

## Antenatal Checklist – Infant Feeding

All of the following should be discussed with all pregnant women by 32 weeks of pregnancy.  
The health worker discussing the information should sign and date the form.

Name:

Expected date of birth:

Topic	Discussed or note if mother declined discussion	Signed	Date
<b>Importance of exclusive breastfeeding to the baby</b> (protects against many illnesses such as chest infections, diarrhea, ear infections; helps baby to grow and develop well; all baby needs for the first six months, changes with baby's needs, babies who are not breastfed are at higher risk of illness)			
<b>Importance of breastfeeding to the mother</b> (protects against breast cancer and hip fractures in later life, helps mother form close relationship with baby, artificial feeding costs money)			
<b>Importance of skin-to-skin contact immediately after birth</b> (keeps baby warm and calm, promotes bonding, helps breastfeeding get started)			
<b>Importance of good positioning and attachment</b> (Good positioning and attachment helps the baby to get lots of milk, and for mother to avoid sore nipples and sore breasts. Help to learn how to breastfeed is available from ...)			
<b>Getting feeding off to a good start</b> <ul style="list-style-type: none"><li>- Baby-led feeding</li><li>- Knowing when baby is getting enough milk</li><li>- Importance of rooming-in / keeping baby nearby</li><li>- Problems with using artificial teats, pacifiers</li></ul>			
<b>No other food or drink needed for the first 6 months – only mother's milk</b> <b>Importance of continuing breastfeeding after 6 months while giving other foods</b>			
<b>Risks and hazards of not breastfeeding</b> <ul style="list-style-type: none"><li>- loss of protection from illness and chronic diseases</li><li>- contamination, errors of preparation,</li><li>- costs,</li><li>- difficulty in reversing the decision not to breastfeed</li></ul>			

Other points discussed and any follow-up or referral needed: