

Pregnancy Visit #10

- What Should I Feed My Baby?
 - Latching/Pumping
 - Sex and Breastfeeding

Topics for Next Visit

- How Do I Take Care of a Newborn?
 - What Do I Do When My Cries?
 - Newborn Screening
 - What are Well Baby Visits?
 - PIPE Touch Tones



Feeding Cues

Parents need to recognize babies' hunger cues. Not all cues associated with hunger (such as lip smacking or sucking a hand) mean the baby is hungry. Sometimes their baby really needs other comforts such as holding, cuddling, or just quiet playful games. When parents accurately read their baby's hunger cues and satisfy the baby's need with a complete feeding, their baby feels comfort and security. This process builds trust and closeness.

Parents can recognize a hunger cry very soon after their baby's birth. It is rhythmic and intense different from other cues. It often starts as fussing and gets louder when not answered.

These cues signal hunger:

- Rooting
- Clenched fingers and fists over chest and tummy
- Flexed arms and legs
- Opening and closing of mouth, simulating sucking
- Hand-to-mouth movements
- Sucking sounds and lip movements
- Fussiness
- Hunger cry

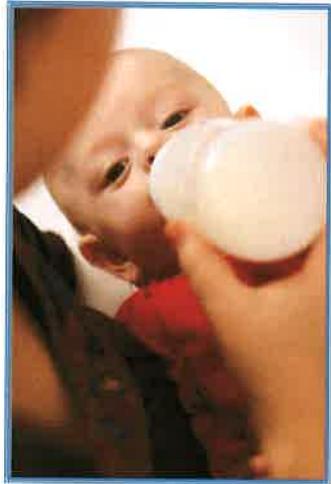
These cues signal the baby is full and satisfied:

- Extended and relaxed arms and legs
- Arms straight, relaxed alongside of the baby's body
- Fingers relaxed and straight (not clenched)
- Pushing away
- Back arching
- Lack of facial movements and sucking
- Falling asleep



How to Formula Feed

How often should I feed my baby?



Feed him when he's hungry!

Signs that baby is hungry include:

- Moving her head from side to side
- Opening his mouth
- Putting hands and fists to her mouth
- Puckering his lips as if to suck
- Nuzzling against your breasts
- Showing the rooting reflex
(moving her mouth towards something stroking her cheek)

How much should I feed my baby?

Age of Baby	Number of Bottles Each Day	Amount of Formula In Each Bottle
Birth to 1 week	6 to 10	1 to 3 ounces
1 week to 1 month	7 to 8	2 to 4 ounces
1 month to 3 months	5 to 7	4 to 6 ounces
3 months to 6 months*	4 to 5	6 to 7 ounces
6 months to 9 months	3 to 4	7 to 8 ounces
10 months to 12 months	3 to 4	7 to 8 ounces

* You can begin feeding your child solid foods around 6 months. Your doctor will tell you more. Baby needs less formula when eating solid foods.

Watch baby's cues to know when he's had enough. It is recommended that your child eat an average of 30 – 32 ounces of formula per day from one month to 12 months of age. He may fall asleep. He could close his mouth. He might turn away from the bottle. He could bite or play with the bottle nipple. He may start to fuss if you keep trying to give him the bottle.

How to Formula Feed

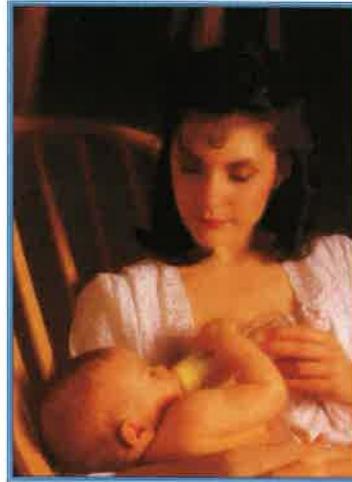
Which kind of formula should I use?

There are different types of formula. You can choose powdered, concentrated or ready-to-use.

Powdered formulas are the cheapest. They can be bought in bulk. You simply mix the powder with water.

Concentrated liquid formulas come in ready-to-pour cans. You must add water before using. Discard any leftovers within a day.

Ready-to-use formulas are packaged in individual bottles. You don't need to add water. They are very easy to use. This is the most expensive option.



***Never add extra water to formula. Only add water as instructed. Too much water in the formula can harm your baby.**



What is the best way to warm a bottle?

Some babies like cold formula. Your baby may prefer warm formula.

You can warm a bottle in hot (but not boiling) water. You can also buy a bottle warmer for warming bottles.

Don't heat bottles in a microwave. A microwave heats unevenly. It can create hot spots that could burn baby's mouth.

How to Formula Feed

What is the best way to give a bottle?

Find a comfortable spot. Hold your baby on your lap in the crook of your arm.

Cradle and support her head. Make sure that her head is higher than her tummy. This helps baby eat without choking.

Most babies will swallow some air during a feeding. Try burping after each ounce of formula.

Do not prop the bottle. Baby enjoys being held and cuddled while she eats.



Is my baby getting enough to eat?

Baby's diapers and growth tell you that he's eating enough.

Baby should have six or more wet diapers a day. He should have messy diapers often. He should be happy between feedings.

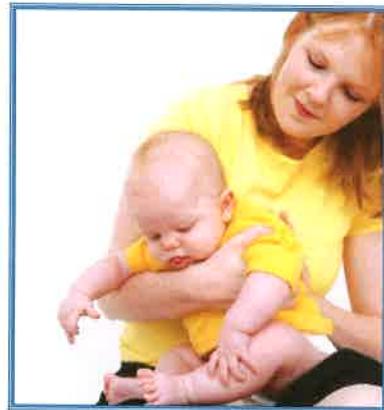
Baby's weight and height should go up steadily. Baby's doctor will check this at every visit.

How to Formula Feed

Is it normal for my baby to spit up after feedings?

Many babies will spit up a little after feedings. Babies often spit up when burped. That's normal. The spitting up lessens as baby gets older. Spitting up is fine if:

- Baby is growing and gaining weight.
- Baby doesn't feel pain when spitting up.



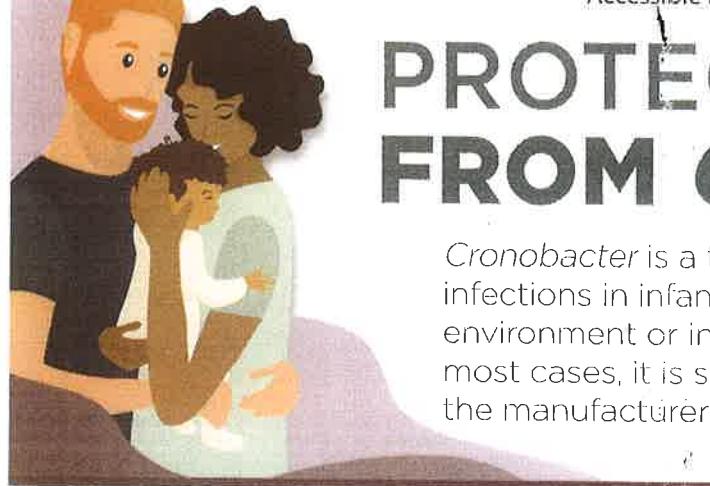
My baby is so hungry lately! Is this normal?

Baby may be going through a growth spurt. Growth spurts often come around:

- 7 to 10 days old
- Between 3 and 6 weeks
- 4 months
- 6 months
- 9 months



When baby seems especially hungry, follow his hunger cues. Feed on demand. Increase the number of feedings as needed.



PROTECT YOUR BABY FROM CRONO BACTER

Cronobacter is a type of bacteria that can cause rare but serious infections in infants. These bacteria are germs that can live in the environment or in dry foods, such as powdered infant formula. In most cases, it is safe to mix powdered infant formula following the manufacturer's instructions on the container.

If your baby is younger than 2 months old, was born prematurely, or has a weakened immune system, you may want to take extra precautions to protect them from getting sick with Cronobacter:



Breastfeed if you can. Very few cases of Cronobacter infections have been reported among babies fed only breast milk.



Clean, sanitize, and store feeding items safely, such as baby bottles and breast pump parts. This helps prevent contamination with germs and keeps the milk you feed your baby safe.



Clean and sanitize infant feeding items (such as nipples, caps, rings, and valves) and breast pump parts in a dishwasher or a clean wash basin that you use only for washing these supplies. Do not place these items directly in the sink because germs in sinks or drains could contaminate them. Allow items to air-dry thoroughly and store them in a clean, protected area.

If your baby is fed with formula:



Use liquid infant formula if possible because it is sterile (without germs) and is less likely to spread Cronobacter infection when handled carefully. Powdered formula is not sterile and may contain some germs.



If you use powdered infant formula, prepare and store it safely. Make sure your formula is not expired and the container is in good condition (no dents, puffy ends, or rust spots). Keep lids and scoops clean, and close containers of formula as soon as possible after using.



Keep powdered formula in the container dry to prevent germs from growing. Avoid getting the formula scoop wet. There is no need to wash the scoop unless it becomes wet or dirty (such as falling on the floor). If the scoop needs to be washed, clean it as carefully as you would your baby's bottles. The formula scoop must be completely dry before putting it back into the container.

If your baby may be at higher risk, consider taking these extra steps to prepare your powdered formula with hot water (at least 158°F/70°C):

STEP 1



Clean work surfaces such as countertops and sinks with soap and water or use a disinfectant wipe or paper towel sprayed with cleaning product.

STEP 5



Add the exact amount of formula listed on the container.

STEP 2



Wash hands with soap and water before preparing infant formula.

STEP 6



Put a cap on the bottle and shake to mix. Do not stir.

STEP 3



Boil water and **let it cool for about 5 minutes.**

STEP 7



Cool the formula to body temperature so it will not burn your baby's mouth. Hold the capped bottle under cool water or place it in an ice bath. Do not let the cooling water get into the bottle or on the nipple.

STEP 4



Pour into a clean bottle or feeding cup.

STEP 8



Before feeding your baby, test the formula's temperature by putting a few drops on your wrist. It should feel warm, not hot.

Using and Storing Prepared Formula



Use prepared infant formula within 1 hour from the start of feeding and within 2 hours of preparing it.

If your baby does not finish the entire bottle of formula, throw away leftover formula.

If you do not plan to start feeding your baby with the prepared formula right away, put it in the refrigerator immediately. Use formula in the refrigerator within 24 hours.

Throw out formula if you can't remember how long you have kept it in the refrigerator. Do not feed it to your baby.

For more information visit CDC's Cronobacter and [Infants page](#).



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

Choosing a Bottle and Nipple

You may use a bottle for formula or pumped breast milk. It can take time to find the bottle and nipple your baby likes. Buy some different styles and let baby try them. Once you've found the kind baby likes, stock up.

Bottles	About this kind of bottle...
Plastic	Good: They're light-weight and strong. They rarely break. Not-so-good: They cannot be deep-cleaned by boiling. Some older bottles may contain BPA*.
Glass	Good: They last a long time. They can be boiled for deep-cleaning. Not-so-good: They are heavier than plastic. They may break if dropped.
Disposable	Good: They use disposable liners for each feeding. Clean up is very easy. Not-so-good: They may be more expensive than regular bottles.

Nipples	About this kind of nipple...
Rubber/Latex	Rubber or latex nipples are soft and flexible. They may need to be replaced often, because they can crack or tear.
Silicone	Silicone has a slick, firm texture. It cleans easily and rarely cracks or tears.
Traditional shape	 Traditional shaped nipples are easy to find. Many babies like this nipple shape.
Orthodontic shape	 Orthodontic nipples are designed to fit your baby's mouth. The bulb is flat on the side that rests on your child's tongue.
Natural shape	 Natural shaped nipples are broad and soft. They have a wide base and flat nipple tip. This is more like the breast.

* I have heard plastic bottles aren't safe.

In 2008, some news stories questioned the safety of a chemical called bisphenol A (BPA). This chemical is used to make plastic. Although no one knows for sure, the FDA and the National Toxicology Program have raised concerns about the safety of BPA. It might affect the brain, prostate gland, or behavior of children.

If you are concerned, you can buy BPA-free baby bottles. Avoid plastic bottles with the number 7 or the letters PC (polycarbonate) on the bottom.

There are many benefits of breastfeeding for both parent and baby. Learn more below!

Benefits for Parent

- ✓ Available right when you need it
- ✓ Can help your bonding with baby
- ✓ May lower risk of breast and ovarian cancer later in life
- ✓ Saves money on buying formula
- ✓ Avoids potential issues with formula like recalls and local shortages
- ✓ May lower risk of postpartum depression



Check out typical concerns about breastfeeding on the next page!

Benefits for Baby

- ✓ Your body creates the perfect nutrition for your baby!
- ✓ Milk is packed with antibodies to help build baby's immune system
- ✓ Milk provides variety of tastes so baby may be less picky eater
- ✓ Lowers risk of sudden infant death syndrome (SIDS)

Ouch! Pain and Breastfeeding

Sometimes it is not so easy to learn to breastfeed. This is normal. Nursing comes easily for some women. For some moms, it can be frustrating and not feel good. While you're in the hospital, ask the nurses for help. They can coach you as you learn. Ask for a lactation consultant.

Try not to become discouraged. Have patience. The good news is that breastfeeding gets easier with time.

Why does it hurt when baby eats?

At first, breastfeeding can hurt. You may have sore nipples as you and baby are learning. Your nipple may look red. It may be sore to touch. You may have a raised and reddened place on your nipple. So what causes sore nipples?

- Baby is sucking on only the nipple
- Poor latch
- Chapped nipples
- Pumping

You may have 30 to 60 seconds of latch-on pain. Then the pain should go away. If you continue to feel pain, stop feeding. Reposition baby on your breast. Start again. If you still feel pain when baby eats, talk to your doctor. You need to be sure there is no infection.



Other tips:

- Use the other breast to feed your baby.
- Don't wear tight bras.
- Change nursing pads often.
- Wash your breast with clean water. Do not use harsh soaps.
- Let your breast air dry after breastfeeding.
- Apply some breast milk to the sore place on your breast. Breast milk can help heal it.
- Ask your nurse what medicine you can take for pain.

Ouch! Pain and Breastfeeding

My breasts are swollen, hard, and painful. What happens?

Your breasts may become swollen and hard 3-5 days after your baby is born. Your breast may hurt. This is called engorgement. This can happen if you wait too long to feed your baby or if you are separated from your baby and don't pump every 2-3 hours.

Try this:

- Find a comfortable position. When the baby shows signs of hunger, feed the baby.
- Try not to wait too long to feed the baby. Your new born should eat every 2-3 hours.
- Allow the baby to drain the milk of one breast before offering the other one.
- Avoid using pacifiers.
- Wear a bra that fits well. This will prevent problems such as blocked ducts, or mastitis.
- Drink lots of water, and eat healthy foods.
- Hand express or pump some milk out to soften the areola before breastfeeding your baby. This will allow the baby to latch on more easily.
- Massage your breast. This will help with circulation and help prevent blocked ducts.
- Apply cold compresses to help ease the pain in between feeding sessions.
- When you can't feed your baby at your breast, pump and store your breast milk.
- Attend La Leche League or other breastfeeding support groups in your town. Staying connected to moms who are breastfeeding can be a great help.
- If your breasts are still engorged, contact your nurse or Lactation Consultant.



Ouch! Pain and Breastfeeding

My breast looks pink and flaky, and feels cracked and itchy.

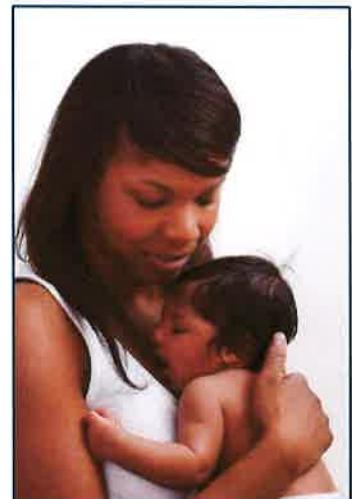
Our bodies are covered by bacteria. Most of the time this bacteria will not hurt us. But sometimes this bacteria can cause an infection. This infection can spread to your breast. Breastfeeding may have been going well. The baby was latching on. One day you begin to feel a burning or shooting pain during or after breastfeeding. This can be a sign of infection.

To find out if you have an infection:

- Check your breasts. Do they look shiny pink, flaky, cracked and feel itchy?
- Check baby's mouth. Look at cheeks, gums or tongue for white spots or coating.
- Check baby's bottom for red spots that won't go away with diaper cream.

Other reasons for this infection:

- Bacteria can enter through cracked nipples.
- The infection can pass from baby to mom.
- After using antibiotics or steroids some women may get this infection.
- If you have HIV, AIDS, or Diabetes you are at risk for getting this infection.



Try this:

- Take baby to his or her health care provider the doctor to get medication for this infection (thrush).
- See your health care provider for medication for you.
- Wash your hands before and after you take care of your baby.
- Change nursing pads often. A wet nursing pad might make the infection worse.
- Wear a clean bra every day.
- Wash all clothing in hot water (above 122°F) if it comes in direct contact with your breasts or baby's mouth or bottom. Be sure to lower the water temperature before giving baby a bath. Baby's bath should be between 90 and 100 degrees Fahrenheit. Always test water temperature with your elbow or a thermometer.

Ouch! Pain and Breastfeeding

- Clean everything your baby puts in their mouth. Items that come in contact with baby's mouth need to be sterilized. These include bottle nipples, pacifiers, toys, breast pump parts, and nipple shields.

When I touch my breast, it feels like a rope under my skin.



When the breast does not completely drain of milk, some milk may build up in the milk duct (the passageway where the milk travels from breast to exit the nipple). When the duct gets blocked there is pressure that causes pain and pink or reddening of the skin. It may feel like a lump. It may be warm to the touch. It usually happens to one breast.

Try this:

- Use a warm compress to the sore area of breast.
- Massage the sore breast. Start massaging above the blocked duct, in a circular motion, toward the nipple. Some milk might leak out, which will help your breasts feel less sore.
- Put the baby on the sore breast to feed at least every 2 hours. This will help to unblock the plug.
- Check your bra. Does it fit well? Bras that are too tight can cause blocked ducts.
- A plugged duct may be a first sign that you are doing too much. You may find an area on your breast that is raised, red or warm to the touch. Slow down. Get enough rest, good food and fluids! Do whatever helps you relax like listen to music, read a book, or take a warm bath.

One side of my breast is red, warm, and feels like a lump when I touch it.

- You may find an area on your breast that is raised, red or warm to the touch. You may even have chills or feel achy like the flu. This means you may have mastitis. Mastitis is a swelling of the breast that can lead to infection.
- What causes mastitis? The nipple has an opening where the milk comes out. When injury to the nipple occurs, this opening can allow bacteria to enter. If you are run down and not removing breast milk regularly you may get mastitis.

Ouch! Pain and Breastfeeding

Try this:

- Use a warm or cold compress to the sore area of breast. Use the kind that gives you the most relief.
- Massage the sore breast. Start massaging above the blocked duct, in a circular motion, toward the nipple. Some milk might leak out, which will help your breasts feel less sore.
- Put the baby on the sore breast to feed at least every 2 hours. This will help to unblock the plug.
- Rest. House work can wait. Lie down and cuddle with your baby.
- Drink plenty of fluids.

The infection can clear up in 2-4 days. If it doesn't, contact your healthcare provider. They can give you medication for the infection to decrease pain and inflammation.



Can I Breastfeed My Premature Baby?

It can be harder to breastfeed with a premature baby. It takes a little extra work.

Tell the nurses in the NICU that you want to breastfeed. They will help you. Some premature babies cannot breastfeed. They do not have the strength yet. In this case, you will need to pump your milk. Baby can drink breast milk from a bottle.

The hospital lactation consultant can help you get a good breast pump. You will need to pump 6-8 times a day. Sometimes even more. You may need to pump even after baby breastfeeds. This helps your body to produce enough milk.



What I was told about breastfeeding my premature baby:



Sometimes premature babies need extra calories. They do not have the strength to breastfeed long enough.



Baby's doctor may prescribe a breast milk fortifier. This is a powder mixed with your breast milk. Baby drinks the breast milk from a bottle.

The fortifier gives baby added energy, protein, vitamins, minerals and salts. These help baby to grow.

My thoughts about breastfeeding my baby:

Breastfeeding in Public



Breastfeeding is a natural, beautiful thing. But some women feel shy about breastfeeding in public.

When you are out with your baby, you may need to breastfeed. Here are some tips:

Practice at home. Learning to breastfeed without showing your breasts to those around you takes practice. It can be hard to help baby latch on at first. If you're worried about nursing in public, practice at home first. Then you can take baby out and about.



Find a quiet spot. Look around for an area where you can be private. In a restaurant or food court, find a table in a quiet section. You might also use a fitting room. You could try a couch in the ladies room. Your car can also be a great place to find privacy.

Cover up. You can find clothes designed for breastfeeding. They have openings to help you nurse discreetly. You can cover up with a blanket or a nursing coverup. You can breastfeed in your normal clothes. Just arrange your clothes to cover up while baby eats.



My thoughts about breastfeeding in public:

Common Questions about Pumping

There are many reasons why you might choose to pump or hand express milk. Some reasons include:

- Regularly being away from your baby due to work or school
- Desire to have family members and other caregivers feed baby
- Wanting to boost your milk supply



Common Questions

When do I get a pump?

While it won't be used until after delivery, it is very helpful to get a pump during the 3rd trimester of pregnancy. Many parents find that seeking out a pump around 30 weeks gestation provides plenty of time to receive it.

How do I get a pump?

Some parents get a pump to keep, others rent a pump. Options for getting a pump may include private insurance, Medicaid, your local hospital, or WIC clinics. Ask your nurse to help you figure out which option might be best for you!

What are pumps useful for?

Pumping can be a useful tool for various reasons. Check out a couple example scenarios below:

- Rachel uses hand expression to relieve engorgement one week postpartum.
- Kai pumps at 4 weeks postpartum for their partner to be able to feed baby and to prepare for their return to work.

Lactation consultants may recommend pumping for other circumstances, such as prematurity or difficulty with latching.

What to expect with pumping?

It can be helpful to think of pumping and hand expression as tools in your toolbox. Keep in mind pumping with an electric pump can be uncomfortable at times, involves cleaning many parts, and isn't as efficient as baby at getting milk out.

Can I pump at work?

Yes! The Fair Labor Standards Act requires businesses to provide a private space for lactating people to express milk. Check out more info [here](#)!

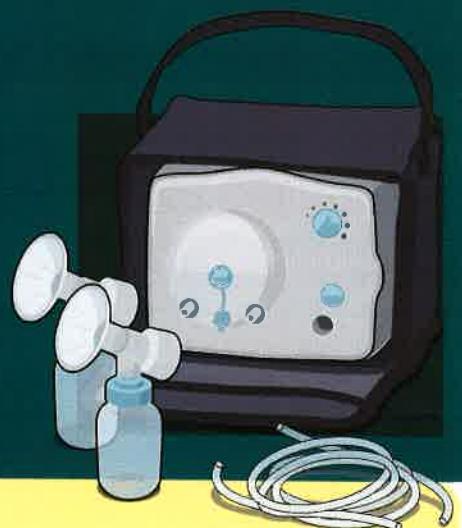
Pumping Tip!

Baby's first job is to learn how to get milk out. Your body's job is to learn how much milk your baby needs. This process takes a few weeks and goes best when baby feeds as much as desired. Hold off on pumping to:

- Provide baby lots of time to practice feeding
- Establish a sufficient milk supply!

How to Keep Your Breast Pump Kit Clean

Providing breast milk is one of the best things you can do for your baby's health and development. Pumping your milk is one way to provide breast milk to your baby. Keeping the parts of your pump clean is critical, because germs can grow quickly in breast milk or breast milk residue that remains on pump parts. Following these steps can help prevent contamination and protect your baby from infection. If your baby was born prematurely or has other health concerns, your baby's health care providers may have more recommendations for pumping breast milk safely.



BEFORE EVERY USE

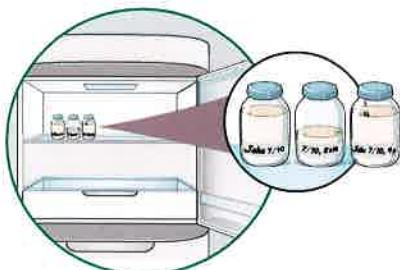


Wash hands with soap and water.

Inspect and assemble clean pump kit. If your tubing is moldy, discard and replace immediately.

Clean pump dials, power switch, and countertop with disinfectant wipes, especially if using a shared pump.

AFTER EVERY USE



Store milk safely. Cap milk collection bottle or seal milk collection bag, label with date and time, and immediately place in a refrigerator, freezer, or cooler bag with ice packs.

Clean pumping area, especially if using a shared pump. Clean the dials, power switch, and countertop with disinfectant wipes.



Take apart breast pump tubing and separate all parts that come in contact with breast/breast milk.



Rinse breast pump parts that come into contact with breast/breast milk by holding under running water to remove remaining milk. Do not place parts in sink to rinse.

Clean pump parts that come into contact with breast/breast milk as soon as possible after pumping. You can clean your pump parts **in a dishwasher** or **by hand** in a wash basin used only for cleaning the pump kit and infant feeding items.

Follow the cleaning steps given on the next page.



Centers for Disease
Control and Prevention
National Center for Emerging and
Zoonotic Infectious Diseases

Clean Pump Kit

CLEAN BY HAND



Place pump parts in a clean wash basin used only for infant feeding items. **Do not place pump parts directly in the sink!**

Add soap and hot water to basin.

Scrub items using a clean brush used only for infant feeding items.

Rinse by holding items under running water, or by submerging in fresh water in a separate basin.

Air-dry thoroughly. Place pump parts, wash basin, and bottle brush on a clean, unused dish towel or paper towel in an area protected from dirt and dust. Do not use a dish towel to rub or pat items dry!

Clean wash basin and bottle brush. Rinse them well and allow them to air-dry after each use. Wash them by hand or in a dishwasher at least every few days.

OR CLEAN IN DISHWASHER



Clean pump parts in a dishwasher, if they are dishwasher-safe. Be sure to place small items into a closed-top basket or mesh laundry bag. Add soap and, if possible, **run the dishwasher using hot water and a heated drying cycle (or sanitizing setting)**.

Remove from dishwasher with clean hands. If items are not completely dry, place items on a clean, unused dish towel or paper towel to air-dry thoroughly before storing. Do not use a dish towel to rub or pat items dry!

After Cleaning

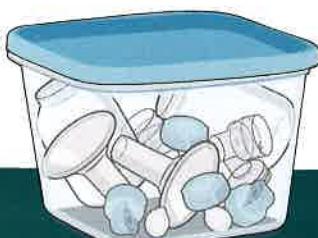
FOR EXTRA PROTECTION, SANITIZE



For extra germ removal, sanitize pump parts, wash basin, and bottle brush **at least once daily** after they have been cleaned. Items can be sanitized using steam, boiling water, or a dishwasher with a sanitize setting. Sanitizing is especially important if your baby is less than 2 months old, was born prematurely, or has a weakened immune system due to illness or medical treatment.

For detailed instructions on sanitizing your pump parts, visit
www.cdc.gov/healthywater/hygiene/healthychildcare/infantfeeding.html

STORE SAFELY



Store dry items safely until needed. Ensure the clean pump parts, bottle brushes, and wash basins have air-dried thoroughly before storing. Items must be completely dry to help prevent germs and mold from growing. Store dry items in a clean, protected area.

Learn more about safe and healthy diapering and infant feeding habits at www.cdc.gov/healthywater/hygiene/healthychildcare.

What About Sex During Lactation?

Everyone's desire for and experience of sex during lactation is unique. Below are some common considerations.

Some people experience leaking of milk or vaginal dryness during sex

Some parents prioritize sleep over sex during this time

Some people like having sex when they are lactating, while others are turned off or "touched out" during this time

Different positions may help make sex more comfortable

Sex during this time will not impact milk production

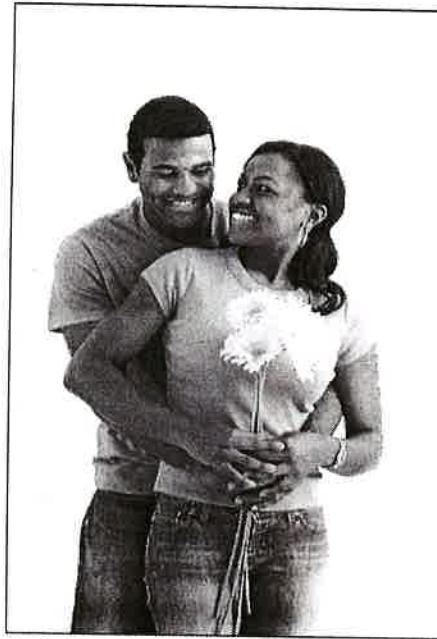


TIPS TO REMEMBER:

- Follow your health care provider's guidance on when to resume sex postpartum.
- The decision to have sex should always be one where both people are in agreement.
- Avoid sex if you have concerns about vaginal infection and talk to your health care provider.
- Use condoms to protect from sexually transmitted infections and chat with your health care provider about birth control options that are lactation-friendly!

What About Sex and Breastfeeding?

- Some people like having sex during the months they are breastfeeding.
- Some people feel turned off by sex during this time.
- Sometimes breastfeeding women feel too tired to have sex.
- Some women experience dryness, painful breasts, vaginal soreness – especially during the first 6 weeks after delivery.
- For some women, breastfeeding can be a very sensual experience.
- Sometimes breasts leak leading up to or during sex.
- Sex during this time will not harm milk production.
- The same hormone – oxytocin is produced during sex and breastfeeding! For some women the touch and connection with their baby replaces the need to be touched by a partner. They connect emotionally with their partner but physical needs are met during breastfeeding.



All these things are normal – and every woman's experience is unique. There is no right or wrong path when it comes to sex and breastfeeding

Some things to think about...

- The decision to have or not have sex during this time should be a joint decision between you and your partner. However, the breastfeeding Mom should always make the final choice when, if and how to have sex.
- The way you feel physically and emotionally can go up and down like you are on a roller coaster. This can mean that you might feel excited about sex one minute and not excited the next.
- Different positions may make sex more comfortable.
- It's normal for breasts to leak before, during or after sex.
- Continue to practice safe sex.
- Avoid sex if fluid or blood is leaking from your vagina. See your health care provider as soon as possible.

Talking About Breastfeeding with My Partner

Here are things we can talk about together:



- A new baby might make us jealous!
- Sex and breastfeeding (leaking, touch, emotions, cuddling and affection).
- Things that will help me most:
 - At the hospital and coming home (car seats, getting baby's space ready, soreness, emergency contact info).
 - In the first 2 weeks (sleep, schedules, nutrition, bonding with baby, house help, diapers and other baby needs).
 - After a few months (going back to school or work, house help, bonding with baby, still breastfeeding).
- Going to breastfeeding classes before baby comes.
- Supporting my choice to breastfeed.
- Discomfort during breastfeeding and what to do about it?
- Sleeping through the night and other growth questions about breastfed babies.
- Other

How will we talk about these topics? How will we decide what is best?

What else?