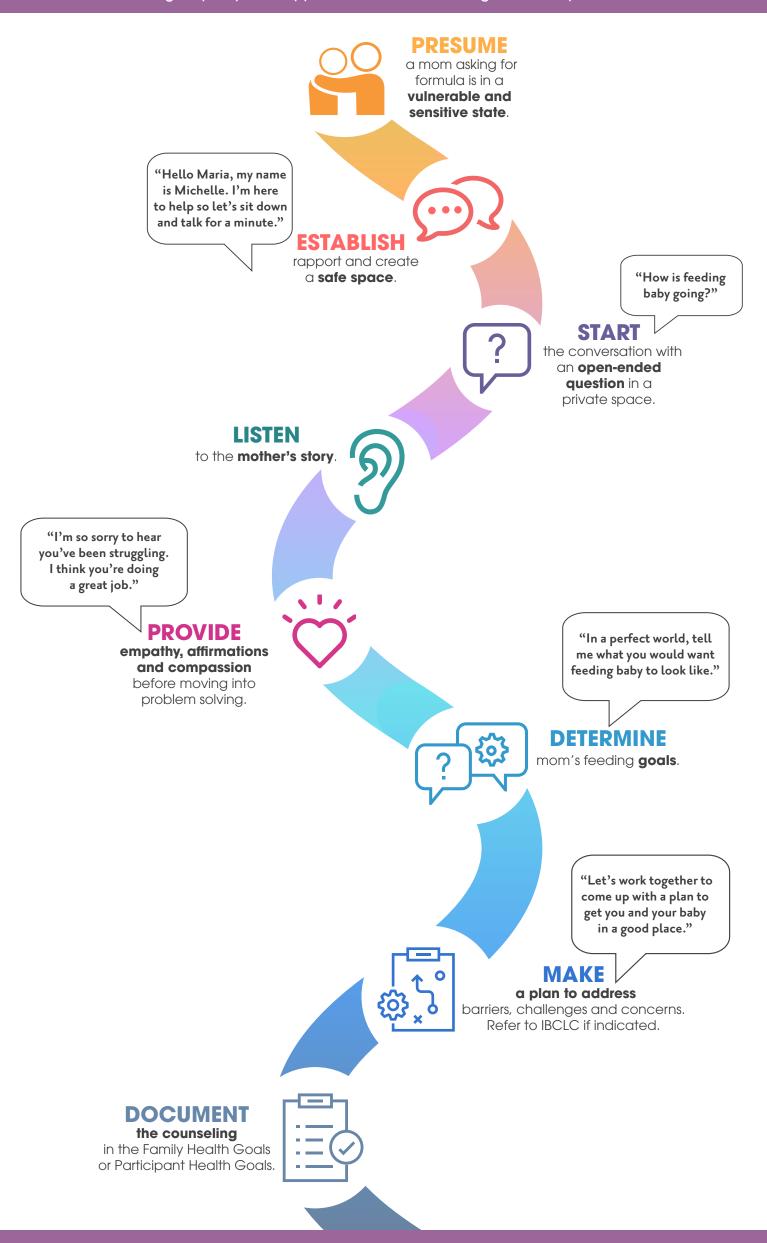
## INFANT FEEDING COUNSELING TIPS

Providing empathy and support when a breastfeeding mother requests formula.



# SPECIAL CONSIDERATIONS



### **POLICY**

For policy guidance refer to BF:1.0 and FD:10.0.

Individual counseling must be provided whenever a breastfeeding mom requests formula or asks for an increase in the amount of formula she receives.

Formula should not be routinely issued during the birth month to breastfed infants. Mothers who receive the partially breastfeeding food package are limited to one can of formula in the birth month, if needed.

Food package changes may only be authorized by a CA or WCS and should be made in collaboration with the mother. Any formula issued should reflect the minimum amount needed while supporting maximum breastfeeding. Remember to also discuss the impact of changes to the mother's food package.



#### MEDICAL CONSIDERATIONS

Is there a medical reason for the formula request?

The following factors may pose a temporary or long-term problem for breastfeeding and require supplementation of formula or donor human milk. Breastfeeding is still possible.

Refer mom to IBCLC.

#### **RED FLAGS FOR MOM:**

- Breast surgery
- Endocrine abnormality (e.g. diabetes)
- Polycystic Ovary Syndrome (PCOS)
- Perinatal complications (e.g. hypertension, hemorrhage, retained placental fragments)
- Contraindicated medication

#### **RED FLAGS FOR BABY:**

- Premature (<37 weeks) or very low birth weight
- Excessive weight loss (has not regained birth weight by 10-14 days of age, or loss of more than 10% of birth weight)
- Suboptimal intake
- Jaundice
- Inborn errors of metabolism (e.g. PKU)

