

# Baby Feeding Cues (signs)



## EARLY CUES - "I'm hungry"



• Stirring



• Mouth opening



• Turning head  
• Seeking/rooting

## MID CUES - "I'm really hungry"



• Stretching



• Increasing physical movement



• Hand to mouth

## LATE CUES - "Calm me, then feed me"



• Crying



• Agitated body movements



• Colour turning red

## Time to calm crying baby

- Cuddling
- Skin to Skin on chest
- Talking
- Stroking



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# Canterbury

District Health Board

Te Poari Hauora o Waitaha

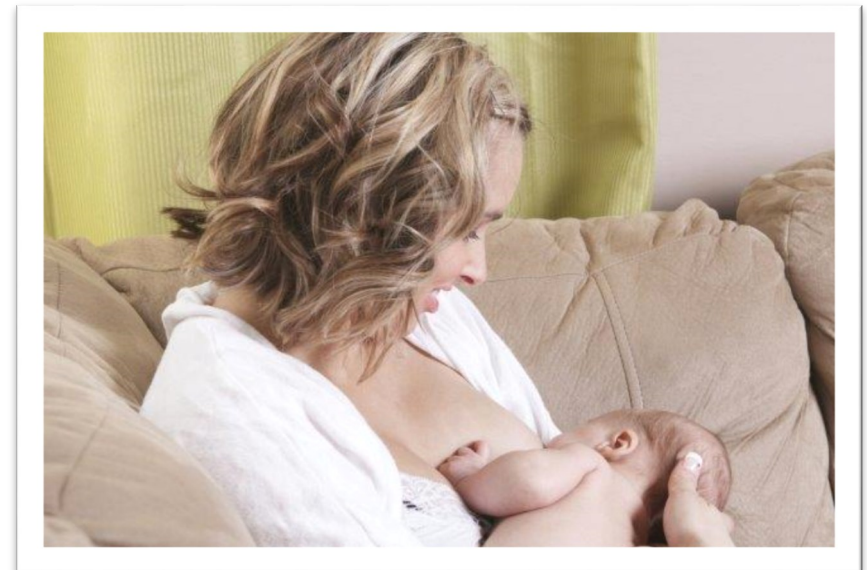
Christchurch Women's Hospital



Neonatal Services

## Breastfeeding your premature baby at home

Parent / Caregiver Information



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## At Home

Caring for and learning to breastfeed your preterm baby can be an emotional journey and now you are home you will need ongoing support. In addition to support from family and friends, the Neonatal Outreach nurse and/or your midwife, there are a number of resources in the community which you may find helpful. Please refer to **Canterbury Breastfeeding Network** website for updated support services information and breastfeeding news ([canbreastfeed.co.nz](http://canbreastfeed.co.nz))

Once home, you and your baby will continue to build on existing feeding skills. It is important to continue to pay close attention to your baby's hunger cues and offer the breast in response to these cues.



All babies are different. Below are general guidelines to assist you to successfully breastfeed your small baby.

- Be generous by allowing your baby to feed at any time unlike the 3 or 4 hourly schedule in the hospital
- Feed baby in response to early hunger cues **or** not less than 8 times in 24 hours
- Wake baby to achieve this number if necessary
- Baby may want or need to feed from 1½ to 3 hourly. This is normal and should be encouraged
- Avoid sleeps of longer than 5 hours until baby has matured and become a thriving breastfeeding expert
- Watch for baby's bursts of rhythmic sucks **and** swallows – not the clock – to ensure adequate intake

- Apply breast compressions to encourage more swallows, particularly if baby is sleepy at the breast
- Continue to express both breasts after every daytime feed
- Your baby may need this expressed breast milk for a supplementary feed ('a top up'). The outreach nurse or your midwife will guide you on this



When baby needs no further top-ups, based on two consecutive weight gains within seven days, reduce expressing as follows:

1. Three times a day for two days
2. Twice a day for two days
3. Once a day for two days

Stop expressing on the 7<sup>th</sup> day **but** return to expressing if baby can't maintain your milk production and adequate growth.



See your health professional if you become concerned about your baby's wellbeing at any time or if baby is:

- Not feeding as well as or better than when discharged from hospital
- Swallowing infrequently
- Having decreased wet and / or dirty nappies
- Causing nipple pain or damage or if your breasts remain uncomfortably full after feeding

Please also refer to the back cover page of The Well Child Tamariki Ora my health book that outlines symptoms of an unwell baby requiring urgent medical help.