

Expressing Assessment Tool Parents Version

Full Name:

Address:

HCR. ... *Addressograph*

It is normal for your body to begin by producing drops of Colostrum. The volumes should increase daily over the first few weeks after your baby is born. Please remember that milk supply may vary from person to person.

This is an expressing assessment tool to guide you while you are expressing breast milk for your hospitalised baby. The green indicators mean that expressing is 'going well'. The pink indicators may suggest an expressing challenge. Talk to your baby's nurse/relevant healthcare professional if you tick any pink indicator. They can offer advice about how to resolve the challenge and help you maximise your milk supply.

		Indication of effective pumping (Green Indicators)	Answer suggestive of an expressing challenge (Pink Indicators)
1	Frequency of expression*	At least 8 times in 24 hours including once during the night.	Fewer than 8 times. Leaving out night expression.
2	Timings of expressions*	Timings work around her lifestyle with no gaps of longer than 4 hours (daytime) and 6 hours (night time).	Frequent long gaps between expressions. Difficulty 'fitting in' 8 expressions per 24 hours.
3	Stimulating milk ejection	Uses breast massage, relaxation, skin contact and/or being close to infant. Photos or items of baby clothing to help stimulate oxytocin.	Difficulty eliciting a milk ejection reflex. Stressed and anxious.
4	Milk flow	Good milk. Breasts feel softer after expression.	Milk flow delayed and slow. Breasts remain full after expression.
5	Milk volumes	Gradual increases in 24hrs volume at each assessment. Aim 700-900mls or a singleton baby by 2 weeks.	Milk volumes slow to increase or are decreasing at each assessment. Volume expressed < than 700mls/day at 2 weeks.
6	Breast condition	Parent reports breast are less full and softer after expressing. No red areas or nipple trauma.	Breasts are hard and painful to touch. Evidence of friction or trauma to nipple.
7	Hand expression**	Confident with technique. Information & video in HSE booklet	Poor technique observed. Mother not confident.
8	Using a breast pump	Access to hospital grade electric pump and can set up. Expressing sets provided. Knows how to wash and sterilise equipment. Breast shields fit correctly, no nipple soreness.	Inconsistent access to hospital grade pump. Not enough expressing sets. Unaware of how to sterilise equipment. Shields too small/large.
9	Effective Pumping Technique	Confident with breast compressions and/or hands-on-pumping technique: watched Stanford University video. Suction setting correct for that parent. Double pumping to ensure good breast drainage. Expresses until flow slows down, massages and expresses again until flow decreases.	Using pump only without combining breast massage and/or compression. Suction setting too high/low. Single pumping. Restricting expression time length.

*Once you have established a full milk supply (or maximum milk volume), you may be able to reduce the frequency of expressions and still maintain your usual milk volumes

** Hand expression is important in first 24-48 hours post-partum. Can also be used as an alternative expressing technique if no pump available.

'Every drop of breast milk makes a difference'

Expressed Breastmilk Volumes Tracker
 Recording the volume of breast milk you express each day will help you monitor your milk production

Date:		
Time of pump	Type of pump used	Volume expressed mls
Total Volume of milk:		

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