

MOTHER \_\_\_\_\_

INFANT \_\_\_\_\_

DATE \_\_\_\_\_

HV, OV, F/U 1, 2, 3

**Maternal Assessment**

Labor	Gravida	Para	Length of labor		Time to first feeding	
Type of birth	Vaginal	Induced	Forceps	Vacuum	C/section	
General health	Healthy		Other:		C/section emergency	
Breastfed previously	Yes, successfully		Did not attempt		Yes, with problems	
Mother's ease with baby	Confident		Insecure		Insensitive	
Father's involvement	Very helpful		Willing but unsure		Indifferent	
Breasts	Symmetrical		Conical	Asymmetrical	Hypoplastic	Extra nipples
Breast size	Medium		Small		Large	Pendulous
Increase size	One cup size		2 cup sizes		3 + cup sizes	No change
Nipples at rest	Erect		Flat		Inverted	Dimpled
Nipple pinch test	Erect		Flat		Inverted	Dimpled
Surgery of breasts	None		Biopsy		Augmentation	Reduction
Elasticity	Good		Fair		Poor	
Compressibility	Good		Fair		Poor	
Let-down reflex	Tingling, burning, leaking, uterine cramps				No sensation	
Engorgement	None, milk is "in"		None, milk is "not in"		Slight	Moderate
Nipple damage	None to slight		Redness, pain		Cracks, blisters	Fissures, bleeding
Nipple shield/breast shell used	Never		When:			

**Infant's Assessment**

Infant birth weight		_____ % loss		SGA, AGA, LGA, IUGR
Weeks gestation	38-40	35-38	Less than 35	
Frequency of feedings	8-12 per 24 hours	Less than 8 per 24 hours	More than 12 per 24 hours	
Duration of feedings	15-25 minutes each breast or 25+ minutes on one breast	Less than 15 minutes	More than 25 minutes	
Pacifier used	None	Rarely	Occasionally	Frequently
Supplementation	None	Occasionally	Frequent	Exclusive
# Voids in past 24 hours	6 or more	4-6	2-4	0-2 Uric acid crystals
# stools in past 24 hours	3 or more	2	1	0
Type of stool	Breastmilk stool (yellow / curds)	Transitional (greenish, brownish)	Meconium (tarry, black)	Bloody
Jaundice - bilirubin level	Head only 3-5	Trunk 5-10	Extremities 10-12	Palms & soles >15
Head	Normal molding	Trauma from forceps/vacuum	Hematoma	Sutures misaligned

**Suck Assessment**

Tongue position	Forward over lower gum ridge	Cups nipple	Back, humped	Tongue flat
Tongue movement	Tip to back	Back to tip	Random	Uncoordinated
Strength of suck	Normal	Very strong	Weak	
Frenulum	Normal	Type 1 - 100% attached, Type 2 - 75% attached, Type 3 - 50% attached, Type 4- Posterior TT		
Palate	Normal	High	Channel	Bubble
Chin	Normal	Receding		Cleft soft palate, hard palate, lip

**Breastfeeding Assessment**

Positioning – Mother led	Breast height, rolled on side	Facing up, head turned to side	Mother leaning over baby	
Positioning – Baby led	Mother reclined, baby positioned on top of mother		Slipping out of position, needs pillow support	
Hand position	U or C, fingers back	Inappropriate U or C	Fingers covering areola	
Wide mouth for latch-on	Good	Fair	Poor	
Tongue position	Visible over gum ridge	Not visible		
Lips flanged	Yes	Upper Lip rolled under	Lower lip rolled under	Both lips rolled under
Chin touches breast	Chin only	Chin & nose	Nose only	
Mouth position on areola	Asymmetrical latch	Centered latch		
Angle of lips on areola	140° or more	120-140°	120° or less	
Strength of suck	Normal	Very strong	Weak	
Movement in temples/ears	Present	Absent		
Jaw excursion	Good	Poor		
Jaw clench	Absent	Present		
Maintains grasp of nipple	Yes	Slips off	Pulls off coughing, sputtering	
Nipple shape at end of feed	Round	Flattened, wedged	White ridge on tip	
Biting	No	Yes		
Swallow audible	Yes	No		
Suck: swallow ratio	1:1 to 1:3, change in rate with let-down		Greater than 1:4, no change in rate with let-down	
Clicking, popping, dimpling	No	Yes		

Alertness at breast	Alert, consistent sucking	Needs stimulation to keep sucking	Agitated or crying	
Test weight	AC weight	PC breast 1	PC breast 2	Total intake