

SimpliFed
Latching Care Plan

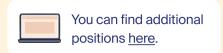
# Starting Feeds

To avoid causing the latching process to be stressful for you or baby, start the feeding process at the first sign of <u>hunger cues</u>. You can view these signs about **every 2 hours**. If your baby begins to cry, try skin to skin before latching to calm them.



## **Breastfeeding Position**

There are many different positions to feed your baby. Use what is comfortable to you. Once you have mastered one, feel free to try another.





#### Comfort

Make sure you are seated (or lying) in a comfortable position.



## Support for You

Your shoulders should be back with support for your back and arms as needed. You can use breastfeeding pillows, couch cushions, or regular pillows to provide support.



### **Belly to Belly**

When you are positioning your baby to nurse, you want the baby's belly to be up against your belly or breast (depending what nursing position you are using). Their hips and shoulders should be in line. Meaning their head, shoulders, hips, and knees should be facing you. Not just their head. If their body is turning away, that means their head will be pulling that way too. Adding distance between your breast and their mouth. Which can lead to a shallow latch.



## **Support for Baby**

The way you support your baby's weight will be dependent on the position you choose to breastfeed in. Bottom line, your baby should feel completely supported. You can use the semi reclined or laid back position to support their weight on top of you. Or using your elbow, forearm, and hand in the cradle, cross cradle, or football position. I like to compare not feeling supported and nursing to waking up after the first few seconds of your dream when you fall and jerk awake. We DON'T want your baby to do that with your nipple in their mouth!



## **Head Support**

Your baby will need your assistance on keeping their head supported. However, you do not want to hold the back of their head. Their head needs to be able to tilt back in order for them to open their mouth as wide as possible. Instead, hold your baby at the nape of their neck or behind their ears. This way, they are supported but still able to maneuver their head as needed to latch.

#### **Activity time!**

Tuck your chin into your chest and try to open your mouth. How much can you open it? Now tilt your head back and open your mouth. How much more could you open it? It is the same for your baby. We do not want their chin tucked because they can't move their head.



#### **Hands Free**

When nursing, your baby's hands should be free and placed on each side of your breast, like they are hugging it! If their hands are placed between their body and your breast, it adds distance between their mouth and your nipple. Making it difficult to get a nice, deep latch. Not to mention, they will use their hands to add stimulation while nursing. Those pushes, kicks, squeezes, and twiddling actually help promote your milk ejection reflex ("let down")!

## Latching Baby



### Nipple to Nose

Now that your baby is nice and close to your breast with little distance between them and you, your nipple should be very close to their face. At this point, it's a good idea to try to align your nipple with their philtrum. What is that you ask? That is the space between your upper lip and nose. When your baby feels and smells your nipple they will instinctively try to open wide and latch. Aligning the nipple to the nose, allows for a great angle for your nipple to enter along the roof of their mouth (hard and soft palate), where your nipple will travel during their nursing session.



#### To the Roof

Sometimes it can be helpful in assisting a baby in getting that upwards angle of your nipple. By applying pressure above your areola, the tip of your nipple will point a bit upwards. Even exposing a bit more of the bottom of your areola, which is where the bottom of your baby's mouth should sit. Your baby's mouth should actually form an off centered bulls eye around your nipple.



#### **Chin First**

As your baby opens wide, using your hand that is supporting their head behind the ears, you can pull them in closer. With their nose in line with your nipple, their chin should be the first part to come in contact with your breast (right about at the bottom of your areola). The nipple enters into their mouth and they latch and suck. If for whatever reason the latch is painful, insert your finger at the corner of their mouth to break suction. Then attempt to latch again.

## If Latching is Difficult...





Try reverse pressure softening, especially if you are experiencing engorgement.

This helps to move swelling away from the area that your baby is trying to latch onto.





Express a little milk onto your nipple to keep your baby interested.





Avoid latching while your baby is crying. Calm baby and then try again.

Preastfeeding should NOT be painful. If it is uncomfortable, break suction and attempt to latch again. The feeling should be comparable to pinching and holding the skin on the back of your hand with some gentle tugging.