

Providing Breastmilk for Your Hospitalized Infant

While your baby is in the hospital we ask that you pump your breasts to provide the best nutrition for your baby. We have nurses and lactation consultants on staff that will help you with each step.

Top 10 Benefits of Breastmilk for hospitalized infants:

- Promotes your baby's growth and development
- Protects against many problematic conditions of the premature baby
- Special breastmilk fats will help your baby's eyes
- Special breastmilk fats provide better brain growth
- Breastmilk is more easily digested milk helps the stomach and intestines to grow
- Your baby will tend to have fewer infections
- Hormones help your baby and you to relax and feel less stress
- Fewer doctor visits and hospital readmissions for your baby
- Breastmilk is your baby's first immunization
- Only you can do this for your baby! What a special gift!

When to Pump

- Begin pumping as soon as possible after birth, preferably within 6-12 hours
- Pump between 8 to 10 times in 24 hours
- Never go more than one 5 hour stretch between pumping sessions (usually at night!)
- A pumping log is very helpful to keep track of your milk supply and are available, just ask your nurse or lactation consultant

How to Pump:

- Before pumping, wash your hands well
- There is no need to clean your breasts before pumping. Routine bathing with a mild soap will cleanse your breasts adequately
- Start by massaging both breasts with your hands, this will help your milk to flow more easily
- Use a hospital grade electric pump that can pump both breasts at one time
- A pumping log is very helpful to keep track of your daily milk production. Several styles are available from your nurse or lactation consultant.
- Choose the breast shield (flange) size that fits comfortably



Pumping should not be painful: breast shields (flanges) come in different sizes so ask your lactation consultant or your baby's nurse for help if your nipple hurts while pumping

Talk with your lactation consultant /nurse for information to help you pump the following amount of breastmilk:

-17 oz. (500 ml) per 24 hours by day 7 post partum

-20-25 oz. (600-750 ml) by day 14 post partum

After a few weeks, you may be able to adjust your pumping schedule; discuss with your lactation consultant or nurse.

Feel good about your commitment to provide the best nutrition possible for your baby!



- Center your nipple in the breast shield (flange)
- Increase suction of the pump to your level of comfort
- Pump both breasts for 15 minutes

Type of Breast Pump to Use:

- Hospital grade, double electric breast pump
- Pumping both breasts at the same time (double pumping) increases the hormones to produce more milk and increases the fat content of your milk
- “Hand-me-down” breast pumps are not advisable due to a risk of contamination and less effective suction

Cleaning Your Breastpump Kit:

- Do not wash tubing and diaphragm caps
- Disassemble the breast shields (flanges), white valve membranes, and collection bottles and rinse in **cool** water
- Wash all parts and pieces with hot soapy water and rinse thoroughly
- Pump kit parts may also be washed in the top rack of the dishwasher

Cleaning Your Breast Pump:

In the hospital: outer surface of the pump should be cleaned before and after each use with the cleanser provided in the pumping room

At home: clean as needed

Storage of Breast Milk for Hospitalized Infants

- Talk to your nurse about storage container needs while your baby is in the hospital
- Please use a new container every time you pump
- Label each container with your baby’s name, date and time of pumping before delivering the milk to your baby’s nurse or at home before placing in the refrigerator or freezer
- Freshly expressed breastmilk can be stored in the refrigerator for 48 hours
- Frozen breastmilk can be stored in a deep freezer (-20° Centigrade) for up to 12 months
- Thawed breastmilk may be stored in the refrigerator or fed to your baby for 24 hours

References

Best Practice for Expressing, Storing, and Handling Human Milk in Hospitals, Homes and Child Care Settings, Human Milk Banking Association of North America, 2011

Callen J, Pinelli J. A review of the literature examining the benefits and challenges, incidence and duration, and barriers to breastfeeding in preterm infants. *Adv Neonatal Care* 2005; 5(2): 72–88; quiz 89–92.

Zachariassen G, Faerk J, Crytter C, Esberg B.H., Juvonen P, Halken S., Factors associated with successful establishment of breastfeeding in very preterm infants. *Acta Paediatrica*, 2010; 99: 1000-1004.

Kangaroo Care:

Hold your baby skin to skin on your chest as often as possible!

- ♥Increases mother’s milk production
- ♥Decreases mother’s stress hormones
- ♥Decreases baby’s stress hormones
- ♥Improves baby’s heart rate, respiratory rate and oxygen saturation

