



CLINICAL PRACTICE GUIDELINE

Breastfeeding: Discharge home

This document should be read in conjunction with this [Disclaimer](#)

BFHI step 10 – foster the establishment of breastfeeding support groups and refer mothers to them on discharge

Key points

1. Any baby unable to attach, fully breastfeed or has weight loss > 10% shall be reviewed by the paediatrician prior to discharge and have follow up with the Visiting Midwifery Service, at the Breastfeeding Centre or with their Child Health Nurse or Community Nurse
2. Any baby with breastfeeding problems prior to discharge should be referred to the Visiting Midwifery Service even if older than 5 days.
3. **Prior to going home ensure the mother:**
 - recognises her baby's feeding cues
 - has been shown how to position and attach her baby at the breast correctly. Those women whose baby is not able to effectively attach and feed, or who have damaged nipples will need electric breast pump loan arranged and a written breastfeeding plan to take home.
 - Provide education on finger feeding or paced bottle feeding if required and
 - Follow up with the Visiting Midwifery Service and at the Breastfeeding Centre.
 - has been shown how to hand express her milk (see [Expressing guideline](#)) and has written information in the form of [Pregnancy Birth and Your Baby](#) book. If the mother has not previously received a copy, provide the relevant information. Women can be shown how to access the booklet from the KEMH website.
 - understands the concepts of letdown reflex, baby led feeding, demand/supply and breastfeeding
 - understands that the baby should feed at least 8-12 times in 24 hours, including night-time
 - recognises effective nutritive sucking pattern of breastfed baby
 - recognises signs of adequate hydration of fully breast fed babies. For the first 1-2 days the baby only has 1-3 wet nappies per 24 hours and should pass several meconium stools.
 - is aware of settling techniques for her baby

4. **Once the baby is receiving mature milk the mother should know to expect:**

- 6-8 wet cloth nappies (or 5 disposable nappies)
- clear or pale urine
- soft, yellow bowel actions, 2-3 per day in the first 4-6 weeks.
- bright eyes that are alert and clear
- good skin tone
- a period of wakeful contentment during the day

5. **Community Support**

Mother should be made aware of breastfeeding community supports:

Breastfeeding Centre WA KEMH counselling and appointment service Mon-Fri 8.00am – 4.30pm www.kemh.health.wa.gov.au/services/breastfeeding	(08) 6458 1844
Child Health Nurse / Community Nurse	
General Practitioner	
Health Direct 24 hour medical advice line	1800 022 222
Ngala Family Resource Centre Parenting help – 7 days 8.30 am to 9.00pm	(08) 9368 9368 ngala@ngala.com.au au
Private Lactation Consultant	
Australian Breastfeeding Association (ABA) www.breastfeeding.asn.au Counselling service – 7 days a week	1800 686 268

Reference

1. Baby Friendly Health Initiative Australia. Handbook for Maternity Services. Australian College of Midwives. 2016.

Related WNHS policies, procedures and guidelines

WNHS Breastfeeding Policy

KEMH Clinical Guidelines: O&G: Newborn Feeding

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