## MY BREASTFEEDING CHECKLIST

I \_\_\_\_\_ have chosen to exclusively breastfeed my baby. I thank you for respecting my decision and supporting my breastfeeding experience.

Please help my baby and me with the following, so that breastfeeding will be successful for us.

## FOR MY HOSPITAL STAY:

- Please help me make sure my baby receives only my milk. I want my baby to feed only on breastmilk.
- Please help me place my baby skin-to-skin on my chest, shortly after birth. If I give birth by cesarean section, please place my baby skin-to-skin as soon as possible.
- Please help me begin breastfeeding within the first hour after my baby's birth.
- Please assist me with breastfeeding, so that I learn correct techniques. Please show me ways to know that my baby is breastfeeding well.
- Please let my baby room-in with me. I want to hear the baby so that I can respond to him/her.
- Please examine my baby in my presence, and do not take him/her away from me unless medical treatment is needed that cannot be done in my room.
- If my baby cannot nurse at my breast or is separated from me due to medical reasons, **please** teach me how to hand express and bring me a hospital-grade electric breast pump as soon as possible. It is best that I begin removing milk for my baby within 4 hours of delivery.

## FOR DISCHARGE:

- Please do not give me infant formula samples, promotional material, or bottles and pacifiers for my baby, whether to use during our hospital stay or to take home. These will not help me succeed with my breastfeeding goal.
- Please talk to me about birth control options without hormones, as these choices will not reduce my milk supply.
- Please help me to get a hospital-grade electric pump if I need a breast pump after I leave the hospital.
- Please tell me where I can get breastfeeding help and support as needed after my baby and I are at home





