BREASTFEEDING ASSESSMENT

MOTHER'S NAME_____ DATE_____ INFANT'S NAME_____

(SPONSOR'S)
DOB_____SS#_____ DOB_____B.WT._____DC.WT._____

_____ CURRENT AGE_____CURRENT WT._____

CLASS: PBF / BBC / BBC MAYPT_____ G____P___VAG/C-SEC/VAC.EXT./FORCEPS/BREECH_____

PHONE (H)_____(W)_____ L&D MEDS_____GEST AGE_____

OB/CNM_____ PED/FP_____

BREASTS: SM /MED /LG /PENDULOUS NIPPLES: EVERTED / FLAT / INVERTED / DIMPLE POSITION: CRADLE/CROSS CRADLE/FOOTBALL

SOFT / FULL / FIRM / COMPRESSIBLE AREOLA_____mm/TIP_____mm SIDE LYING / AUSTRALIAN /FLOATING PRONE

DATE;_____
ENGORGED: PHYS / PATH COMPRESSIBLE / INELASTIC/ ENGORGED LATCH: CORRECT/NEEDS ASSISTANCE/REFUSES

FIBROCYSTIC / SURGERY TENDER / DAMAGED / CREASED p NSG NIBBLES ON / SLURPS ON / PREFERS ONE SIDE

TECHNIQUES TAUGHT: SUPPORTING THE MILK SUPPLY: CARE PLAN FOR: PUMP REFERRAL

CORRECT POSITION & LATCH HAND EXPRESSION / PUMPING SORE NIPPLES / ENGORGEMENT / THRUSH

WAKING TECNIQUES / SWITCH NSG RETURNING TO WORK / DOUBLE PUMP PLUGGED DUCTS / MASTITIS / ABCESS

SAFE USE OF EQUIPMENT ALTERNATE FEEDING METHODS: BUILDING MILK SUPPLY / BABY HONEYMOON

MILK STORAGE & HANDLING SNS / PERIO / FINGER FDG / CUP FDG BREASTFEEDING CHECKLIST / GALACTOGOGUES

FEEDING HX: FREQUENCY_____DURATION_____SUPPLEMENT_____ VOIDS_____STOOLS_____/_____

BEHAVIOR: ALERT / SLEEPY / FUSSY COLOR : GEN. PINK / JAUNDICED / PLETHORIC SKIN : WARM / DRY / COOL TURGUR : GOOD / POOR

ORAL ANATOMY: PALATE_____ TONGUE_____ COORDINATED / UNCOORD / DYSFUNCTIONAL SUCK

WHAT ARE MOTHER'S GOALS FOR NURSING?

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