

Breastfeeding Flipchart



Newborn



3 Months



6 Months



1 year



2 years

The information in this flipchart is meant for educational purposes and should not be used as a substitute for medical diagnosis or treatment. Please seek your doctor's advice before starting any treatment, or if you have any questions related to your health, physical fitness or medical condition.

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Information is correct at time of printing [Jul 2024] and subject to revision without prior notice.

Baby Friendly Hospital Initiative

**National University Hospital (NUH) has been a
BFHI-certified hospital
since 2013**

The Baby Friendly Hospital Initiative (BFHI) is supported by Singapore's Health Promotion Board (HPB) and is part of a global effort founded by UNICEF and the World Health Organisation (WHO) to ensure maternity hospitals meet best practice standards in supporting mothers to breastfeed successfully. BFHI hospitals provide breastfeeding education and a conducive environment for breastfeeding.

The BFHI developed the Ten Steps to Successful Breastfeeding to promote optimal clinical care for new mothers and their infants.

NUH Breastfeeding Policy

01

NUH implements the best practice standards in obstetrics and newborn care in accordance with the Baby Friendly Hospital Initiative (BFHI)'s "Ten Steps to Successful Breastfeeding" to support mothers in exclusively breastfeeding for the first six months, and continue breastfeeding for up to two years of age and beyond.

02

The first few hours and days of a newborn's life are a critical window for establishing lactation and providing mothers with the support they need to breastfeed successfully.

03

Parents' choice in feeding their newborns will be respected and supported.



Ten Steps to Successful Breastfeeding

1. Our staff adheres to the NUH Breastfeeding Policy. We comply with the *International Code of Marketing of Breast-milk Substitutes* and SIFECs¹
2. Our staff are knowledgeable and skilled in supporting mothers in breastfeeding
3. Pregnant women and their families are informed about the importance and management of breastfeeding
4. Mothers and babies will have immediate and uninterrupted skin-to-skin contact, and breastfeeding initiated as soon as possible after birth
5. We support mothers to maintain breastfeeding and help with common breastfeeding problems
6. We support exclusive breastfeeding from birth, and supplement for medical reasons
7. We enable mothers and babies to room-in together 24 hours a day
8. We support mothers to recognise and respond to their newborn's cues for feeding
9. We counsel mothers on the use and risks of feeding bottles, teats and pacifiers
10. We coordinate post-discharge follow-up to enable parents and infants to get timely access to ongoing support and care

¹ Sale of Infant Foods Ethics Committee Singapore

Benefits of Breastfeeding

Breastfeeding is a natural way to help you:

- Contract your uterus and reduce bleeding after delivery
- Return to pre-pregnancy weight
- Keep bones strong
- Reduce risk of breast and ovarian cancers
- Decrease risk of developing diabetes
- Bond with baby
- Reduce household costs

Your breast milk helps your baby:

- Grow and develop optimally
- Be protected against infections of the ears, lungs, bowels and urinary tract
- Decrease risk of allergies, asthma
- Decrease risk of developing diabetes, obesity and ulcerative colitis
- Decrease risk for Sudden Infant Death Syndrome (SIDS)

Early Steps to Successful Breastfeeding

Why Skin-to-skin?

- Skin-to-skin helps to maintain baby's temperature and promote bonding
- Keeps baby interested in breastfeeding
- Keeps baby calm



Early Skin-to-Skin and initiation of breastfeeding

Rooming-in with baby



Why Room-in?

- You will be able to better sense when baby is ready to feed and breastfeed him on time
- Baby will be comforted easily and cry less
- You can spend more time getting to know your baby, and practise breastfeeding

Feeding Cues

*Get ready to feed baby when he shows **early cues***

Early Cues –
“I am interested
in feeding.”



Stirring



Mouth opening



Turning head/ rooting

Mid Cues –
“I am really interested
in feeding NOW!”



Licking



Increasing movements



Hand to mouth

Late Cues –
“Calm me then
feed me.”



Crying

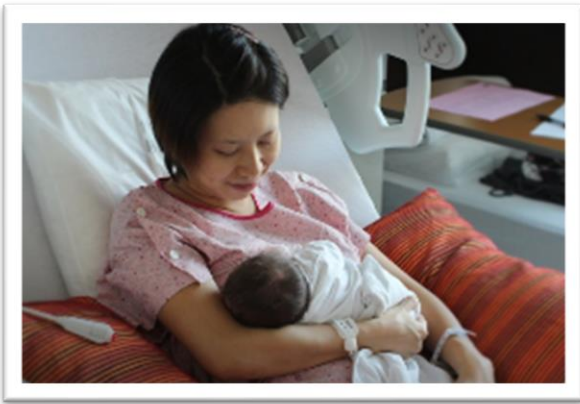


Agitated movements



Face turning red

Breastfeeding Positions



Cradle



Side-lying



QR code for video:
Breastfeeding positions



Cross-Cradle



Football

Effective Latching



“CALM”*

C: Chin and Cheek close to breast

A: Areola covered as much as possible

L: Upper and lower lips flanged out

M: Mouth is wide open











QR code for video:

“Attaching Your Baby at the Breast”

*Doris Fok, 2005

HOW CAN YOU TELL BABY IS GETTING ENOUGH MILK?

Your Baby's Age	1st week							2nd week	3rd week
	1 DAY	2 DAY	3 DAY	4 DAY	5 DAY	6 DAY	7 DAY		
How often to Breastfeed?	At least 8 feeds /day (on baby's feeding cues) Baby is suckling strongly, steadily and swallowing heard (day 3 or 4 onwards)								
Average milk intake per feed	5 - 7 ml Mucous regurgitation is normal		10 – 20 ml		40 - 60ml		80 - 150ml		
	4 – 6 feeds	8 feeds	10ml (12 feeds/ day) or 20 ml (8 feeds/ day)		(8 feeds/ day)		(6 - 8 feeds/ day)		
Wet Diapers/day	 At least 1	 At least 2 (May have pink urates)	 At least 3 (No more urates)	 At least 4	 At least 6 Heavy, Pale Yellow or Clear Urine				
Soiled Diapers/day	 1 to 2 Dark & Sticky (Meconium)		 At least 3 Soft Brown, Green, Yellow		 At least 3 Large, soft and seedy, Yellow				
Baby's Weight	Baby loses an average of 7% from birth weight up to day 3				From Day 4 onwards, baby gains 20 - 35g per day Baby regains birth weight by day 10-14				

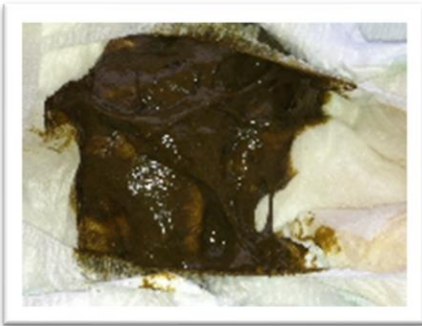
Adapted from Best Start

Mother's Breast changes	Day 1 and 2: colostrum Day 2 and 3: Breasts heavy (learn to massage and hand express and latch effectively) Day 4 and 5 – Milk flows, engorgement settled
Things to note	Mother and baby should be comfortable during breastfeeding Baby shows clear feeding cues, moves actively, wakes easily, settled after feeds Mother's breasts and nipples should not hurt

**DISCLAIMER: The information in this chart is a general guide and may not apply to every baby.
 Please seek the advice of the doctor/nurse if you have any questions**

Baby's urine and stools

Meconium
Day 1 - 2



Transitional stools
Day 3 - 4

Seedy stools



Watery yellow stools

Urine with urates,
up to Day 3



Clear urine
Heavy diapers

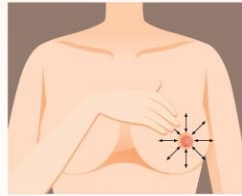
Breast Massage and Hand Expression

“MaSSE” method of hand expression

BREAST MASSAGE



STEP 1: Massage Breast in circular motion

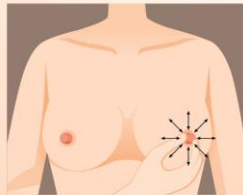


STEP 2: Stroke breast towards nipple



STEP 3: Shake the breasts

HAND EXPRESSION



STEP 1: Roll nipples and areola



STEP 2: Place thumb and index finger on opposite sides on edge of areola



STEP 3: Extract by placing thumb and index finger opposite, pressing against chest wall and squeezing



QR code for video:
Breast massage &
expression
(from 3 min)

Supplementation

1. Unnecessary milk formula in the first few days after birth will interfere with breast milk production and establishment of breastfeeding
2. Use of feeding bottles may affect baby's feeding cues and suckling at the breast. You may use these alternative methods



Syringe



Cup



Spoon

3. Approach your baby's doctor or nurse for advice, if you wish to use the feeding bottle

Guidelines for storing Expressed Breast Milk (EBM)

For Fresh EBM

Location	Temperature	Duration
Room temperature	19°C – 26°C	4 hours
Insulated cooler bag with ice packs	4°C – 15°C	24 hours
Freezer compartment of a bar fridge	-15°C	2 weeks
Refrigerator	< 4°C	72 hours
Freezer	-18°C	3 months – 6 months
Deep freezer	-20°C	6months – 1 year

For Thawed EBM

Location	Temperature	Duration
Room temperature	15°C – 29°C	1-2 hours
Refrigerator	4°C	24 hours
Warmed	40°C	1-2 hours

Support After Discharge

Sustained and timely support in the first weeks after delivery is important for you to continue breastfeeding.

For breastfeeding related questions:

- NUH Breastfeeding Helpline (8am-5pm): 97220376
- Breastfeeding Mother's Support Group (BMSG): 63393558
- Joyful Parenting: 6488 0286

Your baby will be seen by a doctor at Khoo Teck Puat – National University Children's Medical Institute (KTP-NUCMI) or polyclinic within 3 days of discharge, to check his/her feeding and jaundice

Appointment line: ktpnucmi_appt@nuhs.edu.sg

For more information

Scan the QR code to download a copy of this flip chart.



<https://for.sg/f7p8vj>

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