

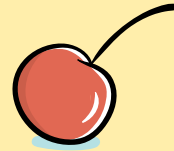
Your Baby's Age

	WEEK 1							2 WEEKS	3 WEEKS	4 WEEKS	5 WEEKS	6 WEEKS to 6 MONTHS
	1 DAY	2 DAYS	3 DAYS	4 DAYS	5 DAYS	6 DAYS	7 DAYS					

Your Baby's Tummy Size



Size of a cooked chick pea or hazelnut



Size of a cherry or medium grape



Size of a walnut or lichee

How Much Milk Your Baby Needs

Per day, on average over 24 hours



10 to 100 mL or 1 tablespoon to 1/3 cup



200 mL or almost 1 cup



400 to 600 mL or about 1 1/2 to 2 1/2 cups



700 to 800 mL per day or about 2 1/2 to 3 1/2 cups

How Often Should You Breastfeed?

Per day, on average over 24 hours

In the first month 8 to 12 feeds per day (every 1 1/2 to 3 hours)

By about two months at least 6 to 8 feeds per day

Wet Diapers: How Many, How Wet

Per day, on average over 24 hours



At least 1 WET



At least 2 WET



At least 3 WET



At least 4 WET



At least 6 HEAVY WET

Soiled Diapers: Number and Colour of Stools



At least 1 to 2 per day BLACK OR DARK GREEN



At least 3 per day BROWN, GREEN, OR YELLOW



At least 3 large per day, soft and seedy YELLOW



At least 1 or more large every 1 to 7 days YELLOW

Your Baby's Weight

Most babies lose about 5 to 7% of their birth weight in the first 3 to 4 days after birth. For example, a 3.2 kilogram or 7-pound baby will lose about 230 grams or 1/2 a pound.

Your baby should return to his or her birth weight by 10 to 14 days.

Your baby should gain about 112 to 224 grams a week for the first 3 months.

Growth Spurts



Babies often experience a sudden burst in growth—a growth 'spurt'—at certain times within their first few weeks. During these growth spurts your baby may want to nurse more than usual.



Breast milk is all the food a baby needs for the first six months — At six months of age begin introducing solid foods while continuing to breastfeed until age two or older

(WHO/UNICEF, World Health Assembly, Breastfeeding Committee for Canada, Ontario Breastfeeding Committee, Registered Nurses Association of Ontario, Canadian Pediatric Society, American Academy of Pediatrics)

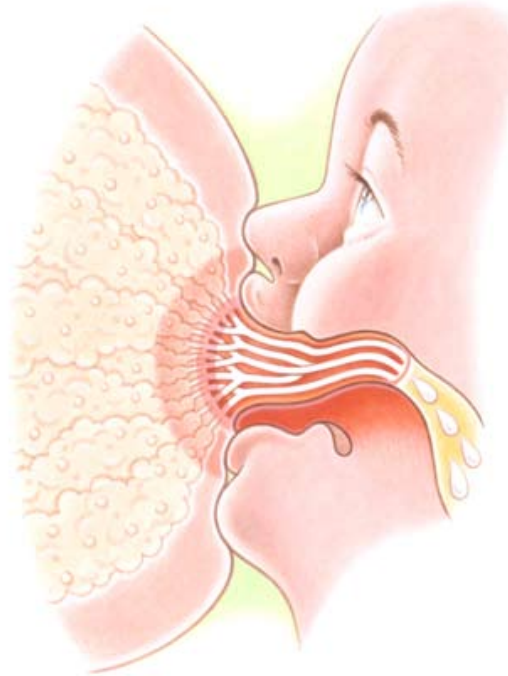
Breastfeeding

GUIDELINES FOR CONSULTANTS

Observe the mother breast-feed her baby. This is the key to prevention and early identification of breastfeeding problems.



Assess positioning and proper alignment of the mother and baby. Ensure maternal comfort. Use pillows if necessary.



Assess the latch. The baby's mouth is wide open, the lips are phlanged and the chin is pressed into the breast. Observe the baby swallowing.

Assess baby: number of wet and soiled diapers, mouth moist, eyes bright and alert, gaining weight and is generally healthy.

If nipple discomfort, decreased output, poor weight gain or other problems persist, reassess mom, baby, latch and feed, and consider referral to a physician.

METHODS TO INCREASE MOTHER'S MILK SUPPLY AND BABY'S INTAKE

- Correct latch and position
- Increase number of feeds
- Express milk after feeds
- Use breast compressions
- Increase use of breasts (may include super-switching)

ACCEPTABLE MEDICAL REASONS FOR SUPPLEMENTATION

- Babies with hypoglycemia that does not improve with increased effective breastfeeding.
- Babies with dehydration that does not improve with increased effective breastfeeding.
- Maternal medications that are contraindicated with breastfeeding (refer to Motherisk 416-813-6780 or www.motherisk.org).
- Babies with inborn errors of metabolism such as galactosemia or PKU.
- Babies who are unable to feed at the breast due to congenital malformation.
- Babies and mothers who are separated due to severe illness or geographic separation.

ACCEPTABLE BREASTFEEDING SUPPLEMENTS

- Best Choice: Expressed mother's breast milk**
- Second choice: Pasteurized donor breast milk
- Third choice: Cow's milk formula
- Fourth choice: Vegetable based formula such as soy

PROVIDING BREASTFEEDING SUPPLEMENTS

- When supplementation is required, one of the following techniques may be used:
- Supplemental nursing device at the breast
 - Cup, spoon, dropper or finger feeding
 - Bottle feeding (last choice)

Continue to promote skin-to-skin contact as much as possible between the parents and the baby while supplemental feedings are in progress.

**best start
meilleur départ**

