



UW Medicine

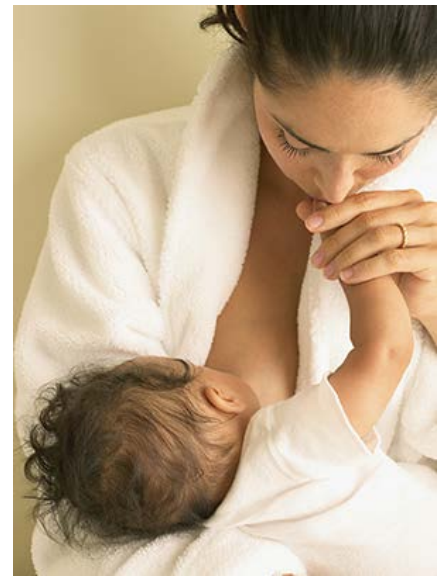
## 您的亲母乳喂养计划

为您介绍详情

本手册说明了我们对新生儿亲母乳喂养的基本护理计划。

在华大学医学中心、我们遵循世界卫生组织和联合国儿童基金会制定的“成功的亲母乳喂养十个步骤”。作为您亲母乳喂养计划的一部分：

1. 我们制定并遵循书面的亲母乳喂养政策。
2. 我们已经培训了医护人员来执行此政策。
3. 我们告诉孕妇亲母乳喂养的益处。
4. 亲母乳喂养在出生后一小时内开始。
5. 我们教导母亲如何亲母乳喂养。
6. 除非婴儿有医疗需要、否则仅母乳喂养母乳。
7. 母亲和婴儿住在同一房间。
8. 我们鼓励母亲按婴儿的需要母乳喂养。
9. 我们不为婴儿提供任何人工乳头或奶嘴。
10. 我们转介母亲到亲母乳喂养支持小组。



母乳喂养是仅有您可以提供的完善食物和关爱

### 为什么亲母乳喂养很重要？

- 亲母乳喂养是仅有您可以提供的完善食物和关爱。您给宝宝的是受益一生的礼物。亲母乳喂养可降低婴儿感染、癌症、肥胖和婴儿猝死综合症（SIDS）的风险。
- 亲母乳喂养期间发生皮肤之间的接触有助于亲情的黏结、使您和宝宝之间形成紧密的关系。即使您的宝宝尚未准备好紧锁乳房、我们仍建议您尽早开始肌肤相贴的时间、因为让宝宝感受到您身体



有关母乳喂养的有用视频，请上全球健康媒体网站：

[globalhealthmedia.org](http://globalhealthmedia.org) 点击

“我们的视频 (Our Videos)，然后点击“母乳喂养” (Breastfeeding)。

以下是一些视频标题：

- 头几个小时的母乳喂养
- 母乳喂养的位置
- 将宝宝紧贴在乳房上
- 您的宝宝摄取了足够的奶吗？
- 增加乳汁的供应
- 如何挤乳汁
- 安全储存母乳
- 关于乳头痛怎么办

的温暖是非常有帮助的。这对您也有利。亲哺喂养时、就会释放出激素、可以帮助您放松和镇定。当您从分娩中恢复过来时、这些激素还可以帮助子宫收缩。当宝宝吮吸并从乳房中吸取初乳（第一乳）时、乳房会发出增加乳汁量的反应。

- 如由于宝宝在新生儿重症监护室 (NICU) 或婴儿渐进监护室 (PCN) 护理、使您们不能在一起、我们就会帮助您用手或泵乳机来抽取乳液。这有助于增加乳液的产量。
- 一些父母担心宝宝单吃初乳是不够的。但是、少量的初乳中富含重要的营养成分、可以抵抗感染并帮助宝宝维持血糖的水平。初乳还可以帮助宝宝首次的排便。
- 与护士讨论如何配合宝宝哺乳的时间来安排您所需要的护理。

## 住院期间的情况？

- 大多数父母在分娩后会感到疲倦。宝宝睡觉时父母也要尽量入睡。
- 当您们到达母婴室时、宝宝可能已经含着乳头了。您可能会注意到宝宝刚出生后一小时或更长时间都处于清醒状态、然后可能进入了较长的睡眠期。大多数婴儿在第一天睡得很多、但每个婴儿都不一样。宝宝的初次哺养可能时间很短或很长、经常或较少吮吮。
- 经过培训的护士和患者护理技术人员可以帮助您学习亲哺喂养。根据需要、他们会为您提供有价值的信息和支持。
- 在您开始认识宝宝时、护士可以帮助您了解宝宝的睡眠、醒来和哺养线索。（请参阅本手册中的“熟知您宝宝的身体”一章。）亲哺喂养是最有益的、当您看到需要哺乳的提示时、将宝宝放到乳房上、以下是需要哺乳的提示：

- 宝宝口舌有动作
- 宝宝把手放到嘴里

有时宝宝很困、您可能看不到哺乳提示。如果您的宝宝困了、我们建议每 3 小时把宝宝抱到乳房。

当您把宝宝抱到乳房时：

- 把宝宝的包巾拿掉、皮肤贴皮肤的抱着宝宝。



宝宝的喂食提示之一是将手移到嘴里。

- 然后、用手挤一点奶汁在宝宝的嘴里。

这是一种鼓励宝宝醒来喂食的方法。它还可以给乳房提供良好的荷尔蒙信息、有助于产奶。在亲哺喂养的不同时间、用手挤出奶汁是一项有用的技巧。很容易学习。您的护士可以帮助您。

- 有时对亲哺喂养的自然行为会感到不能得心应手。我们就是来帮您的！您和您的宝宝都在学习一项新技能。请参阅本手册中的“将宝宝紧贴在乳房上”一章、有不同的方法帮助宝宝深深地贴在乳房上。
- 您的护士会检查宝宝紧锁乳头的情况（宝宝的嘴如何含紧乳房）。在护士班次开始时、您的护士会询问您宝宝哺乳的情况、询问您需要什么帮助、并制定您哺乳时联系护士的计划。
- 宝宝紧锁乳头、和小心地将宝宝的嘴从乳头松开是防止乳头疼痛的秘诀。请参阅本手册中的“乳头疼痛”一章，以了解有关预防和治理乳头痛的更多信息。
- 我们的哺乳顾问会拜访曾做过乳房手术、难以哺乳或有早产儿、或宝宝在新生儿加护病房（NICU 或 PCN）的母亲。如您想安排哺乳顾问、请告诉您的护士。

## 回家后的情况？

在您回家的第一周、亲哺喂养会发生许多变化。对于大多数母亲来说、这是她们的奶汁完全“充盈”的时候。

- 要了解下一阶段亲哺喂养的详情请参阅“有关亲哺喂养的常见问题”和“亲哺喂养的舒适措施”一章。
- 要评估亲哺喂养的状况、请参阅“亲哺喂养的状况如何”一章。
- 有关亲哺喂养资源的列表、请参阅“亲哺喂养资源”一章。

在您住院期间、请阅读这些章节。这样有帮助您记住以后如需要时、即可回来阅读这些章节。

## 回家之前

在带宝宝回家之前、请确认可以做到以下各项：

- 我可以自己或在助手的帮助下将婴儿紧锁乳头。
- 我知道如何护理乳头疼痛以及如何减轻疼痛。

- 我宝宝的体重减轻是在“正常”范围内。
- 我已经与宝宝的医护提供者安排好预约、在宝宝 3 到 4 天时做健康儿童体检。

我们致力于为您提供实现亲哺喂养目标所需的帮助！如有任何疑问、请询问我们。

现在、请回到本手册首页的目录并勾选此题材的框框、以便让护士知道您已经阅读了本章。

### 您有疑问吗？

我们很重视您的提问。  
如您有哺乳方面的疑问、请联系哺乳辅导服务： 206.598.4628.

## Your Breastfeeding Plan of Care

### *What to expect*

*This handout explains our basic plan of care for helping you breastfeed your new baby.*

At UW Medical Center, we follow “Ten Steps for Successful Breastfeeding” created by the World Health Organization and UNICEF. As part of these steps:

1. We created and follow a written breastfeeding policy.
2. We have trained our healthcare staff to implement this policy.
3. We tell pregnant women about the benefits of breastfeeding.
4. Breastfeeding is begun within an hour of birth.
5. We show mothers how to breastfeed.
6. Infants are given only breastmilk unless there is a medical need.
7. Mothers and infants stay in the same room.
8. We encourage mothers to breastfeed on demand.
9. We do not offer any artificial teats or pacifiers to the baby.
10. We refer mothers to breastfeeding support groups.



*Breastfeeding provides the perfect food and loving care only you can give.*

### **Why is breastfeeding important?**

- When you breastfeed your baby, you are giving a perfect food and the loving care that only you can provide. You are giving a gift



For helpful videos about breastfeeding, visit the Global Health Media website at [globalhealthmedia.org](http://globalhealthmedia.org). Click on “Our Videos” and then on “Breastfeeding.”

Here are just a few of the video titles:

- *Breastfeeding in the First Hours*
- *Positions for Breastfeeding*
- *Attaching Your Baby at the Breast*
- *Is Your Baby Getting Enough Milk*
- *Increasing Your Milk Supply*
- *How to Express Breastmilk*
- *Storing Breastmilk Safely*
- *What to Do About Nipple Pain*

that will last a lifetime. Breastfeeding reduces your baby’s risk for infections, cancers, obesity, and SIDS (sudden infant death syndrome).

- The skin-to-skin contact that happens during breastfeeding helps with *bonding*, the close relationship forming between you and your baby. Even if your baby is not yet ready to latch onto your breast, we encourage early skin-to-skin time because it is very good for your baby to feel the warmth of your body. It is good for you, too. While you are breastfeeding, hormones are released that can help you feel relaxed and calm. These hormones also help your uterus to contract as you recover from giving birth. When your baby sucks and takes the *colostrum* (first milk) from your breast, your breasts respond by increasing the amount of milk.
- If you can’t be near your baby because your baby is being cared for in the Neonatal Intensive Care Unit (NICU ) or Progressive Care Nursery (PCN), we will help you hand-express or pump. This will help your milk increase.
- Some parents worry that the early colostrum is not enough for their baby. But the small amounts of colostrum are packed with important nutrients that fight infection and help your baby maintain blood sugar. Colostrum also helps your baby pass their first bowel movements.
- Talk with your nurse about how to time the care you need around your baby’s need for feedings.

## **What can I expect while I am in the hospital?**

- Most parents are tired after giving birth. Do your best to sleep when your baby sleeps.
- By the time you arrive on the Mother Baby Unit, you will probably have already put your baby to your breast. You may notice that your baby was wakeful for an hour or more right after birth and then may have entered a long sleep period. Most babies sleep a lot in the first day, but each baby is different. Your baby’s first feedings can be short or long, often or less often.
- The nurses and patient care technicians are trained to help you learn to breastfeed. As needed, they will give you valuable information and support.





One of your baby's feeding cues is moving their hands to their mouth.

- As you get to know your baby, your nurses can help you learn your baby's sleeping, waking, and feeding cues. (See the chapter "Getting to Know Your Baby's Body" in this workbook.) Breastfeeding goes best when you put your baby to your breast as soon as you see feeding cues:
  - Mouth and tongue moving
  - Hands to mouth

Sometimes a baby is sleepy and you may not see feeding cues. If your baby is sleepy, we encourage you to bring your baby to your breast about every 3 hours.

- When you bring your baby to your breast:
  - Unwrap your baby, and put your baby skin to skin.
  - Then, hand-express a little milk at your baby's mouth.

This is a way to encourage your baby to wake up and feed. It also gives good hormone messages to your breasts, which helps with milk production. Hand expression is a helpful skill at different times through breastfeeding. It is easy to learn. Your nurses can help.

- Sometimes the natural act of breastfeeding can feel awkward. We are here to help you! Both you and your baby are learning a new skill. See the chapter "Attaching Your Baby to Your Breast" in this workbook for ways to help your baby deeply attach to your breast.
- Your nurse will check on how your baby is *latching* (how your baby's mouth takes your breast). At the beginning of the nursing shift, your nurse will ask you how feeding is going, ask you how you want to be helped, and make a plan with you to call when you are feeding.
- A deep latch and carefully detaching your baby's mouth are the secrets to preventing sore nipples and helping your baby take milk from your breast. See the chapter "Sore Nipples" in this workbook to learn more about preventing and treating sore nipples.
- Our lactation consultants will visit mothers who have had breast surgery, are having a hard time feeding, or have babies who are preterm or in the NICU or PCN. Please tell your nurse if you want to visit with a lactation consultant.

## What can I expect at home?

During your first week at home, many changes in breastfeeding will occur. For most mothers, this is when their milk fully “comes in.”

- To learn more about the next stages of breastfeeding, see the chapters “Common Concerns About Breastfeeding” and “Comfort Measures for Breast Engorgement.”
- To assess how your breastfeeding is going, see the chapter “How Is Breastfeeding Going?”
- For a list of breastfeeding resources, see the chapter “Breastfeeding Resources.”

Take time to look at these chapters while you are in the hospital. Doing so will help you remember to read those chapters if you need them later.

## Before You Go Home

Before you take your baby home, be sure you can check off each of these items:

- I can latch my baby to my breast, either by myself or with my helper.
- I know how to take care of nipple pain and what to do to lessen the pain.
- My baby’s weight loss is in the “normal” range.
- I have set up a well-baby checkup with my baby’s care provider for when my baby is 3 to 4 days old.

We are committed to giving you the help you need to meet your goals for breastfeeding! If you have any questions, please ask us.

**Now, please go back to the Table of Contents in this workbook and check the box so your nurses will know you have read this chapter.**

### Questions?

Your questions are important. If you have questions about breastfeeding, please call Lactation Services: 206.598.4628.