

- Supporting breast feeding in child care settings
 - American Association Pediatrics
 - states breast feeding is best overall but recommend it exclusively for first 6 months and continue to breast feed at least 12 months
 - world health organization recommends at least 2 yrs
 - formula can't replicate growth factors in human milk so it is not as complete of a nutritional source
 - benefits for baby:
 - human milk changes to meet needs of baby and is the easiest to digest by child
 - promotes healthy growth/development and reduces risk of obesity & diabetes in child's life
 - transmits mother's immunities to child
 - benefits for mom:
 - lower cost, less materials needed, less travel^(to store)
 - less stinky diapers dirty feeding supplies
 - can potentially reduce risk of cancer
 - media doesn't show/encourage breast feeding as the "norm" → it's the bottle
 - part of our society that doesn't really support it (out in public, social events etc.) and that it can differ across cultures within our society of "what is right" while in public or general lifestyle
 - benefits for baby in child care settings
 - reduces risk of infections & stomach problems, risk of allergic reactions & asthma, risk of SIDS, risk of childhood leukemia. (in general ↓ risks)

- breast milk is considered a food not a body fluid
 - should not be feared/scared of breast milk contaminating anything (just use formula)
 - * CDC/DHS and licensing (rule 3 for centers) are not necessarily on same page (grey area)

- CDC - handling of human milk:

- human milk is not classified of body fluid, does not need separate fridge storage, do not need to wear gloves while feeding and do not contaminate human milk by touch

- storage guidelines:

room temperature	3-4 hrs (if pumped fresh in AM)
refrigerator	5 days
freezer	3 months
deep freeze	6 months

- * have parents label name & date of pump!

- * if you thaw frozen milk (gets to room temp.) must use same day

- breast milk may have layers separate so mix together, different colors/smells okay

- containers storing breast milk can be washed w/ hot soap & water (or dishwasher) no need to sanitize (like other utensils)

- best practices:

- store milk in back of fridge or freezer & use oldest milk 1st

- all labeled w/ name of child, date of pump & date of thaw

- avoid adding warm milk to already cooled/frozen milk

- thawing: defrost in fridge, run under warm water or set in container

baby friendly hospitals
 * hospitals are starting to not give free formula samples
 more burning takes place because of ↑ chances of long-term use & sends mixed messages to families (flip side how do you support moms who choose formula)

of warm water, do not boil or microwave due to hot spots

→ after being ~~used~~ thawed, discard unused milk within 24 hrs

* often kids are used to breastmilk at same temp (from body) so parents can help transition with using bottles & feeding food at different temps.

• feeding suggestions:

→ feed w/ hunger cues hold baby close, burp well, discuss w/ family ahead of time how to handle times when baby is hungry at end of day

→ keep 1 bottle of frozen milk for emergency

→ report amount of breastmilk baby consumes / track # of wet/soiled diapers

• hunger cues

early
 head moves towards voice
 up smack
 tongue reach
 hands move randomly
 fist finds mouth

active
 rooting
 fidgeting
 ↓

late
 crying

have ready bottle by now (if not early)

* breast fed babies want slow flow nipple because they are used to working for it

• correct bottle feeding:

→ hold baby up right to feed

→ baby can't control flow or self - regulate food intake (if laid down, parallel to floor) bottle should be parallel to floor

→ use a round, slow flow nipple

→ pace feedings & let baby decide how much to eat & finish