

Providing human milk for your baby in the Neonatal Nurseries




Pumping = feeding your baby.
When your baby cannot breastfeed, you need to tell your body what to do by pumping instead. Frequent pumping programs your breasts to produce milk for your baby.

How to obtain a full milk supply:

- 1 **Pump as soon as possible after your baby's birth.**
 - Ideally within the first 2 hours or at least by 6 hours of age.
- 2 **Use a hospital-grade, double electric breast pump (HGP)**
 - Use a HGP in the hospital and rent one at home for 2-4 weeks.
 - The HGP is the best pump to help achieve a full milk supply and most mothers find HGPs to be more comfortable.

See page 5 (proper use of pump), page 9 (where to rent)


- 3 **Buy a double breast pump kit** – Available from your nurse or McMaster Pharmacy – level 2 (open Mon-Fri – 9 am – 5 pm)
- 4 **Pump at least 8 times a day****
 - **Pump both breasts at the same time every 2-3 hours, for at least 20 minutes, day and night**
 - **For twins:** pump both breasts for 30 minutes every 2-3 hours to build a full milk supply for each baby.
 - Pumping every 2-3 hours is equal to 8-12 meals a day for your baby which, is how often a baby feeds. See sample pumping schedules on page 7
- 5 **Hand express before and/or after each time you pump** for the first 2 days, on each breast for 2 minutes. After 2 days, you can stop hand expression. Collect drops for oral immune therapy (OIT) (page 15)
- 6 **Use your hands while pumping**
 - Breast massage and compression during pumping can increase your milk supply. This is easier if you pump hands-free (pages 12-13)

****It is normal to only get a few drops of colostrum in the first few days. Some mothers will get small amounts in the first 1 or 2 pumps, but then not get anything for 2 days.**

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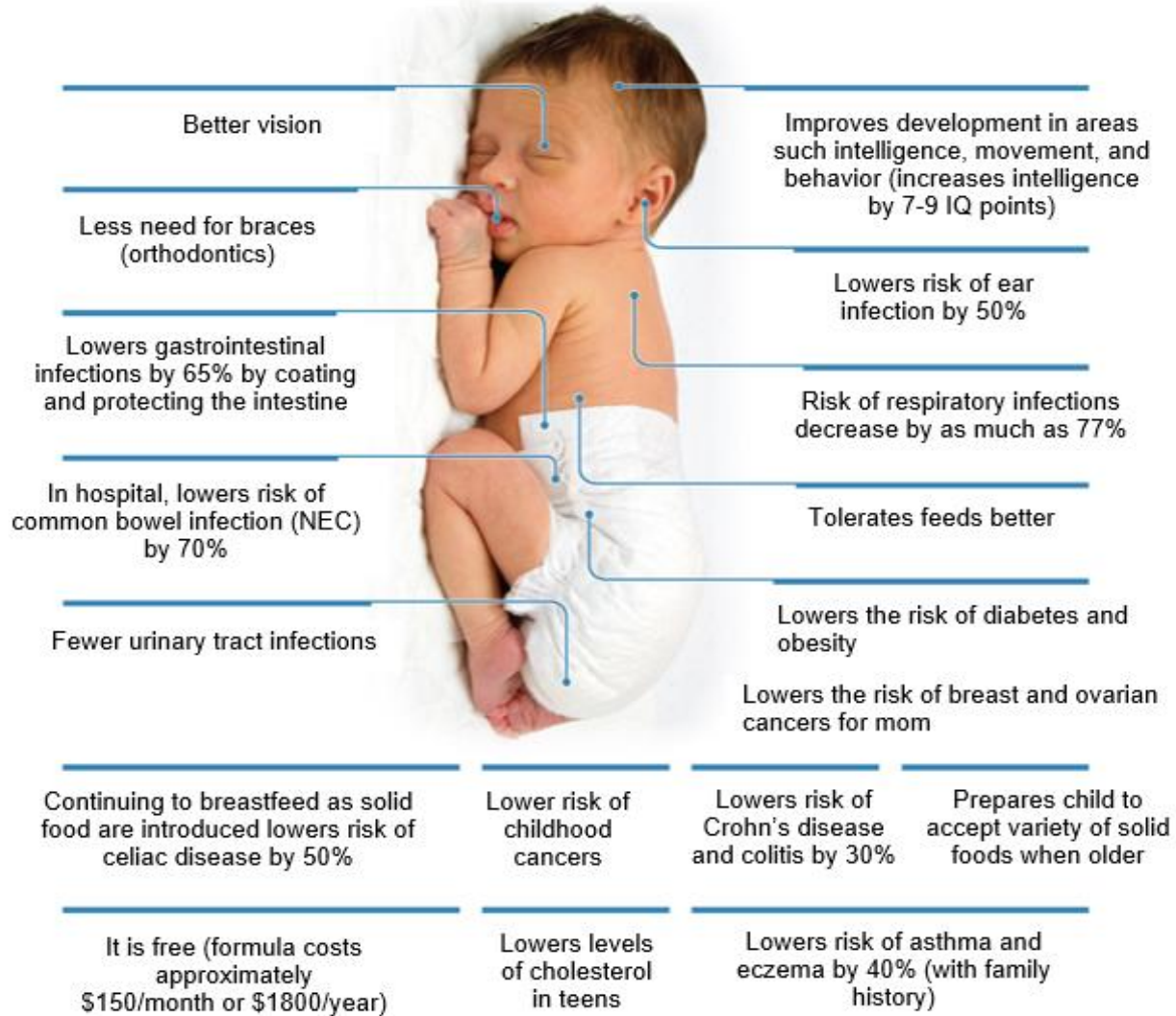
The Benefits of Human Milk/Breastfeeding

Breastfeeding is the normal way to feed babies. Here are the benefits of breastfeeding, when compared to formula feeding

Exclusive breastfeeding for the first 6 months can lower the risk for sudden infant death syndrome by 50%

Better bonding (decreased rates of postpartum depression, abuse, neglect)

Fewer doctor visits and hospital stays



Health Canada's Statement on Breastfeeding:

Breastfeeding is the normal and unequalled method of feeding infants.

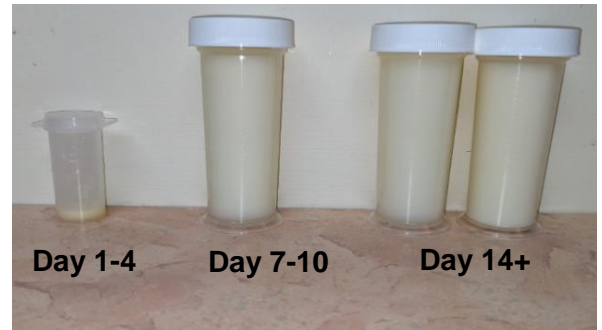
Health Canada recommends exclusive breastfeeding for the first 6 months, and continued breastfeeding for up to 2 years or longer (along with other foods).



Pumping Goals



DID YOU KNOW?

95% of mothers will establish a full milk supply **if** they pump every 2-3 hours day and night with a rented hospital grade pump **(At least 8 times a day)**



<h3>Stimulate</h3>	<p>The goal in the first few days is to <u>stimulate</u> future milk supply.</p> <ul style="list-style-type: none"> Your early milk is called colostrum. It is very different from mature milk. Colostrum is thick. It can be clear to deep yellow in colour. Even if you are only getting drops of colostrum, it is important to keep pumping every 2-3 hours, as this creates your future milk supply. 
<h3>Build</h3>	<p>The goal once your milk supply starts to come in is to <u>build</u> a full milk supply.</p> <ul style="list-style-type: none"> Starting from day 3 to 4, your milk will gradually become whiter in colour and increase in volume. The drops will steadily increase to 60 ml every 3 hours by the end of the first week (500ml per day) These volumes will increase to 100-120 mls every 3 hours by 4-6 weeks (800-1000ml per day). Goals: 8 full containers per day by 7-10 days and 16 full containers per day by 4-6 weeks. It is helpful if you keep track of your milk volumes either on paper or by using a free app. 
<h3>Maintain</h3>	<p>The goal once you have achieved a full milk supply, is to <u>maintain</u> it until breastfeeding is established.</p> <ul style="list-style-type: none"> Keep pumping every 2-3 hours to maintain your full volume, and contact your Lactation Consultant (LC) to individualize your pumping plan. They will help you optimize rest and sleep while maintaining your milk volume. Contact your LC if you are finding it difficult to maintain your milk volume.

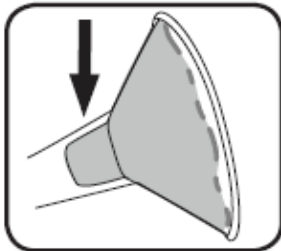
How do I use the Ameda breast pump in hospital?

Before using the pump:

- Wipe down pump with Oxivir wipe if using a shared pump and wash your hands before each pumping session.

If you are uncertain about the flange fit or how to work the pump, contact a Lactation Consultant for a pumping assessment.

Your nipple, plus about 3 to 4 mm of your areola (the dark tissue around your nipple), should move forward and back in the tunnel.



GOOD FIT

During pumping, your nipple moves freely in the breast flange tunnel. You see space around the nipple. Not much areola is drawn into the tunnel with the nipple.



TOO SMALL

During pumping, some or all of your nipple rubs against the sides of the breast flange tunnel.

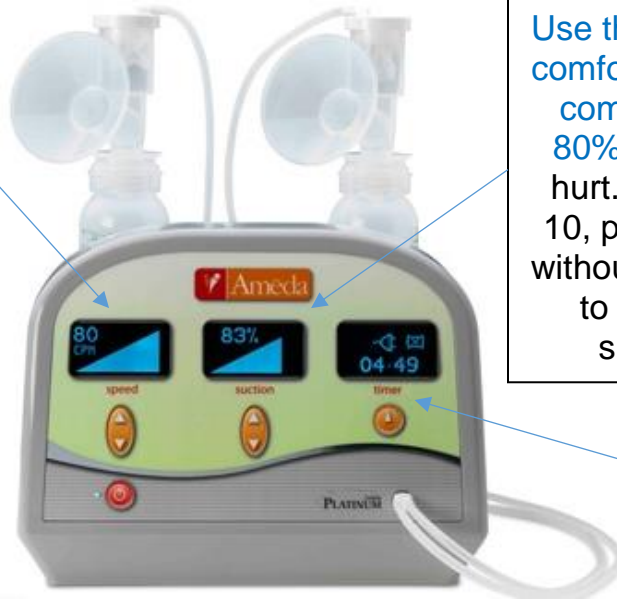


TOO LARGE

During pumping, more areola is drawn into the breast flange with your nipple. Your areola may rub against the side of the breast flange tunnel.

Speed starts at 80 cpm (cycles per minute). At 2 minutes, decrease speed to 60cpm for remainder of pumping session.

This mimics how a baby sucks at the breast. The first 2 minutes the baby sucks fast to stimulate the letdown reflex (milk release) and when milk is flowing they drink at a rate of about 60 sucks per minute. Pumping for 20+ minutes both sides every 2-3 hours would be a similar duration of an effective breastfeed.



Use the most **suction** that is comfortable. Most moms are comfortable between 30-80%. Pumping should not hurt. On a pain scale of 0-10, pumping can rate a 2-3 without causing any damage to your nipples. Adjust suction accordingly.

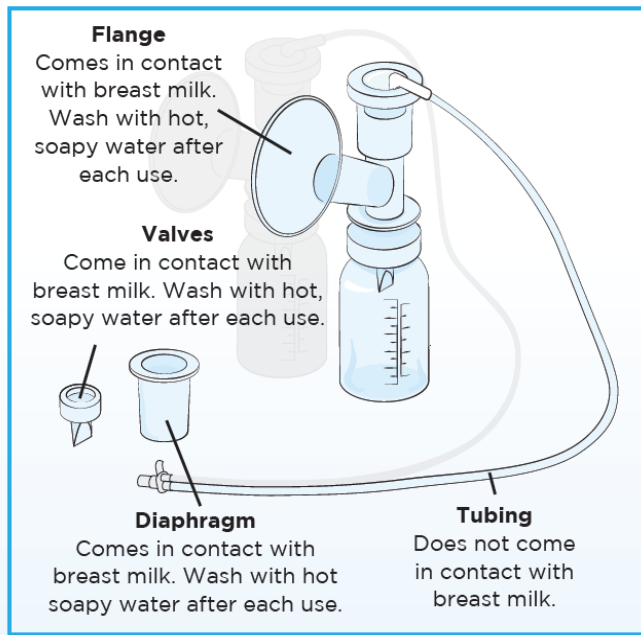
Tip: You can pump for longer or more often to increase your supply further.



To know when your next pumping session should start, count from when you begin your pumping session, not when you finish.

How do I clean the breast pump kit in hospital?

The pump kit cleaning area is located behind the **red elevators** near the windows or in the level 2 nursery. The cleaning basin can be stored in the bottom drawer of your baby's bedside or on top of fridge.



1. After each use, place dirty breast pump parts in basin after pumping to be cleaned.
2. Wipe down pump kit cleaning area with sanitizing wipes before and after use. Wash and dry hands.
3. Fold the "Zip Lock" top outward so that the bag stands upright on the counter (like a bowl).
4. Place breast pump tubing and white caps in the bag (caps and tubing do not need to be washed; moisture will damage inside of tubing).



5. Add dish soap of your choice to warm water in basin

6. Wash breast pump kit in warm soapy water. Ensure all individual pieces are cleaned.

7. Use lint free wipes, individually dry pump parts and place into bag



8. Dispose of soapy water down the sink. Rinse basin and dry it.

9. Seal the bag until you are ready to pump again.

How do I clean the breast pump kit at home?

- Separate your pump kit cleaning from other cleaning (such as kitchen dishes). Use a designated basin for your pump parts and clean with warm soapy water and rinse well.
- Dry your pump kit parts with paper towel, a clean dishcloth or use a drying rack (e.g. baby bottle drying racks)
- Once the pump kit is cleaned make sure it is placed in a clean sealed container (or zip lock bag provided by NICU).



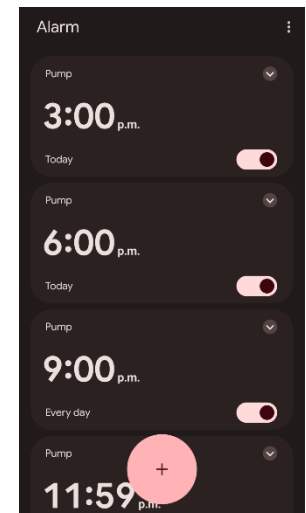
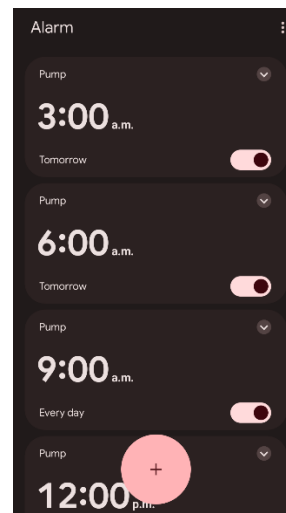
DID YOU KNOW?

Breasts and human milk are not sterile, however, your milk needs to be collected and stored in sterile containers (provided for **free** in the NICU). **Do not** sterilize your pump kit parts, this may cause damage.

Where can I pump in the NICU?

- You can pump in a few locations: your baby's bedside, in the pumping room located in the Level 2 Nursery or in a multipurpose room, located in the NICU hallway. Privacy signs are available. You can use your own pump or our hospital grade pumps provided in these spaces. If using a hospital pump that is being shared between mothers; wipe down pump prior to use with Oxivir wipes.
- It is helpful to track your milk volumes on a free pumping app or paper (ask your Lactation Consultant for the paper tracker!)
- **Remember to bring your pump kit, including tubing, to the hospital daily.**

Sample pumping schedules	
8 times a day (every 3 hours)	10 times a day (every 2 hours during the day and every 4 hours at night, <u>if recommended by LC</u>)
6 am	6 am
9 am	8 am
12 noon	10 am
3 pm	12 noon
6 pm	2 pm
9 pm	4 pm
12 midnight	6 pm
3 am	8 pm
	10 pm
	2 am



HELPFUL TIPS

Set your cell phone alarm to match the sample pumping schedule which mimics your baby's feeding cues. In the first few months, babies feed 8-10 times per day, including when discharged from hospital. To provide 8 meals for your baby, pump 8+ times per day.

How do I collect my milk?

- It is important to wash your hands with soap and water and/or use hand sanitizer before expressing and handling your milk
- Milk must be collected in sterile containers. These are provided free by the hospital and are located behind the main reception desk in brown paper bags. Each day, take home enough containers for your pumping needs
- Only fill each container 2/3rd full (or 50 mL). This leaves room for the milk to expand if frozen. Do not add fresh milk to a container that was collected earlier (use a new container every time you pump)
- Ask your baby's nurse or the business clerk for labels with your baby's identification and put one on each container. Double check that you are using your baby's label
- Label each container of human milk with the date, time, and volume



**DID YOU
KNOW?**

**The sterile milk
storage containers
screw right onto
your pump kit!**



EBM00012Y

Date milk pumped

Thomas, Oliver (MA123456/21)

Volume pumped

Time milk pumped

Storage times

Room temperature	4 hours*
Fridge	Fresh milk: 3 days Thawed milk: 24 hours
Fridge with separate freezer door	6 months
Deep or chest freezer	12 months

* Ideally, refrigerate breastmilk promptly after pumping for optimal nutrients. It is safe at room temperature for up to 4 hours.



While your baby remains in hospital please use storage times above, once your baby has been discharged home, you may use storage guidelines as per Public Health.

How do I transport my milk from home to hospital?

- Put the containers of milk in a plastic bag. This will keep the labels dry.
- Put the plastic bag in an insulated bag or cooler.
- Surround the containers with enough ice or ice packs to keep liquid milk as cold as in a fridge. Use more ice to keep frozen milk from thawing.
- If visiting daily, there is no need to freeze your milk, bring it in fresh.
- Can't come for a few days? Freeze the milk and bring the milk to the hospital frozen and let your nurse know if you have brought in frozen milk so it can be placed in the freezer ASAP.

Where can I rent a breast pump and what is the cost?

- Being separated from your baby, you will need to pump to establish and maintain your milk supply. In most instances renting a hospital grade pump is recommended. See chart on the next page to determine if you should rent
- **Cost to rent:** ~ \$100**/month (credit card and ID required)
- **Find an Ameda Pump rental location near you**, call 1-800-604-6225, visit www.motherschoiceproducts.com or scan QR code
- Enter your postal code and find a location near you
- McMaster Pharmacy: Mon-Fri 9-5pm, Level 2
- Shoppers Drug Mart: across the street from McMaster also rents Medela hospital grade pumps
- New Mummy Company*: ~ \$100** a month with free delivery within 24 hours (Ameda & Medela options available)



Renting a hospital grade pump may be challenging on a weekend, if you know this will be the case, ensure you rent a pump before the weekend.

What kind of pump should I use at home?

Being separated from your baby, you will need to pump to establish and maintain your milk supply.

Use a Hospital Grade Pump (HGP)

- Pump as soon as possible, ideally within 6 hours of birth
- Hand expression alone will not lead to a full milk supply
- Buy a double pump kit (from your nurse or from pharmacy)
- Have your nurse teach you how to pump (see page 5)



Continue to use the HGP every 2-3 hours for 20 minutes

What kind of breast pump should I use when I go home?

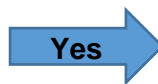
Do you have any of the following risk factors?

First baby	Long labor	Anxiety/depression	History of infertility
C-Section	Delayed Pumping >24hrs	Stress	Thyroid/pituitary disorders
High Blood pressure	Delivery <37 weeks	Substance abuse	Breast surgery/injuries
Age over 30 years	Diabetes	Smoking	PCOS
Obesity	Previous low supply	Severe blood loss	



Rent a Hospital Grade Pump (HGP)

Use for at least 2 weeks or **until full milk supply established (>800mls/day, ideally 1000mls/day)**



Double Electric Home Pump

If switching over from rented HGP, make sure you maintain your supply and that it is comfortable. If not, continue to rent.

Are you on OW/ODSP?

- Talk to your NICU Social Worker or LC, as you may qualify for a breast pump.

Do you have health benefits through your employer?

- Check with your benefit provider to determine if you have coverage towards a pump (if you require a prescription for the pump contact your baby's doctor).

Still having difficulty finding a pump?

- Please contact a Lactation Consultant or NICU Social Worker.

Breast Pump Comparison

Hospital grade pump (HGP)

- Clinically proven to be **most effective** for establishing and maintaining milk production for preterm and full term infants
- The best option for moms initiating lactation or increasing production
- Ideal choice for all NICU pumping mothers (specifically those of multiples, preterm infants and sick babies)



Double Electric Home Pump

- Best for an established full milk supply (800-1000 ml/day or after using a HGP for 2-4 weeks), to maintain your supply until your baby is discharged home and/or fully orally feeding
- Home bought pumps do not provide enough speed and/or suction to establish a milk supply; however, if this is your only option you should pump for an additional 10 minutes with each pumping session (eg. 30 minutes for a singleton)

Single and manual breast pump

- These pumps are not recommended for use while baby is in NICU/L2N as they will result in a low milk supply

NICU Mom Favorite breast pump

Medela Freestyle Flex Wearable (\$350 - \$450)



- Does not need to be plugged into an outlet (lithium ion battery)
- Portable - best pump for mobility at home, pumping in the car, at the bedside etc.
- The **wearable** version is preferred by mothers as it is more discrete and convenient and fits into any bra



DID YOU KNOW?

Formula costs around \$200/month (\$2000+ per year for one baby)
Remember: Human milk is free with many more benefits for baby and Mom!

Highlights on page 3



HELPFUL TIPS

Purchasing a new pump comes with a warranty. Keep the receipt in case of any issues.

US bought pumps have no warranty in Canada



IMPORTANT MESSAGE

Home pumps should only be used once your milk supply is full; consider renting a HGP until you achieve a full supply.

Relaxing to get more milk

Relaxing while pumping can help increase your milk supply and allow milk to start flowing sooner (stress and pain may decrease supply and delay flow).

Some suggestions are:

- ✓ **Breathe** deeply and slowly (try 5 deep breaths in and out at beginning of pumping session)
- ✓ **Think** about your milk flowing to your baby
- ✓ **Look** at baby's picture/videos or any media that is enjoyable
- ✓ **Listen** to relaxing music or podcasts
- ✓ Try pumping in an **environment** that promotes relaxation (e.g. hospital pumping room or baby's bedside/away from baby – whatever is less stressful)
- ✓ Use **warmth** such as warm wash clothes, a heating pad or warmed gel packs prior to or during pumping
- ✓ **Reduce Stress** when possible by delegating tasks to others (such as household responsibilities, cleaning pump parts, meal prep etc.) as well as asking for help and support from family and friends
- ✓ **Manage Pain** as prescribed by doctor for example by taking acetaminophen (Tylenol) and ibuprofen (Advil)



Try pumping hands-free so you can relax, rest your arms or use your hands to massage your breasts, eat, drink, read or text.

1. Alter sports bra; cut 2-inch slits over the nipple areas. Slide each flange of the pump kit through the slits, so that they fit over your nipples and are held on by the bra.
2. Another option is buying a pumping bra from the McMaster Pharmacy, store or online*.

Helpful tip!



E.g. Pumping bra
(~\$30-50)



E.g. nursing / pumping combination bra
(~\$25 "Momcozy")



E.g. Altered sports bra
(~\$10-\$20)

What to do if your nipples are sore

- Consider decreasing pump suction
- Rub drops of milk onto each nipple/areola and let dry
- If nipples are still tender, consider using Lanolin cream
- Apply a pea-sized amount of lanolin to each nipple after pumping. You do not need to wipe this off before the next pump if you cannot see it
- If the problem continues, call a LC for an appointment to assess nipples, pumping, flange size and suction



DID YOU KNOW?

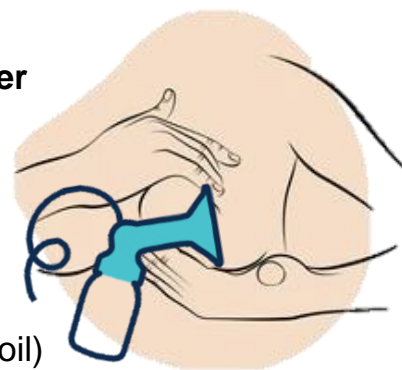
Only normal daily hygiene is recommended for breast and nipple care. Excessive cleaning of breasts/nipples may dry them out, cause soreness and/or cracking.

What should I do if my breasts get full and uncomfortable?

- As the amount of human milk increases (and your milk 'comes in', usually between day 2-5), your breasts may become full. The full feeling (if properly managed) should go away in a few days to one week.
- If your breasts become very full, firm and uncomfortable at any time during lactation, this is called **engorgement**.
- Most often engorgement is caused by not fully emptying your breasts or infrequent pumping (i.e. sleeping through pumps, missing pumps etc.)
- While your breasts are engorged you may not be able to express milk easily from them. You need to soften them to help the milk to flow (see treatment below)

Treatment for engorgement and plugged ducts

- **Pump a minimum of every 2-3 hours, at least 8-10 times per day**
- Pump **hands free and massage** throughout your pumping session for best results (or if your arms are tired try massaging for e.g. 5 mins on and 5 mins off)
- Firm **massage and compression during pumping** or breastfeeding helps get rid of lumps; use edible oil (e.g. Olive oil) or nontoxic lubricant on the fingers or have a partner help (if available)
- **Ensure your breasts are always soft after pumping**; your breasts should not feel full or have lumps at the end of your pumping session; if they do, continue to pump until soft (may need to pump longer than 20 minutes)

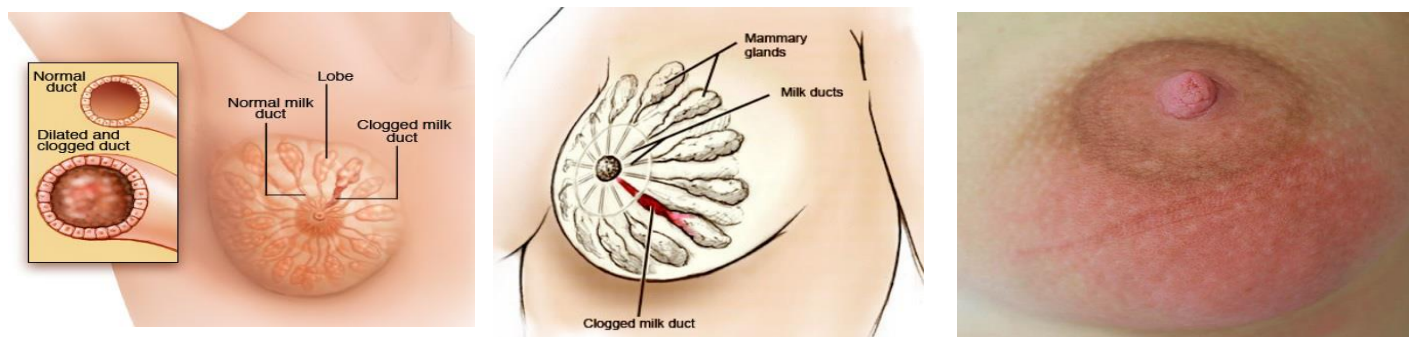


Additional management for engorgement and plugged ducts

- **Using warmth:** warm washcloths, heating pad, heated gel packs, shower. Not too hot to burn the skin. Apply before or during pumping
- **Cold** washcloths, gel packs, cabbage leaves or intermittent ice can decrease breast soreness
- It is safe to take ibuprofen/acetaminophen such as Advil, Motrin or Tylenol, for **pain relief** or **discomfort**.
- **Avoid wearing tight bras** or underwire bras that cause constriction

What should I do if my breast hurts and I feel sick?

- See treatment of engorgement and plugged ducts – page 13
- If your breast hurts and you feel sick, you **may** have a breast infection called **mastitis**, which needs treatment
- Call your health care provider right away if your breast hurts (you may go to L&D up to 6 weeks after delivery or your family doctor, urgent care etc.):
 - Have chills or a fever
 - See red streaks or the skin on your breast changes color
 - Feel as if you have the flu
- If you are given antibiotic medication, take the medication until they are all gone, even if you start to feel better after a day or two
- Continue to pump or breastfeed your baby at least 8 or more times a day to keep your breasts well drained. **It is safe** to pump and give your baby this milk from the sore breast
- If you feel sick, it may help to rest in bed, drink plenty of fluids and ensure you maintain your pumping schedule (consider visiting less, so you can rest and pump adequately until your symptoms improve)



Contact a LC if you cannot soften your breasts within 24 hours as this will lead to a decreased milk supply

Oral Immune Therapy (OIT)

- OIT is giving your baby drops of fresh colostrum/human milk direct into the mouth

What is the benefit of giving OIT?



- Provides baby with immune protection
- Ongoing development of taste
- Improved oral hygiene

When should my baby get OIT?

- As soon as possible after birth and with every handle time (4-8 times a day)
- All baby's that are not orally feeding will receive OIT. As feeding progresses babies can continue to get OIT

How do I collect milk for OIT?

- In the first few days: hand express for at least 2 minutes on each breast before and or after pumping and store the small volume in a syringe or sterile storage container



- Once your milk supply increases: continue to store 1-3ml of freshly pumped human milk in small storage containers and place in fridge labelled OIT with the date and time you pumped it. OIT can be stored in the bedside fridge for 72 hours.



Note: you do not need to hand express once your milk comes in.

How do I give my baby OIT?

- When baby is awake during care, you or your baby's nurse can give OIT
- Check that the milk is labelled with your baby's name and that it is not expired before giving (have a nurse double check)
- Draw up 0.05 mls of OIT, place in between your baby's cheek and gums, and have baby suck on a soother

What should I eat and drink?

Healthy eating is good for your body especially when you are breastfeeding. While you are breastfeeding you may feel more hungry and thirsty.

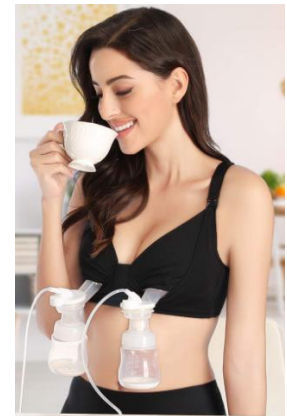
- Canada's Food Guide – Eat Well. Live well. Gives you advise on how to choose foods (scan QR code for more information).
- Canada's food guide gives a variety of healthy foods. Follow the guidelines for breastfeeding mothers.
- **Note:** Studies show that mothers who eat more protein have a larger milk supply and that mothers who eat a diet higher in carbohydrates may have less milk (due to insulin resistance).
- It is recommended to take a multivitamin daily



Caffeine

Caffeine is found in drinks such as coffee, iced and hot tea and cola. Foods like chocolate that are made from cocoa contain caffeine too. Caffeine is also found in some medications for colds or headaches

- Caffeine passes into human milk up to 3 cups per day is considered safe



Alcohol and Drugs

- Alcohol passes into human milk, so it is best not to drink any alcohol such as wine, beer or liquor while you are breastfeeding.
- An occasional drink can be okay, as long as **you plan for it**. Breastfeed (or express your milk) *before* you have a drink, then wait at least **three** hours per drink before breastfeeding/expressing again.
- For more information, refer to QR code and Health Canada recommendations



Smoking/Nicotine/E-cigarettes

- You don't have to stop breastfeeding if you smoke. Breastfeeding may help to lessen some of the negative effects that smoking may have on your baby.
- Even if you smoke or use e-cigarettes (vape nicotine), it is still very important to breastfeed, so look for ways to decrease your baby's exposure to harmful chemicals.
- For more information, refer to QR code and Health Canada recommendations



Marijuana

- There is increasing evidence that cannabis is harmful to early brain development especially if used before 25 years of age
- Further studies are required to determine the full impact of early cannabis use on long-term outcomes, and its association with academic and employment success
- There is no known safe level of cannabis consumption during pregnancy or while breastfeeding/pumping human milk
- Providing human milk is still the healthiest choice for your baby
 - Until further information about the potential harms are available, it is recommended that women stop using cannabis while they are pregnant or while providing human milk
- Exposure to cannabis during pregnancy and while providing human milk, may cause a child to have difficulties with learning, behavior and mental health in later life
- If you are unable to stop using cannabis completely, try using less and less, or speak to your family doctor to discuss alternatives



Is there anything I can take to increase my milk supply?

There is nothing you can consume that is more important than frequent and optimal pumping. If you are not at your pumping goals by the end of the first month of life (800-1000ml in 24 hours), below are a couple of additional considerations

- You may want to have a conversation with your family doctor about a medication called Domperidone to see if it is right for you. This can usually be done over the phone.
 - Prescriptions can be sent to McMaster Pharmacy
 - Open Monday-Friday from 9am-5pm
 - McMaster Drugstore: 905-521-5019
 - Fax: 905-521-4984
- Herbs have not been proven to increase human milk. However, some breastfeeding experts recommend herbs and some mothers find them helpful. Commonly used herbs are Fenugreek, Blessed Thistle and Moringa
- It is recommended that you discuss herb use with your family doctor or pharmacist.

Keeping track of how much human milk you are making

Sample pumping schedules

8 times a day (every 3 hours)	10 times a day (every 2 hours during the day and every 4 hours at night, <u>if recommended by LC</u>)
6 am	6 am
9 am	8 am
12 noon	10 am
3 pm	12 noon
6 pm	2 pm
9 pm	4 pm
12 midnight	6 pm
3 am	8 pm
	10 pm
	2 am

Record your milk volumes after pumping, or you can use a free app.

Day 1 - Goal 0-5ml/day

1	Time	Amount
2		
3		
4		
5		
6		
7		
8		
9		
10		
Total		

Day 2 - Goal 0-5ml/day

	Time	Amount
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
Total		

Day 3 - Goal 0-5ml/day

	Time	Amount
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
Total		

Day 4. Date: _____

	Time	Amount
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
Total		

Day 5. Date: _____

	Time	Amount
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
Total		

Day 6. Date: _____

	Time	Amount
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
Total		

Day 7. Date: _____

	Time	Amount
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
Total		

Goal at Day 7: ✓Pumping at least 8 times a day. ✓Getting 60 ml each time you pump (one full container) and over 500 ml each day. Double this for twins. **Call your Lactation Consultant (LC) with your milk volume.**

Day 8. Date: _____

	Time	Amount
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
	Total	

Day 9. Date: _____

	Time	Amount
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
	Total	

Day 10. Date: _____

	Time	Amount
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
	Total	

Day 11. Date: _____

	Time	Amount
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
	Total	

Day 12. Date: _____

	Time	Amount
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
	Total	

Day 13. Date: _____

	Time	Amount
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
	Total	

Day 14. Date: _____

	Time	Amount
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
	Total	

Every drop of milk you make is valuable!

Your milk protects your baby from infections and improves their development. Keep up the great work!

Goal at Day 14: A full milk supply!

- ✓ Pumping at least 8 times a day
 - ✓ Getting 100 ml each time you pump (one and a half containers) and over 800 ml each day. Double this for twins.
- Call your LC with your milk volumes.**

Call a Lactation Consultant at 905-521-2100, ext. 72774 or 72776 with your milk volumes on day 7 and 14 of pumping, and weekly after that. We will help you reach your goals!