Breastfeeding Log – Week One

Birth Date: / /	Birth Time:	AM / PM
Birth Weight:	Discharge Weight:	
Weight at one week:		

How often should baby be nursing? Frequent nursing encourages good milk supply and reduces engorgement. Aim for nursing at least 10 - 12 times per day (24 hours). You CAN'T nurse too often—you CAN nurse too little.

Nurse at the first signs of hunger (stirring, rooting, hands in mouth)—don't wait until baby is crying. Allow baby unlimited time at the breast when sucking actively, then offer the second breast. Some newborns are excessively sleepy--wake baby to nurse if 2 hours (during the day) or 4 hours (at night) have passed without nursing.

Weight gain: Normal newborns may lose up to 7% of birth weight in the first few days. After mom's milk comes in, the average breastfed baby gains 5-7 oz/week (170 g/week). Take baby for a weight check at the end of the first week or beginning of the second week. Consult with baby's doctor and your lactation consultant if baby is not gaining as expected.

Dirty diapers: In the early days, baby typically has one dirty diaper for each day of life (1 on day one, 2 on day two...). After day 4, stools should be yellow and baby should have at least 3-4 stools daily that are the size of a US quarter (2.5 cm) or larger. Some babies stool every time they nurse, or even more often—this is normal, too. The normal stool of a breastfed baby is loose (soft to runny) and may be seedy or curdy.

Wet diapers: In the early days, baby typically has one wet diaper for each day of life (1 on day one, 2 on day two...). Once mom's milk comes in, expect 5-6+ wet diapers every 24 hours. To see what a sufficiently wet diaper is like, pour 3 tablespoons (45 mL) of water into a clean diaper. A piece of tissue in a disposable diaper will help you determine if the diaper is wet.

Breast changes: Your milk should start to "come in" (increase in quantity and change from colostrum to mature milk) between days 2 and 5. To minimize engorgement: nurse often, don't skip feedings (even at night), ensure good latch/positioning, and let baby finish the first breast before offering the other side. To decrease discomfort from engorgement, use cold and/or cabbage leaf compresses between feedings. If baby is having trouble latching due to engorgement, use reverse pressure softening or express milk until the nipple is soft, then try latching again.

Call your doctor, midwife &/or lactation consultant if:

- Baby is having no wet or dirty diapers
- Baby has dark colored urine after day 3 (should be pale yellow to clear)
- Baby has dark colored stools after day 4 (should be mustard yellow, with no meconium)
- Baby has fewer wet/soiled diapers or nurses less frequently than the goals listed here
- Mom has symptoms of mastitis (sore breast with fever, chills, flu-like aching)

Directions --

- Circle the closest hour to the beginning of each nursing
- Circle W when your baby has a wet diaper
- Circle S when your baby has a soiled diaper

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