

PARENTING, FEEDING, AND BACK TO WORK INFO

Websites, videos, and more to help you reach your feeding goals.

HealthVermont.gov/Breastfeeding – Infant feeding information from the Vermont Department of Health. Tips for new parents to succeed and return to work/school, local resources

BabyGooRoo.com – Advice & [videos](#) on feeding and child nutrition

BiologicalNurturing.com – Video and information about laid-back feeding positions to help babies self-attach, ([information](#) * in French)

BreastmilkCounts.com – Breastfeeding 101, self-care, working parents’ tips and more from Texas WIC

CDC.gov/Breastfeeding & [Recommendations](#) – Benefits, what to expect, special circumstances, and directions for storage and preparation of expressed milk

[Getting to Know Your Baby](#) – YouTube video from California WIC with Dr. Jane Heinig talking to parents about baby cues, sleep, and crying

FirstDroplets.com & [Stanford Medicine](#) – Information and videos on feeding in the first hour, latching baby, hand expression, hands-on pumping, and increasing milk supply from Jane Morton, MD

GlobalHealthMedia.org – Step-by-step videos in multiple languages

HealthyChildren.org – American Academy of Pediatrics gives short articles about feeding your baby and has information on many topics

IBOnline.ca – Handouts and [videos](#) in multiple languages from Dr. Jack Newman’s clinic, the International Breastfeeding Centre

LLL.org – Lactation information and support from La Leche League International, topics from A–Z, online support

[Lacted.org/IABLE- Video](https://Lacted.org/IABLE-Video) & [Handouts](#) * – Videos on paced bottle-feeding, latch/sandwich hold, fitting pump flanges, & more

PhysicianGuideToBreastfeeding.org – Guidance from Katrina Mitchell, MD, IBCLC, PMH-C, breast surgeon and breastfeeding medicine specialist

[USBC Breastfeeding and Human Milk Resource Guide for Parents](#) – Website links with information to support you on your journey

WICBreastfeeding.FNS.USDA.gov – Information and support for all stages of the infant feeding journey

WomensHealth.gov/Breastfeeding – National Women’s Health Information Center covers top questions about infant feeding

* Spanish or multiple languages

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LOCAL BREASTFEEDING RESOURCES

Please call anyone on this list for advice, help or support!

In- home lactation consults may be covered by Medicaid or private insurance. Not on WIC? Apply online at HealthVermont.gov/ApplyToWIC

[WIC \(Rutland Office\) – Vermont Department of Health](#)

802-786-5811; WIC breastfeeding peer counselors on staff, support, breastfeeding and nutrition information, monthly food benefit, and pumps for breastfeeding/chestfeeding parents. Referrals to lactation consultants for in-home/virtual consults.

Call your WIC breastfeeding peer counselor. We are there for you!

[Rutland Regional Medical Center](#)

[Rutland Women’s Healthcare](#), 802-775-1901; register for Breastfeeding class, 2nd Tuesday each month.

[La Leche League](#)

Breastfeeding/chestfeeding support for pregnant and nursing parents; Accredited leaders. Contact Sarah at LLLofRutlandVT@aol.com or visit Facebook.com/LLLofRutlandVT.

Natural Beginnings – Vicki Kirby, RN, IBCLC

802-236-4136; NaturalKirby@gmail.com; Provider for VT Medicaid and BCBS. In-home and virtual lactation consults in Addison and Rutland Counties.

[Promise Lactation Consulting – Lisa Kerns, IBCLC](#)

802-236-7946; In home & virtual lactation consults by appointment.

[Strong Families Vermont – Nurse Home Visits](#)

Short-term visits to support your breast/chestfeeding goal or ongoing home visiting program supporting your pregnancy, lactation, and parenting journey.

- [Children’s Integrated Services](#): 802-770-1621
- [VNA & Hospice of the Southwest Region](#): 802-775-0568
- **Strong Families Vermont**: 802-770-1585

PUMPS & SUPPLIES

Insurance coverage may vary. Medicaid provides pumps for pregnant members with a prescription from a medical provider, 60 days before due date and up to 120 days after baby’s birth. Pumps also available from WIC.

Lactation Resources of Vermont

802-878-6181; LactationResourcesVT.com; In-person or virtual consults with Lisa Kerns, IBCLC; Vermont based mail order pumps & supplies.

Corporate Lactation Services

802-875-5683 or 888-818-5653; CorporateLactation.com
Vermont based mail order pumps & supplies.

Acelleron; 877-932-6327; Acelleron.com; MA based mail order breast pumps.

This institution is an equal opportunity provider.



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DURING PREGNANCY

Planning to feed your baby

☐ Learn about the importance of feeding your baby your milk.

☐ Discuss your plans for feeding your baby with your health care provider(s).

☐ Prepare for lifestyle changes, such as quitting smoking, drinking, or using substances, and find support for these changes.

☐ Connect with a WIC peer counselor or other breastfeeding/chestfeeding support before the birth.

☐ Check with your insurance to see if breastfeeding classes, lactation consults, or breast pumps are covered.

Nursing is normal and natural, but you and your baby may need help as you learn how to do it. WIC can help if there are challenges.

- 2

PREPARING FOR THE BIRTH

Getting off to a great start

☐ Talk to your partner, family, and friends about how you plan to feed your baby your milk and for how long.

☐ Learn about birth options and how they will effect infant feeding.

☐ Attend a prenatal breastfeeding/chestfeeding class.

☐ Watch videos at home with your family to prepare for feeding your baby.

- 3

THE HOSPITAL STAY

Making the most of your hospital stay

☐ Hold your baby skin-to-skin right after birth.

☐ Feed your baby at the breast/chest within the first hour.

☐ Express colostrum (first milk) if your baby does not latch in the first hour.

☐ Express your own or request pasteurized donor human milk if your baby needs supplemental human milk.

☐ Keep your baby in your room in the hospital (“room-in”)

☐ Limit visitors so you can rest and learn how to nurse your baby.

☐ Call for help if your baby has trouble latching.

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THE FIRST WEEKS AT HOME

Nursing baby is easy & natural, but challenges are common

☐ Hold your baby skin-to-skin as much as possible.

☐ Contact your health care provider or lactation consultant if your baby has difficulty latching on or if your nipples are sore.

☐ Sleep or rest when your baby sleeps.

☐ Ask for help with housework and child care if needed.

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THE NEXT FEW MONTHS

Preparing to spend time away from your baby

☐ Learn how to express, collect, and store milk.

☐ Talk with your employer about supporting your infant feeding goals and milk expression after returning to work.

☐ Choose a child care provider who understands and supports the importance of offering expressed milk.

☐ Practice ways to nurse your baby if you are not comfortable feeding in front of others.

WHEN TO CHECK WITH A DOCTOR OR LACTATION CONSULTANT:

- ☐ My baby acts fussy when we nurse and does not seem satisfied after most feedings.

☐ My baby is not nursing at least 8 times every 24 hours.

☐ My nipples hurt during feeding, even after my baby is first latched on.

☐ I can’t hear my baby gulping or swallowing, or I can’t tell.

☐ I think I’m not making enough milk.

☐ I think my baby isn’t gaining weight.

SIGNS THAT FEEDING IS GOING WELL & MAKING ENOUGH MILK FOR BABY:

- ☐ My baby is nursing at least 8-12 times every 24 hours.

☐ My baby is having 3-4 poops and 6-8 wet diapers each day.

☐ I can hear my baby gulping or swallowing at feedings.

☐ My nipples do not hurt when my baby nurses.

☐ My baby is receiving only my milk.

MY GOAL

My goal is to feed my baby my milk for _____ months.

WELCOME BABY!

Baby’s name: _____

Birthday: _____

Time of birth: _____

Birth weight: _____

Discharge weight: _____

Baby’s weight at check-up 2 days after discharge: _____

(It is common to lose up to 7% from birth)

Baby’s second week weight: _____

(Baby should regain birth weight by 10 - 14 days)

YOUR HEALTH CARE PROVIDERS AND WIC ARE HERE TO HELP YOU.

Health care provider: _____

Phone: _____

Lactation support provider: _____

Phone: _____

Strong Families Vermont home visitor: _____

Phone: _____

WIC peer counselor (if available): _____

Phone: _____

My WIC contact is: _____

Phone: _____

DAILY DROP APP

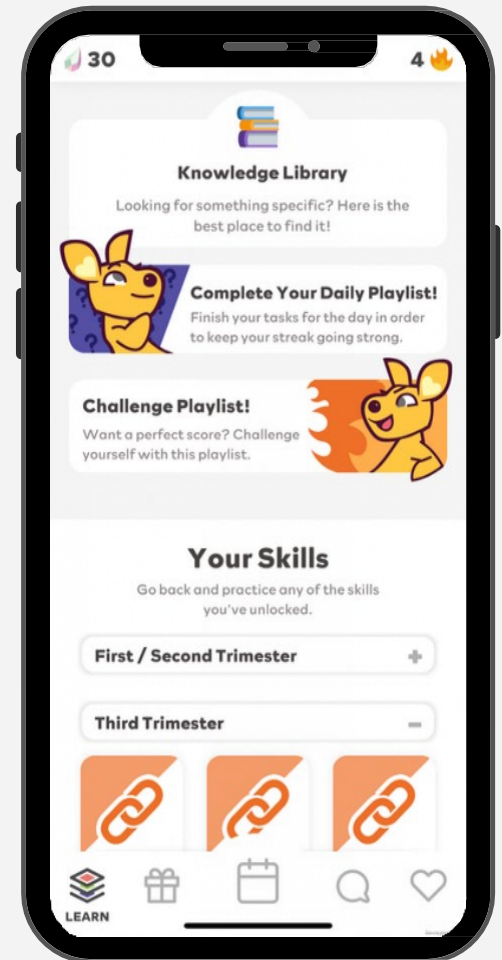
Where your breastfeeding/chestfeeding learning starts



“Quick little bites of information is a really easy way to learn.”

What's on the app?

- **Daily Playlist:** Play personalized mini games to earn rewards.
- **Daily Wrap Up:** Think about your feelings and see how they change over time.
- **Knowledge Library:** Find games for any stage of pregnancy or breastfeeding and find answers to common questions.
- **Get Help Easily:** Use the app to reach out to WIC.
- **Made Just for WIC:** Helping WIC staff give you the best care possible using game information.



Step 1: Install the Daily Drop app.



Apple App Store
<https://apps.apple.com/us/app/daily-drop-vermont-wic/id1616530787>



Google Play Store

<https://bit.ly/join-daily-drop>

When signed into Google, you'll be directed to join our Google group to receive the link to download the app.

Step 2: Enter your VT WIC household ID. Create your profile.

What's Your Vermont WIC Household ID?

Not sure? Contact your local WIC office.

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HealthVermont.gov/WIC

This institution is an equal opportunity provider.

WIC WOMEN
INFANTS
CHILDREN

VERMONT DEPARTMENT OF HEALTH

THE HOSPITAL EXPERIENCE

What to expect and how to make it memorable



CONTACT LIST

Name:.....

Address:.....

Obstetrician/Midwife:.....

Pediatrician:.....

WIC Clinic:

Peer Counselor/Lactation Consultant:.....

Hospital:.....

Emergency:.....

Notes:.....

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A close-up photograph of a woman with long dark hair, looking down at a newborn baby she is holding. The baby is wrapped in a white cloth with blue floral patterns. The woman's face is in profile, and she has a gentle expression. The background is softly blurred.

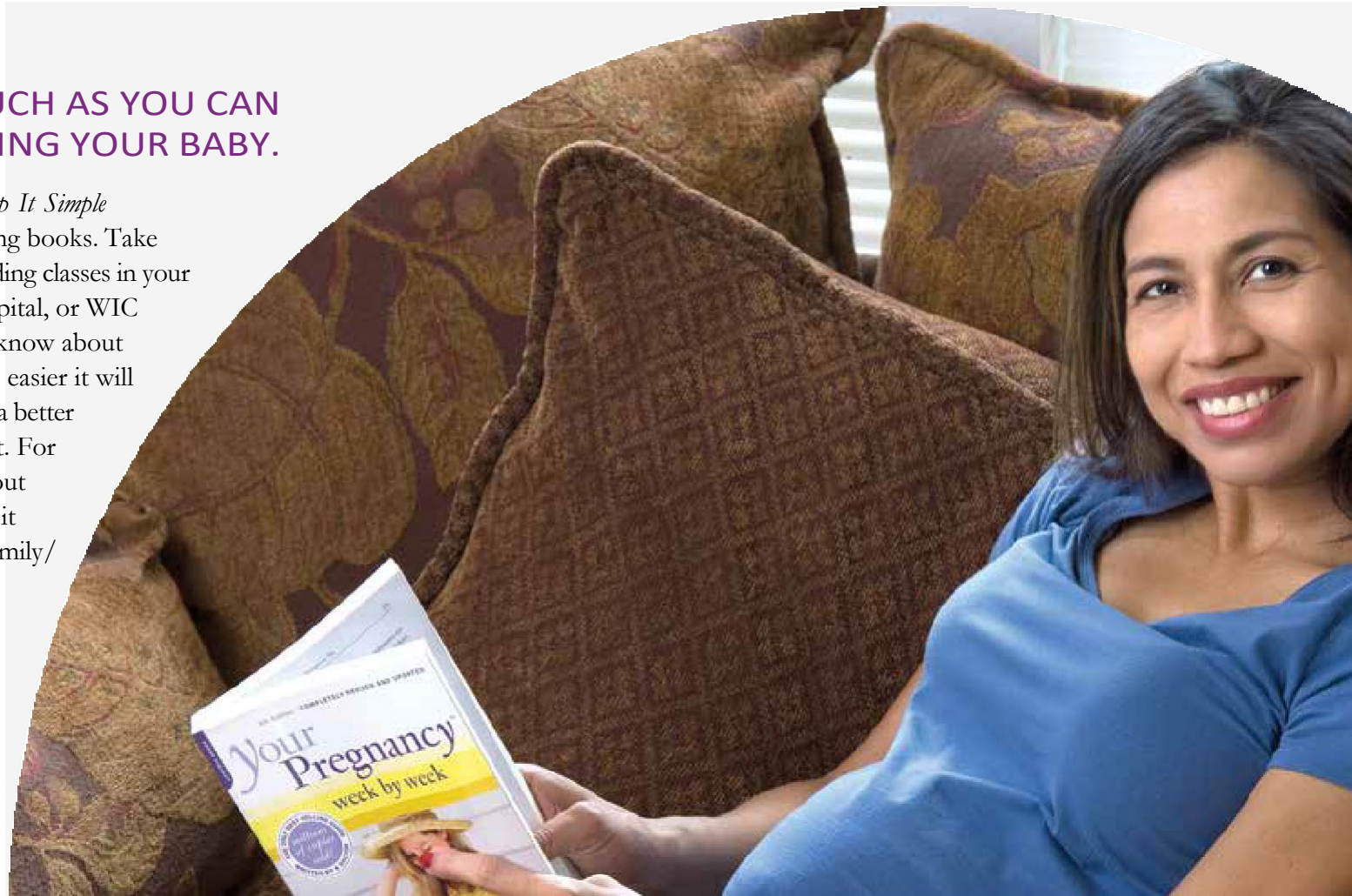
Make Beautiful Memories YOUR WAY.

Having a baby is a beautiful time, but for some parents the birthing experience does not turn out like expected. This book provides tips and tools, such as an *Infant Feeding Plan*, to help you gain more control over what happens to you and your baby in the hospital. Use it to ensure that you and your newborn have a wonderful experience.

Your PREGNANCY

LEARN AS MUCH AS YOU CAN ABOUT NURSING YOUR BABY.

Read *Breastfeeding: Keep It Simple* and other breastfeeding books. Take prenatal and breastfeeding classes in your community, local hospital, or WIC clinic. The more you know about nursing your baby the easier it will be because you'll have a better idea of what to expect. For more information about feeding your baby, visit healthvermont.gov/family/WIC

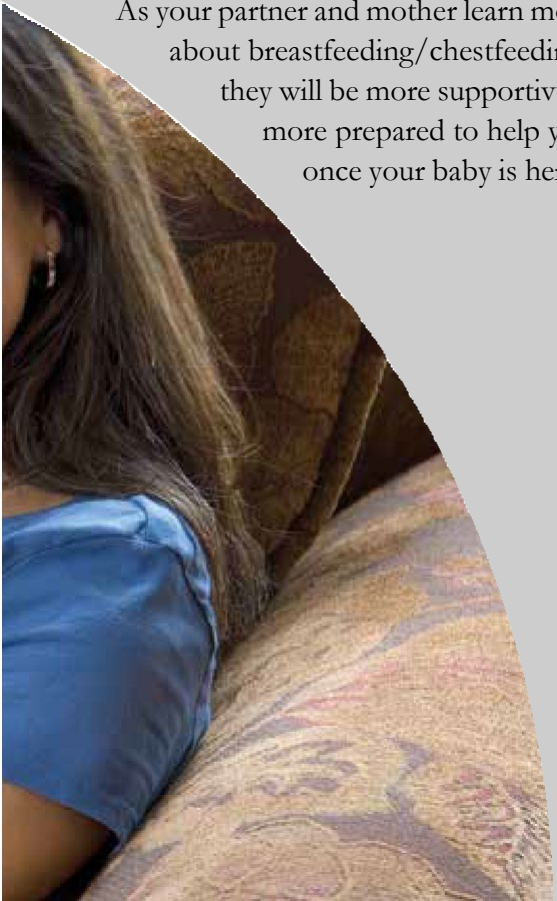


CREATE A SUPPORT SYSTEM.

Family

Share the books and brochures you get from WIC with the people who will help you when your baby gets here — especially your partner and your mother.

As your partner and mother learn more about breastfeeding/chestfeeding, they will be more supportive and more prepared to help you once your baby is here.



HOSPITAL

Find out whether your hospital or birthing center follow the Baby-Friendly Hospital guidelines established by the World Health Organization. Baby-Friendly facilities provide breastfeeding training for all their staff and encourage policies that ensure lactation support. To learn more about the ten steps to becoming Baby-Friendly, visit www.babyfriendlyusa.org

YOUR HEALTH CARE PROVIDER IS YOUR CHOICE.

Find a health care provider who is supportive of breastfeeding/chestfeeding.

Let your doctor know that you plan to nurse your baby.

WHAT CAN WIC DO FOR YOU?

Ask to meet with a WIC Peer Counselor or Breastfeeding Designee during your pregnancy and request her contact information. Peer Counselors are WIC moms who nursed their babies and who have been trained to help moms. They are available to answer questions about WIC services, provide referrals to other assistance programs, and offer comfort and encouragement to new moms.



PLAN TO EXCLUSIVELY BREASTFEED/CHESTFEED

Exclusive breastfeeding/chestfeeding means your baby is receiving your milk and nothing else. The American Academy of Pediatrics recommends exclusive breastfeeding for the first six months. Exclusive breastfeeding for the first 4-6 weeks is extremely important for establishing a good milk supply. The first several weeks of nursing “sets” your milk supply. It’s as if your baby is calling in an order for just the right amount of milk needed to grow. Using formula in the early weeks may set your milk supply at a lower volume than your baby needs. If you set your milk supply at a higher volume it will be easier to maintain your supply after you begin to pump or combine formula feeding with nursing – giving you more options if you return to work or school.



At the HOSPITAL

PLAN TO LIMIT YOUR VISITORS.

You will need to nurse your baby about every two to three hours. Too many visitors may be overwhelming.

Remember, there will be plenty of hospital staff coming in and out of your room – your nurse, your doctor, your baby's doctor,

the audiologist, the birth certificate authority, the photographer, food service workers, housekeeping, and others. By limiting your personal visitors, you can cut down on distractions leaving plenty of time for nursing and for important skin-to-skin contact.

TO AVOID UNCOMFORTABLE MOMENTS WITH VISITORS:

- Ask them to knock and wait for a reply before entering your room.
- Ask some of them to call instead of visiting you at the hospital or wait to visit you once you and the baby are home.
- Tell them you will be breastfeeding often and in skin-to-skin care with your baby between feedings.
- Tell them they may not be able to stay long if you need to feed the baby soon after they arrive.





PRACTICE SKIN-TO-SKIN CARE.

Skin-to-skin care should be practiced immediately after birth for at least 30 minutes and then as frequently as possible afterwards. Skin-to-skin care is when you keep your baby dressed only in a diaper held against your bare skin, with a blanket covering your baby's back. Ask hospital staff if they can do routine newborn procedures with your baby on your chest rather than taking your baby away. Babies kept in skin-to-skin care are more likely to nurse well and feed often which is important for establishing your milk supply. Holding your baby skin-to-skin is the best thing you can do for nursing success.





AVOID GIVING YOUR BABY BOTTLES OR PACIFIERS.

Early introduction of bottles and pacifiers should be avoided because it can keep you from establishing a good milk supply. All of your baby's suckling in the first few weeks should be at your breast.



FEED YOUR BABY AS SOON AS POSSIBLE AFTER DELIVERY.

Your baby will be alert and interested in feeding for the first hour or two after delivery. Tell the hospital staff that you wish to nurse your baby within the first 30-minutes-to-an-hour, if possible.

If you have an emergency cesarean delivery and are unable to nurse your baby right after birth, tell the hospital staff you want to begin feeding as soon as possible.

If your baby has difficulty sucking or latching on at anytime, ask for help right away.

ASK TO KEEP YOUR BABY IN THE SAME ROOM WITH YOU AT ALL TIMES.

Rooming in provides you the opportunity to learn your baby's early hunger cues so that you can feed at the first signs of hunger. Early hunger cues include lip movements, rooting, sucking on fingers or on hands. Fussing and crying are later hunger cues.

If your baby has to be taken away for a procedure, send your birthing partner to help calm your baby. A pacifier may be recommended as a comfort measure during procedures such as lab draws, check ups, baths, or circumcisions. If a pacifier is used for this purpose, take it from your baby as soon as your baby is returned and nurse to calm your baby instead.





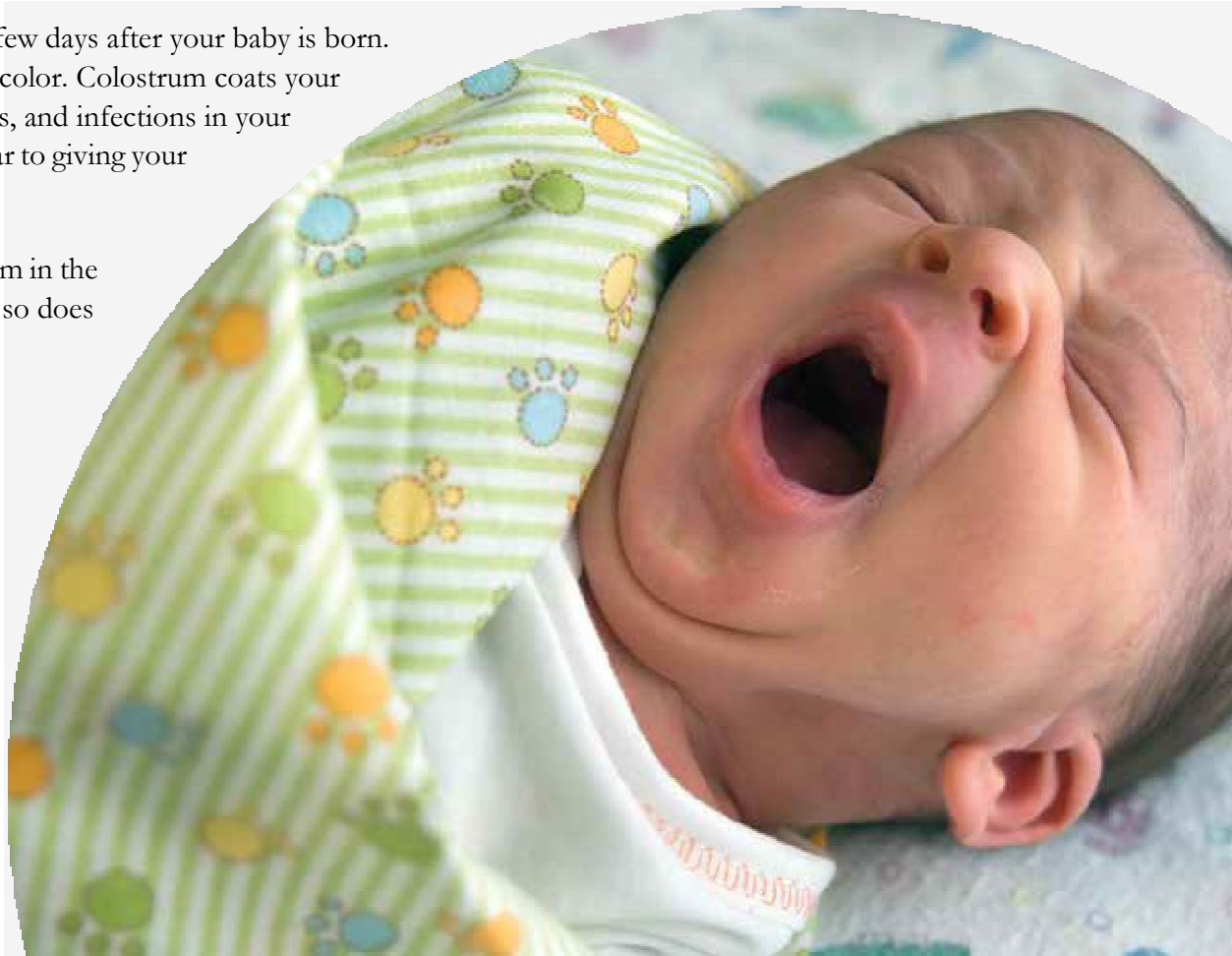
YOUR COLOSTRUM IS EXTREMELY IMPORTANT FOR YOUR BABY.

Colostrum is the milk you will make in the first few days after your baby is born. It is often thick and can be clear to yellowish in color. Colostrum coats your baby's insides and helps prevent allergies, viruses, and infections in your baby. Your colostrum is so protective – it's similar to giving your baby his first immunization.

You will produce very small amounts of colostrum in the first day. As your baby's stomach size increases, so does your milk supply.

Most babies go into a very deep sleep about two hours after delivery and may be hard to wake for the first 24 hours. It is important that you wake your baby to feed often – about every two to three hours.

If you are having difficulty waking your baby, practice skin-to-skin contact, which will often wake a baby.





UTERINE CRAMPING IS NORMAL.

After having your baby you may experience cramping during breastfeeding. It may feel like menstrual cramps or a milder version of the uterine cramping you experienced during labor. This is your uterus returning to its pre-pregnancy size. Cramping during nursing will lessen as your body recovers.



ASK TO SEE A LACTATION CONSULTANT.

Even if you think nursing is going well, it's a good idea to ask someone to look at how the baby is positioned and latched. This will give them a chance to give you tips to avoid soreness and how to recognize when your baby is hungry or full.

If your baby is having difficulty latching, ask for assistance in hand expressing your colostrum into a container and using an alternate feeding method (other than a bottle) to feed your baby.

IF YOUR BABY CAN'T NURSE, ASK FOR A BREAST PUMP.

If your baby is unable to nurse for any reason, it is important to begin hand expression in the first hour and continue expressing your milk by hand or with a breast pump throughout the day. If you think you will need a pump longer than your hospital stay, talk to your health care provider about getting a breast pump covered by private insurance or Medicaid. If you will be pumping when you return to work or school, call your local WIC office or ask your insurance about receiving a personal use breast pump.



DEPO-PROVERA MAY DECREASE YOUR MILK SUPPLY IF GIVEN EARLY.

Health care professionals may offer Depo-Provera shots, which is a type of birth control, before you are discharged from the hospital. The Depo-Provera shot may delay or prevent milk production if given before milk supply is well established. If you would like to use the Depo-Provera for birth control, it is advised that you discuss this with your OB or midwife and wait until your milk supply is established before getting the injection.



BE AWARE OF FORMULA ADVERTISING.

You may be offered a free diaper bag containing formula from the hospital. Formula manufacturers distribute free formula samples and discount coupons to doctors and hospitals for the following reasons:

- Research indicates that parents who take a formula gift bag are more likely to stop exclusively breastfeeding their babies by 10 weeks of age. Families are then forced to purchase their own formula for the rest of their baby's first year.
- Often these bags are called breastfeeding promotion bags but they still contain formula samples and coupons. Some baby magazines even have tear out coupons reminding you to ask for your free bag at the hospital. Do not feel obligated to take the bag containing free formula. You can refuse it.
- Remember, any amount of formula in the first month can decrease your milk supply. It is extremely important to exclusively breastfeed/chestfeed for at least the first month to protect your milk supply.



ASK THE HOSPITAL WHAT KIND OF BREASTFEEDING SUPPORT THEY OFFER AFTER DISCHARGE.

Many hospitals offer at least one free lactation support visit after discharge. You can also call your local WIC office and ask to speak with a breastfeeding counselor. Nursing may take some practice for you and your infant. Do not be afraid to ask for help as soon as you think you may need it.



ONCE YOU ARE HOME,
CONTINUE TO AVOID
FORMULA FOR THE
FIRST MONTH.

Just one bottle of formula:

- can reduce your supply of milk.
- can increase your baby's risk of developing allergies and diabetes as well as intestinal and bacterial disease.
- lessens the protective effect of your own milk on your baby.
- can result in premature weaning from the breast/chest.



PACKING LIST FOR THE HOSPITAL

DURING LABOR:

- ☐ Your *Infant Feeding Plan*, and any other breastfeeding tips, labor hints and childbirth notes or guidelines
- ☐ Eye glasses as well as contact case and solution
- ☐ Massage aids: tennis balls or wooden massagers
- ☐ Comfort aids: lotion and socks (for cold feet)
- ☐ Portable music device and music selections to help with relaxation
- ☐ Something to use as a fan (paper fan or small hand-held individual plastic fan)
- ☐ Dental care items: toothpaste, toothbrush
- ☐ Two regular-sized bed pillows (in bright, distinctive, hard-to-lose pillowcases)
- ☐ Camera/video camera, digital card, extra batteries or battery charger...plus an extra digital card!
- ☐ List of names and phone numbers of people to notify
- ☐ Cell phone (or calling cards for long distance calls)
- ☐ Snacks and drinks



AFTER BIRTH:

- ☐ Loose comfortable clothes for lounging and breastfeeding
- ☐ Slippers, extra socks and underwear
- ☐ Nursing bras or firm-fitting sports bra
- ☐ Shampoo, conditioner, comb/brush, other hair care items such as clips and rubber bands
- ☐ Make-up, deodorant, lip balm or moisturizer
- ☐ Baby's "memory" book – for footprints or staff names and guest signatures
- ☐ Entertainment items (books, crayons, games) especially if children are to visit in the hospital
- ☐ Clothes and shoes to wear home (a loose outfit; something you could wear at five months pregnant)

FOR BABY:

- ☐ Clothes for hospital baby photo
- ☐ Clothes for baby to wear home
- ☐ Clothes for hospital stay (if you want more than a t-shirt and diaper on your baby)
- ☐ Blanket(s) and outer wear for going home (as much as the season dictates)
- ☐ Car safety seat

Before you reach for
formula, reach for the phone
and call your local **WIC** office
for help. Your milk is a gift
of health to your baby that lasts a lifetime
and you only have one opportunity
to give this gift to your baby.

You can do it.
WIC can help.
800-649-4357

Thank you to
Texas Department of
State Health Services
and Texas WIC
for developing this
brochure.

**BREASTFEEDING
IS THE BEST GIFT
FOR YOUR BABY!**



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WIC
WOMEN
INFANTS
CHILDREN
We nourish families.

My name is _____ and my goal is to exclusively nurse my baby.

The benefits of feeding human milk are very important to me and my baby. I request that these guidelines be supported as long as it is medically safe for me and my baby.

If I am unable to answer questions about the chosen infant feeding practices, please speak with my birthing partner _____ or my doctor _____ who are both supportive of my decision to nurse my baby.

CHECK ALL THAT APPLY:

☐ EXCLUSIVE BREASTFEEDING

My goal is to exclusively nurse my baby. Please do not give my baby any supplements before speaking to me or my birthing partner.

I need all of my baby's suckling to be at my breast/chest in order for me to establish a good milk supply.

☐ NO BOTTLES OR PACIFIERS

Please do not give my baby artificial nipples including pacifiers or any types of bottles with formula, water, or glucose water. If there is a medical reason for supplementation, I would first like to speak with a lactation consultant or pediatrician about trying alternate feeding methods with expressed milk.

☐ SKIN- TO -SKIN

When my baby is born, I would like to have him/her placed on my chest, skin-to-skin with me for at least thirty minutes. If possible, please perform routine newborn evaluations with my baby on my chest. Throughout our stay, I want to be able to hold my baby skin-to-skin as much as possible.

A blanket may be placed over us, but not between us, if extra warmth is necessary.

☐ FIRST HOUR

Please help me initiate nursing within 30-minutes-to-1-hour of delivery. This means placing my baby skin-to-skin as soon as possible after birth offering help to begin nursing when my baby seems ready (e.g. rooting, licking lips, etc.) Please do not force my baby to take the breast if baby is not showing signs of readiness. Instead, keep my baby skin-to-skin with me until my baby is ready to try to latch.

☐ ROUTINE EXAMS

Please examine my baby in my presence and do not take my baby away from me unless he/she requires medical treatment that cannot be done in my room.

☐ EMERGENCY CESAREAN

If I have a cesarean, I would like to hold my baby skin-to-skin as soon as possible after the operation. If I am unable to for some time after the delivery, then please allow my partner to hold my baby skin-to-skin.

☐ ROOMING IN

I would like to room in with my baby 24 hours a day to give my baby plenty of skin-to-skin time and so I can learn my baby's feeding cues and feed him at his first sign of hunger. If for some reason my baby and I are not in the same room, please bring him/her to me at the earliest hunger cues, such as sucking on hands, making sucking noises, rapid eye movement, or rooting.

☐ FEEDING ASSISTANCE

Please teach me how to identify a good latch and how to correct my baby's positioning and latch if improvement is needed. Please teach me how to recognize my baby's early hunger cues and how to tell if my baby is nursing well.

☐ BREAST PUMPS

If my baby is unable to nurse or is separated from me due to medical reasons, I want to be able to use a breast pump within 6 hours of delivery. If you think I am going to need a pump longer than my hospital stay or if there is not a double electric breast pump available, please remind me to call my WIC office.

☐ DISCHARGE BAGS

Please do not give me a discharge bag containing formula or show me any promotional or marketing materials concerning artificial baby milk.

☐ LACTATION SUPPORT AFTER DISCHARGE

I would like to receive contact information for lactation support in case I need help with nursing after my baby and I are at home.

INFANT FEEDING PLAN

An Infant Feeding Plan is a plan of action that expresses your desired hospital experience and infant feeding goals to your family and your health care providers. Check any options that you want or that you would like to ask hospital staff about.

The plan can be completed with family and shared with:

- ☐ Your doctor
- ☐ Your baby's doctor
- ☐ The hospital staff

The most important place to take your Infant Feeding Plan is to the hospital so don't forget to pack it in your hospital bag. Ask hospital staff to attach this plan to your chart. The plan will help refresh your health care provider's memory when you're in labor. Remind staff at shift changes that your Infant Feeding Plan is attached to your chart. It will bring new members of your medical team – such as an on-call health care provider and your labor-and-delivery nurses – up to speed about your preferences.

