babies only stool once over several days. Do not use laxatives, etc. if the infant:
  - Is nursing as usual;
  - Is active as usual; and
  - Seems comfortable

****Formula supplements will change the frequency and consistency of the stool.

5. INFANT BODY TONE

Make note of the infant’s body tone when obtaining weights and lengths.

**Good Tone:** Infant has good strength and supports his body well when held.

**Poor Tone:** Infant’s body feels floppy or difficult to hold onto.

Poor body tone may indicate ineffective suck. This is usually temporary. Emphasize optimal infant whole body support and additional breast stimulation.
6. POSITIONING FOR NURSING

If baby is less than one month old, ask the mother to show you how she puts her baby to the breast.

*Observe:*
- Is mother using good posture? Does she look comfortable?
- Are mother’s fingers off the areola and out of the infant’s way?
- Is the infant turned tummy to tummy with the mother?
- Is the infant’s body well aligned — ear, shoulder, hip in a line?
- Are infant’s lips flanged out and easily visible?
- Is the infant’s nose and chin touching the mother’s breast?
- Can you hear swallowing?
- Is the breast softer after nursing?

“**Appropriate**” if the answer to all eight questions is “Yes”.

“**Inappropriate**” if the answer to one or more questions is “No”.

7. MOTHER’S PERCEPTION OF NURSING

“**Appropriate**” if mother’s perception of the nursing matches the available objective data. *Example: The mother of a thriving 4-week-old with appropriate weight gain thinks breastfeeding is going well.*

“**Inappropriate**” if the mother’s perception of the nursing is not consistent with the objective data. *Example: The mother of a 3-week-old thinks that breastfeeding is going well but the baby’s weight is 8 ounces below birth weight.*

8. TIPS FOR BREASTFEEDING SUCCESS

The more often a baby breastfeeds, the more milk a mother produces. The same goes for pumping the milk while away from the baby.

| Drained or emptied breasts make milk faster. | Full or unemptied breasts make milk slower. |

Artificial nipples prevent effective suckling at the breast. Formula supplements delay hunger and feeding frequency needed in the early weeks of life. Both can cause less milk to be produced.

The highest milk volume is reached at 4 to 6 weeks postpartum and it is more difficult to increase later. The following steps are **critical to achieve optimal breastfeeding and adequate milk production:**

1. Help mothers **correct latch & positioning problems immediately**, especially before the first growth spurt (7 to 14 days).

2. Encourage **exclusive frequent nursing** during the first 4 weeks to help produce the highest milk volumes possible.

3. Emphasize that nursing the healthy baby **at the breast during the first 4 weeks** versus using a pump results in the best chance for building and maintaining the milk.

4. Assist mothers separated from hospitalized sick and premature infants in obtaining an appropriate breast pump **as soon as requested**.

*For additional help:*
- Tip Sheet #602  *Maternal Breastfeeding Complications*
- Tip Sheet #603  *Infant Breastfeeding Complications*
- Tip Sheet  *Pain With Breastfeeding*

WIC Nutrition and Breastfeeding Helpline 1-800-445-6175