| How you and your midwife can recognise that your baby is feeding well |  |  |  |  | *This assessment tool was developed for use on or around day 5. If used at other times: |
| :---: | :---: | :---: | :---: | :---: | :---: |
| What to look for/ask about | $\sqrt{ }$ | $\checkmark$ | $\checkmark$ | $\checkmark$ | Wet nappies: <br> Day 1-2 = 1-2 or more in 24 hours Day 3-4 = 3-4 or more in 24 hours, heavier Day 6 plus $=6$ or more in 24 hours, heavy |
| Your baby: has at least $8-12$ feeds in 24 hours* |  |  |  |  |  |
| is generally calm and relaxed when feeding and content after most feeds |  |  |  |  |  |
| will take deep rhythmic sucks and you will hear swallowing* |  |  |  |  | Stools/dirty nappies: <br> Day 1-2 $=1$ or more in 24 hours, meconium <br> Day $3-4=2$ (preferably more) in 24 hours changing stools |
| will generally feed for between 5 and 40 minutes and will come off the breast spontaneously |  |  |  |  |  |
| has a normal skin colour and is alert and waking for feeds |  |  |  |  |  |
| has not lost more than $10 \%$ weight |  |  |  |  |  |
|  |  |  |  |  |  |
| Your baby's nappies: <br> At least 5-6 heavy, wet nappies in 24 hours* |  |  |  |  | Sucking pattern: <br> Swallows may be less audible until milk comes in day 3-4 <br> Feed frequency: <br> Day 1 at least 3-4 feeds <br> After day 1 young babies will feed often and the pattern and number of feeds will vary from day to day. Being responsive to your baby's need to breastfeed for food, drink, comfort and security will ensure you have a good milk supply and a secure happy baby. |
| At least 2 dirty nappies in 24 hours, at least $£ 2$ coin size, yellow and runny and usually more* |  |  |  |  |  |
|  |  |  |  |  |  |
| Your breasts: |  |  |  |  |  |
| Breasts and nipples are comfortable |  |  |  |  |  |
| Nipples are the same shape at the end of the feed as the start |  |  |  |  |  |
|  |  |  |  |  |  |
| How using a dummy/nipple shields/infant formula can impact on breastfeeding |  |  |  |  |  |
|  |  |  |  |  |  |
| Date |  |  |  |  | Care plan commenced: Yes/No: |
| Midwife's initials |  |  |  |  |  |
| Midwife: if any responses not ticked: watch a full breastfeed, develop a care plan including revisiting positioning and attachment and/or refer for additional support. Consider specialist support if needed. |  |  |  |  |  |

