



# THE HOSPITAL EXPERIENCE

What to expect and how to make it memorable



# CONTACT LIST

Name:.....

Address:.....

Obstetrician:.....

Pediatrician:.....

WIC Clinic:.....

Peer Counselor/Lactation Consultant: .....

Hospital: .....

Emergency Contact Name/Phone: .....

Notes:.....

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# Make Beautiful Memories

## YOUR WAY

Having a baby is a beautiful thing, but for some women giving birth does not always turn out like expected.

This book gives tips and tools to help you gain more control over what happens to you and your baby in the hospital and for the first few weeks at home.

Use it to make sure that you and your newborn have a wonderful experience before, during, and after delivery.

# Your PREGNANCY — Know What to Expect

## LEARN AS MUCH AS YOU CAN ABOUT BREASTFEEDING

Breastmilk is the best gift for your baby. Before you have your baby, take classes at your local hospital and WIC clinic, or online at [TexasWIC.org](http://TexasWIC.org) to learn how to take care of yourself and how to breastfeed. Read books and watch DVDs that you get from the WIC program. Call the number on your health plan card to find out what breastfeeding services and supplies are covered. The more you learn about breastfeeding, the easier it will be.

For information on how to enroll in WIC, call 1-800-942-3678.



## INVOLVE FAMILY

Take your family members to a prenatal breastfeeding class. Share the books, brochures and DVDs you get from WIC with the people who will be helping you when your baby gets here — especially your partner and your mother. As they learn more about breastfeeding, they may be more helpful and better prepared when your baby is born.

## GET HELP FROM WIC

Ask to meet with a WIC peer counselor during your pregnancy and get her contact information. Peer counselors are WIC moms who breastfed their babies and who have been trained to help moms breastfeed. They can answer questions about WIC services, tell you about other assistance programs, and offer you comfort and encouragement.

## HOSPITAL

Find a hospital or birthing center that is a Baby-Friendly or a TEXAS TEN STEP facility by visiting [www.TexasTenStep.org](http://www.TexasTenStep.org). These hospitals provide the best support for breastfeeding families.

## CHOOSE THE RIGHT PROVIDER

Find health-care providers who support your decision to breastfeed. Your baby's doctor may offer services that include an International Board Certified Lactation Consultant in their office who can help you with breastfeeding once you return home. Use the tear out sheet at the back of this brochure to share your goals for your baby's birth and feeding with them.



# At the HOSPITAL — Know What's Best for You and Baby

## FEED YOUR BABY AS SOON AS POSSIBLE AFTER DELIVERY

The hour right after your baby's birth is often called *The Golden Hour*. That is because you and your baby are both eager and ready to meet each other. Your baby is also most alert and looking to breastfeed during this time. Make the most of this time and feed your baby often to help build your milk supply. After a few hours, your baby will become very sleepy and harder to wake to breastfeed.

With a cesarean delivery you can breastfeed your baby right after birth as long as you and your baby are well. If you are not with your baby, ask your partner to help hold or soothe him. Ask the staff to delay feeding as long as possible until you are with your baby again for breastfeeding.



## PLAN TO EXCLUSIVELY BREASTFEED

Exclusive breastfeeding means your baby is getting only your breastmilk and is the healthiest way to feed your baby. Exclusive breastfeeding is also important for building a good milk supply. The more you breastfeed, the more milk you make. Using formula, especially in the first few weeks, will decrease your milk supply. To get all of the health benefits breastfeeding provides, the American Academy of Pediatrics recommends exclusive breastfeeding for the first six months.

## LIMIT YOUR VISITORS

Too many visitors can overwhelm your baby and affect how well and often he wants to eat. Most babies will eat 8-12 times in a 24 hour period. Ask about limited visitor's hours or a set nap time during the day so that your baby can eat and your new family can rest. There will be plenty of staff coming in and out of your room — your nurses and doctors, staff with birth certificate papers, the hearing screen staff, housekeeping, and others. Limiting your personal visitors will cut down on distractions leaving more time for breastfeeding and bonding with your baby.



### HOW TO HANDLE VISITORS WHILE BREASTFEEDING:

- Ask them to knock and wait for a reply before entering your room.
- Ask them to call ahead before visiting you at the hospital or have them wait to visit once you and your baby are home.
- Tell them you will be breastfeeding often and using skin-to-skin care with your baby between feedings.
- Tell visitors they can stay while you breastfeed your baby, if you feel comfortable with them in the room.
- Develop a plan with your nurse to make sure you are not disturbed at unwanted times.
- Contact your WIC Clinic for a door sign to let visitors know you and your family are resting.





## PRACTICE SKIN-TO-SKIN CARE

All babies should be placed on their mother's chest right after birth for at least an hour and then as often as they like after that. On your skin is where your baby wants to be after birth. Skin-to-skin care is when you keep your baby dressed only in a diaper and cap against your bare skin, with a blanket covering your baby's back. Your baby can stay in skin-to-skin for the newborn medical check-up as long as you both are well.

Skin-to-skin benefits your baby by:

- Guiding him to the breast — the smell of your skin and breastmilk helps him find the breast for feeding.
- Giving him the good bacteria found on your skin, which helps to protect him.
- Calming, warming, and comforting him which makes him feel safe.
- Creating a strong bond between the two of you.

If you are separated from your baby, your family and partner can do skin-to-skin with him too.





## KEEP YOUR BABY IN THE SAME ROOM WITH YOU AT ALL TIMES

Rooming-in is good for all babies regardless of how they are fed. Babies feel safest when their mothers are near them. Moms rest better, too, which helps with healing.

If your baby has to be taken away for a procedure, send your partner or family along to keep him calm.

Rooming-in:

- Includes the family as part of the care team which builds confidence and parenting skills.
- Lets you respond to your baby right away, which helps him feel safe and calm.
- Better protects your baby against outside germs.

## AVOID GIVING YOUR BABY BOTTLES OR PACIFIERS

Your baby's suckling in the first few weeks should be at your breast. This helps you build a good milk supply. Early use of bottles and pacifiers can keep you from making a good milk supply. A pacifier may be used to comfort your baby during painful procedures like blood sampling or circumcisions. As soon as your baby is back with you, remove the pacifier and calm him by breastfeeding.





## TRUST YOUR BODY — COLOSTRUM IS ALL YOUR BABY NEEDS

Colostrum is the milk you make in the first few days after your baby is born. It is often thick, sticky and is clear to yellowish in color. Colostrum coats your baby's insides and helps prevent allergies and illness. Your colostrum is so protective it's like giving your baby his first immunization.

You will make very small amounts of colostrum to match your baby's small stomach. As your baby's stomach size grows, so does your milk supply.



## ASK FOR BREASTFEEDING HELP

Even if you think breastfeeding is going well, it is good to ask your nurse or breastfeeding specialist to look at how the baby is positioned and latched. They can give you tips on how to avoid soreness and how to know when your baby is hungry or full. If your baby is not latching well, ask for help in hand expressing your colostrum into your baby's mouth or into a container. Use a different feeding method (other than a bottle) to feed your baby because early bottle use can sometimes make breastfeeding more difficult.



## FEED YOUR BABY ON CUE

All babies use special signs or cues to tell you what they need. These cues can mean they are tired, hungry, sleepy, in pain, or that they are too full.

When your baby is ready to eat, he will show early hunger cues like:

- Sucking on his fist.
- Turning his head toward you.
- Sticking out his tongue and smacking his lips.

When your baby is ready to stop, he will show fullness cues like:

- Falling asleep.
- Pushing away from you or the feeding.
- Milk spilling from his mouth.

Even though some babies will only take one breast at a feeding, it is important to offer both. This gives you and your baby another chance to work on your position and latch and will help you make more milk.

Mothers often feel that crying means that their baby is hungry. Crying can also mean "I need something to be different" such as:

- He is tired and wants to rest.
- He is bothered by noise or lights or needs a diaper change.
- He is having pain and needs to be held or burped.
- He is hungry and early hunger cues were missed.

If your baby wasn't showing early hunger cues before he started crying, check for other reasons that he may be crying before feeding him again. Teach your family what your baby's cues look like too.





## IF YOUR BABY CAN'T BREASTFEED, ASK FOR A BREAST PUMP

If your baby is unable to breastfeed for any reason, it is important to begin pumping within 6 hours of delivery with a double electric pump.

Ask your nurse or breastfeeding specialist to teach you how to use the pump and how to combine pumping with hand expression to increase your milk supply. If you think you will need a pump longer than your hospital stay, call your health plan right away to get a pump. Go to WIC to learn how to use your pump or to get a pump if you cannot get one from your health plan.



## BIRTH CONTROL

Hormonal birth control such as progestin-only shots, implants and intrauterine devices (IUDs) are commonly used and might be offered to you by your doctor before you leave the hospital. They may affect your milk supply if used within the first few weeks. Talk with your doctor at your postpartum visit (4 - 6 weeks after your baby is born) about birth control options that will work best for you while breastfeeding.



## BE AWARE OF FORMULA ADVERTISING

You may receive free gifts from formula companies including diaper bags, coupons or formula during or after your pregnancy. These gifts may be handed out by health-care providers or delivered right to your door. You do not have to take the gifts or use the formula.

Remember:

- Giving your baby just one bottle of formula can cause you to make less breastmilk.
- Replacing your breastmilk with formula increases your baby's chance of having diseases and conditions like diabetes, obesity, diarrhea, and Sudden Infant Death Syndrome (SIDS) and increases your chance of having breast and ovarian cancer and heart disease.

# At HOME — Know How To Get Help

## WIC SUPPORT

Your breastmilk is a gift of health to your baby that lasts a lifetime. Before you reach for formula, reach for the phone and call WIC.

WIC can help with:

- Visits to check baby's weight or feeding.
- Peer support and classes about breastfeeding.
- Breastfeeding support numbers, materials and websites.



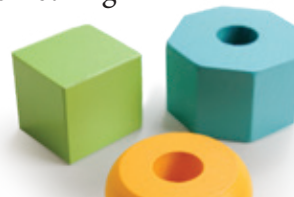
## HOSPITAL SUPPORT

Some hospitals offer breastfeeding support services after you go home.

Ask your nurse what is offered from your hospital before you leave. Do not be afraid to ask for help if you need it.

## WORK/SCHOOL SUPPORT

Make a plan to pump your breastmilk during the time you are away from your baby. Share your plan with your employer or school nurse/ counselor. Have a practice run, even for half a day with your baby's caregiver or child-care center to make sure they can support your breastfeeding plan. Teach them how to read your baby's hunger, fullness and "I need something to be different" cues.



FOR BREASTFEEDING  
QUESTIONS CALL

**Texas Lactation Support Hotline**

1-855-550-6667 (MOMS)

or visit [BreastmilkCounts.com](http://BreastmilkCounts.com)

**WIC Lactation Support Centers**

Houston • The Lactation Foundation  
[www.lactationfoundation.org](http://www.lactationfoundation.org)  
713-500-2800, option 1

Dallas • Lactation Care Center  
[www.lactationcarecenterdallas.com](http://www.lactationcarecenterdallas.com)  
214-670-7222

Austin • Mom's Place  
[www.momsplace.org](http://www.momsplace.org)  
512-972-6700

McAllen • Lactation Care Center RGV  
<http://www.co.hidalgo.tx.us/LCCRGV>  
956-292-7711



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## CHOOSING YOUR HEALTH-CARE PROVIDERS

Picking doctors (one for you, one for your new baby) are important decisions. You want doctors who will encourage breastfeeding and help you achieve your goals. Make appointments with several doctors to find out which one best supports breastfeeding.

### ASK YOUR DOCTOR:

- Yes  No Do you deliver at a Texas Ten Step or Baby-Friendly designated hospital?
- Yes  No Do you or the hospital offer breastfeeding classes before my baby is born?
- Yes  No Will my baby be placed skin-to-skin with me right after birth?
- Yes  No Will my baby stay in the room with me throughout the day and night?
- Yes  No Do you have a list of people that I can call for breastfeeding help?

### ASK YOUR BABY'S DOCTOR:

- Yes  No Does your office have an International Board Certified Lactation Consultant (IBCLC) to help me with breastfeeding? If not, do you have a list of people that I can call for breastfeeding help?
- Yes  No Will the baby's exam be done in the hospital room so that I can ask questions?
- Yes  No Will you talk with me before ordering formula for my baby?
- Yes  No Do I have to use a bottle to feed my baby if he needs formula?

*The American Academy of Pediatrics recommends a follow-up visit at 3 to 5 days of age.* Is the first visit with you and my baby within the first few days after he leaves the hospital?

If your doctor and baby's doctor answered "yes" to most of these questions, they offer great support for breastfeeding. If you need further help or have other breastfeeding questions, call your local WIC office and ask to speak to a peer counselor.

### ADDITIONAL NOTES:

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**IF YOU HAVE  
BREASTFEEDING  
QUESTIONS CALL**

**Texas Lactation Support Hotline  
1-855-550-6667 (MOMS)  
or visit [BreastmilkCounts.com](http://BreastmilkCounts.com)**

**YOU CAN  
DO IT.  
WIC CAN HELP.**

**BREASTFEEDING  
IS THE BEST GIFT  
FOR YOUR BABY!**

Find out how WIC can help you make amazing kids.  
Visit [TexasWIC.org](http://TexasWIC.org) to learn more and find your  
nearest WIC clinic.



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## INFANT FEEDING PLAN

My name is \_\_\_\_\_ and my goal is to exclusively breastfeed my baby.

The benefits of breastfeeding are very important to me and my baby. I request that these guidelines be supported as long as it is medically safe for me and my baby.

If I am unable to answer questions about how to feed my baby, please talk to my birthing partner \_\_\_\_\_ or my doctor, \_\_\_\_\_ who both support my decision to breastfeed.

### CHECK ALL THAT APPLY:

- EXCLUSIVE BREASTFEEDING**  
My goal is to exclusively breastfeed my baby. Please do not give my baby any formula before speaking to me or my birthing partner. I need all of my baby's suckling to be at my breast to build a good milk supply.
- NO BOTTLES OR PACIFIERS**  
Please do not give my baby artificial nipples including pacifiers or any bottles with formula, water, or glucose water. If there is a medical reason for this, I would first like to speak with a lactation consultant or pediatrician about trying different feeding methods with expressed milk.
- SKIN-TO-SKIN**  
Place my baby on my chest, skin-to-skin for at least one hour after my baby is born. If possible, please do routine newborn check-ups with my baby on my chest, skin-to-skin. Throughout our stay, I want to be able to hold my baby skin-to-skin as much as possible. Blankets may be placed over us, but not between us.
- FEED ON CUE**  
Please help me begin breastfeeding when my baby seems ready (for example rooting, licking lips, and so forth). Please do not force my baby to take the breast if he/she is not showing signs of readiness. Instead, keep my baby skin-to-skin with me until he/she is ready to try to latch.
- ROUTINE EXAMS**  
Please give my baby check-ups in my presence and do not take him/her away from me unless he/she requires medical treatment that cannot be done in my room.

### **EMERGENCY CESAREAN**

I want to hold my baby skin-to-skin as soon as possible after a cesarean section. If I am unable, please allow my partner to hold my baby skin-to-skin.

### **ROOMING-IN**

I would like to keep my baby in my room with me 24 hours a day. That way I will learn my baby's feeding cues and have the most skin-to-skin time. If we're not in the same room, please bring my baby to me at the earliest hunger cues, such as sucking on hands, making sucking noises, rapid eye movement, or rooting.

### **BREASTFEEDING ASSISTANCE**

Please teach me how to know the correct baby positioning and a good latch. Please teach me how to recognize my baby's early hunger cues, how to hand express milk, and how to tell if my baby is breastfeeding well.

### **BREAST PUMPS**

If I'm unable to breastfeed or I'm separated from my baby, I want to use a breast pump within 6 hours of delivery. If I need a pump longer than my hospital stay or if there is not a double electric breast pump available, please help me get a pump through my health plan.

### **DISCHARGE BAGS**

Please do not give me a free gift bag containing formula or show me any promotional or marketing materials concerning formula.

### **BREASTFEEDING SUPPORT AFTER MY BABY IS BORN**

I would like to receive contact information for breastfeeding support in case I need help with breastfeeding after we are at home.

## INFANT FEEDING PLAN

An Infant Feeding Plan is a plan of action that expresses your desired hospital experience and infant feeding goals to your family and your health-care providers. Check any options that you want or that you would like to ask hospital staff about.

The plan can be completed with family and shared with:

- Your doctor
- Your baby's doctor
- The hospital staff

The most important place to take your Infant Feeding Plan is to the hospital so don't forget to pack it in your hospital bag. Ask hospital staff to attach this plan to your chart. The plan will help refresh

your health-care provider's memory when you're in labor. Remind staff at shift changes that your Infant Feeding Plan is attached to your chart. It will bring new members of your medical team – such as an on-call health-care provider and your labor and delivery nurses – up to speed about your preferences.

