

A Latching-on Checklist

BABY IS INTERESTED, even if still very sleepy: wiggles, hands go to mouth, mouth moves

CLOTHING OUT OF WAY - yours and baby's

MAKE YOURSELF COMFORTABLE holding baby's head at the natural level of your nipple

- Footstool? Back support? Arm rest? If lap pillow used, it should support your arm, not the baby.

SUPPORT YOUR BABY

- Baby's weight supported mainly by your torso and arm, not your lap
- Baby horizontal, with head, chest, navel, and knees all facing you
- Baby's chin not tucked; nose near your nipple, not chin near nipple
- Your hand supports base of baby's head; fingers don't touch cheeks or press on back of head
- Baby's lower body pasted to your torso, body to body

STABILIZE YOUR BREAST

- Hand and fingers flat on ribcage, index finger in the crease under your breast
- Rotate hand so that breast rests in U between thumb and fingers - thumb and fingers point up
- Bring fingers onto breast only if needed to stabilize it
- Squeeze breast to make a sandwich oval that will go corner to corner across baby's mouth
- Index finger well away from areola - farther away than you think is necessary

BEGINNING OF LATCH-ON

- Angle nipple away from baby's mouth, so mouth faces the inner side of the breast, not the nipple
- Land baby's lower lip well away from the nipple, farther away than it will end up
- If baby's mouth doesn't open on its own, dab it lightly with the inner side of the breast

LATCH-ON

- Use breast to pry baby's mouth further open, roll breast onto baby's tongue, not against tongue
- Move breast or baby so that baby's upper lip goes "around the corner" of your nipple. At that time,
- Bring baby's shoulders extra close (don't press on head. Bring shoulders close, head will follow)

COMFORTABLE?

- If not, press breast below lower lip to exaggerate the lower-jaw part of the sandwich shape
- **OR** take baby off (slide finger into corner of mouth between baby's gums) and start over
- Baby's cheeks should touch breast, hiding mouth
- Corner of baby's mouth, if you could see it, is very wide, about 140°, not a mere 90°
- Lower lip, if you could see it, is rolled back toward chin
- Lower lip, if you could see it, is farther from nipple than upper lip is
- If you tug carefully at corner of lower lip, baby's tongue is visible cupping breast
- Baby's head is slightly tipped back, in the position your head assumes when you sniff
- Chin is firmly planted on breast, nose is usually only lightly touching or is free of breast

EFFECTIVE NURSING

- Short, chopping jaw motions to start the milk, then...
- Slow, deep, steady jaw motions, about 1 per second
- Jaw hesitation or "hic" sound when baby swallows, usually with every 1-3 jaw strokes
- Occasional rests or return to short strokes, followed by more deep, steady strokes
- Offer "on whim" - baby's or mother's - which will probably be 1-12 times every 2-3 hours during the day, less often at night. Frequent, efficient milk removal is key to a good supply.