

[Expert View](#)

# How to Prepare for Breastfeeding in the Month Before Birth

Some preparation can make the learning curve easier.



Dr. Holly Cummings



If you're planning to breastfeed, there are some things you can do in your last month of pregnancy that may make the process easier. I tell my patients that while breastfeeding is totally natural, it's also the hardest thing I ever did. Some preparation can make the learning curve easier.

Here's how to get ready.

## Get your breast pump.

Most health insurance companies cover the cost of breast pumps. Insurers usually require a prescription from your ob-gyn and may cover only certain pump models.

The last month of pregnancy is the time to do your research, make sure you have your prescription, and order your breast pump. (But most pumps have limited-time warranties, so there's no reason to use up that time by ordering the pump any earlier.)

## Choose a lactation counselor.

Hospitals have lactation counselors that can help you get off to a good start. But I also recommend that my patients find a lactation counselor who they can see soon after coming home. (It can take a while to figure out how to breastfeed.) The month before birth is the time to choose a lactation counselor and to check into health insurance coverage.

Most insurers cover lactation counseling, but you need to know who is in your network. Then, identify the counselor you want to work with and find out how to make an appointment.

Your ob-gyn can refer you to a lactation counselor, or you can use [the online directory](#) from the International Lactation Consultant Association. I advise my patients to choose consultants who are certified by the IBLCE (International Board of Lactation Consultant Examiners). They have the most training.

Some lactation counselors may be able to give you advice over the phone or on a video call. When you research lactation counselors, you can call them and ask if they offer virtual visits.

## Talk with your ob-gyn about breastfeeding challenges – and ask if you have any health conditions that could make it harder.

If you've had challenges with breastfeeding in the past, or if there's anything you're worried about, this is the time to discuss it with your ob-gyn.

There are also certain medical conditions that make it more likely to have difficulty with breastfeeding. Having a history of diabetes or [polycystic ovary syndrome \(PCOS\)](#), for example, increases the risk of having a low milk supply.

When patients are at risk for a low milk supply, I talk with them about hand expression before birth. Hand expression is a technique where you use your hands to get the breast milk out of your breasts. When you try it in the final few weeks of pregnancy, the goal is to produce colostrum – the fluid that's made at the start of milk production. This technique may improve milk supply in some cases.

## Plan for skin-to-skin contact right after delivery.

Holding your baby directly against your bare skin right after birth is called “skin-to-skin contact.” Ask about how this is done where you'll be giving birth. In my hospital, this is done whenever possible. Skin-to-skin contact helps establish the bond between you and your baby. It's also one of the first signals to your body to start making milk.

## Free up time for breastfeeding.

You can free up more time for breastfeeding when baby is here by doing some household prep in this last month. Stock the freezer with meals now so you don't have to do a lot of cooking later. If friends and family ask how they can help, suggest they make some freezer meals for you.

Painting the baby's bedroom is a task you can skip in the last month. Patients often feel they have to get this done. But for the first few months, the best place for the baby to sleep is in their own crib or bassinet in your bedroom.

## Know that not everyone is able to breastfeed, even with careful preparation.

Breastfeeding is one of the biggest challenges that new parents face. Sometimes health conditions or other challenges can make this feeding method unworkable.

If you want to breastfeed and are having trouble, work with your ob-gyn or lactation counselor. They can help address your baby's latch, any issues with your pump parts and pumping technique, and other ways to increase your milk supply.

But if you still can't breastfeed or you decide not to, it's OK. Formula feeding can supply the nutrition your baby needs. You will find the feeding method that is best for you, your baby, and your family.

[Have more questions about breastfeeding? Read [Breastfeeding Your Baby](#).]

Last updated: November 2022

Last reviewed: August 2024

*Copyright 2025 by the American College of Obstetricians and Gynecologists. All rights reserved. Read [copyright and permissions information](#).*

*This information is designed as an educational aid for the public. It offers current information and opinions related to women's health. It is not intended as a statement of the standard of care. It does not explain all of the proper treatments or methods of care. It is not a substitute for the advice of a physician. Read [ACOG's complete disclaimer](#).*

---

## About the Author



### Dr. Holly Cummings

Dr. Cummings is an obstetrician–gynecologist who serves as assistant professor of clinical obstetrics and gynecology at Perelman School of Medicine at the University of Pennsylvania in Philadelphia. She is a fellow of the American College of Obstetricians and Gynecologists.

[About  
ACOG](#)[Disclaimer](#)[Contact  
Us](#)[How to Find an Ob-  
Gyn](#)

---

Copyright 2025 American College of Obstetricians and Gynecologists  
[Privacy Statement](#) | [Terms and Conditions of Use](#)