

## Case Studies

### **CASE #1**

Kim, a breastfeeding mother, calls your local health unit requesting formula. She states: "I don't think I'm making enough milk for my baby. I nurse him but he doesn't seem satisfied. He cries all the time and in an hour he's ready to eat again. I let him nurse on both breasts but he must not be getting very much milk because my breast don't get full like they use to. I'm drinking lots of fluids and eating healthy foods. Last night I decided to give him 2 ounces of formula and he gulped it down so fast that I knew he must have been hungry. I thought all I needed to do was nurse on demand. Do I need to give the baby some formula after breastfeeding?"

#### **Circle the three most important issues to address:**

- A. Baby not satisfied, cries and nurses all the time.
- B. Breasts not feel full.
- C. Ineffective nursing.
- D. Baby took formula.
- E. Mom's diet.

#### **Circle the best initial response to affirm the mother's feeling about the situation.**

- A. "Sometimes babies need to be allowed to cry for a while so they learn to comfort themselves."
- B. "The American Academy of Pediatrics now recommends pacifiers for all babies; giving one occasionally might lessen the excessive nursing."
- C. " I frequently hear this very concern from breastfeeding mothers."

What step should you take next? Circle your answer.

- A. Observe a nursing.
- B. Correct the positioning and latch-on.
- C. Develop a plan of care for the next week.
- D. Elicit more information with probing questions.

#### **Review the following additional information:**

- Baby is 15 days old.
- Breastfeeding was going wonderfully until 2 days ago when baby became more fussy and fretful.
- Nurses every 1 to 2 hours.
- Birth weight 7# 8 oz. and 7# 9 oz at 6-day-old weight check.
- Has at least 7 or 8 wet diapers per day and has yellow stools almost every feeding.
- No family history of food allergies or intolerances.

**Circle the best assessment of the cause of this problem:**

- A. The mother likely has low milk supply; pumping will help her increase the volume.
- B. The baby has colic from the foods in mother's diet that normally begins about this age.
- C. The baby is likely experiencing his first growth spurt at the anticipated age.
- D. The baby has diarrhea and needs to be seen by the doctor.

**Select the best plan of care:**

- A. Strongly encourage the mom to come in for a weight check for baby to be sure that it is just a growth spurt.
  - B. Advise mom to give one bottle of formula only during the 2 to 3 day period of the growth spurt then the baby will be satisfied with breastfeeding again.
  - C. Discuss the normal breastfeeding changes and reassure the mother that all parameters suggest that breastfeeding is occurring as expected.
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**CASE #2**

Judy, who is nursing her 4-day-old breastfed baby, called the health unit wanting to send her husband to come in to pick up formula today because she was concerned that the baby is not satisfied. She started to cry and said, "My breasts really hurt and more so when the baby tries to latch on. He acts as if he doesn't want to nurse. He pulls away, cries so I know he is hungry. I want to make sure he is getting enough."

**Circle the three primary issues or concerns to address:**

- A. Very large breasts and small baby's mouth.
- B. Painful breasts.
- C. Baby frustrated with nursing.
- D. Too much milk.
- E. Mother wants formula.

**Circle the best initial response to affirm the mother's feeling about the situation.**

- A. "I hear this concern a lot from mother's with babies at this age."
- B. "A nipple shield is sometimes helpful with latch-on problems."
- C. "A warm shower can be soothing to the breast and help with milk expression."

**Circle the best assessment of the cause of this problem:**

- A. Mastitis
- B. Plugged duct
- C. Poor infant suck
- D. Engorgement
- E. Yeast infection

**Circle the best plan of care:**

- A. Breastfeed or pump and:
    - Warm, wet breast soaks or shower before nursing.
    - Cold breast treatments after nursing.
    - Breast massage during nursing.
  - B. Breastfeed or pump and:
    - Cold breast treatments before nursing.
    - Cold breast treatments after nursing.
    - Breast massage during cold treatments.
  - C. Breastfeed or pump and:
    - Cold breast treatments before nursing.
    - Warm, wet breast soaks or shower after nursing.
    - Breast massage during cold and warm treatments.
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**CASE # 3**

Samantha brought in her 3 week old, term baby boy from his doctor's appt today for WIC certification to get some formula. Her baby's doctor said the baby should have gained a little more weight but was otherwise healthy. He suggested she breastfeed more often. Mom states she is now feeling overwhelmed because the baby already wants to nurse all the time. Now that she knows the baby has not gained much weight, she states she has lost confidence in the breastfeeding. The baby weighed 6# 11 oz at birth and today weighed 6# 12 oz at the doctor's office and WIC clinic. How would you help this mom regain her confidence to continue breastfeeding?

**Circle the three primary issues or concerns to address:**

- A. Formula request
- B. Mother's diet
- C. Infant's weight gain
- D. Mother's feelings
- E. Baby's wet and dirty diapers
- F. Physician's recommendations

**Choose the best initial response to affirm the mother's feeling about the situation**

- A. "The best way to help the baby quickly regain his weight is to give a small amount of formula after breastfeeding two to three times each day."
- B. "Sometimes this happens. All babies gain weight and grow a little differently."
- C. "If you breastfed 8 to 10 times a day, your milk production will increase to make enough milk for the baby."

### **What are the two most important actions to take next?**

- A. Develop a plan of care to include the following:
- Instruct to nurse the baby every two hours during the day.
  - Pump the breasts after nursing to boost the milk supply.
  - Supplement the baby with one to two bottles of milk each day following breastfeeding for a week.
  - Come back for a weight check in one week.
- B. Ask the following primary questions:
- How well do you think breastfeeding went in the hospital and at home?
  - How many wet and dirty diapers does the baby have each day and how large are the stools?
  - What was the baby's lowest known weight?
  - How often does the baby nurse and what is the length of time for active suckling during a feed?
- C. Observe a breastfeeding for the following signs:
- Good latch - flared lips, breast deep in baby's mouth.
  - Ear, shoulder and hip alignment of baby's body.
  - Swallowing heard during a feeding.
  - Signs of fullness after nursing - fist opens, body relaxes, releases the breast.

### ***Additional information:***

- Mom reports:
  - Long labor, 36 hours, and difficult delivery requiring head suction.
  - Baby's hospital discharge weight was 5# 15oz at 3 days of life.
  - Baby wakes to nurse every 2 hours during the day & night.
  - Baby nurses for up to an hour or more and sometimes falls asleep during the feeding.
  - Baby has been having 5 to 6 wets; hard to tell sometimes with disposable diapers, and 1-2 yellow stools, sometimes just a stain.
  - Breasts no longer feel full between feedings.
- Hospital home instructions included:
  - Breastfeed every 2 to 3 hours.
  - Watch for jaundice.
  - See the pediatrician at 2 weeks check-up.
- Feeding observation:
  - Mom has difficulty supporting her floppy baby in a feeding position.
  - Faint swallowing is heard during part of the feeding.

### **Select the best assessment of the primary cause of this problem:**

- A. Low milk supply
- B. Maternal lack of interest in breastfeeding
- C. Breastfeeding jaundice
- D. Weak ineffective suck
- E. Engorgement

### Select the best initial plan of care:

A. Breastfeed every 2 to 3 hours and:

- Pump after breastfeeding.
- Nurse on demand.
- Supplement with formula at 2 to 3 feedings.
- Keep a record of supplement taken, wets and stools.
- Check weight in one week.

B. Breastfeed every 2 to 3 hours and:

- Pump after breastfeeding.
- Limit nursing to 1 hour per feeding.
- Supplement with breastmilk at every feeding.
- Keep a record of supplement taken, wets and stools.
- Check weight in 2 weeks.

C. Breastfeed every 2 to 3 hours and:

- Pump after breastfeeding.
- Limit nursing to 20 minutes per feeding.
- Supplement with breastmilk at afternoon and evening feedings.
- Keep a record of supplement taken, wets and stools.
- Check weight in 3 days.

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### CASE #4

Danielle is a 28-year-old first-time mother who is one month postpartum. She has been exclusively breastfeeding daughter Gabrielle and is returning to work full-time in two weeks. She works as an aide at a local clinic.

**What open-ended questions would you ask Danielle to help her plan for her return to work?**

- A. "Are you planning to give all breastmilk or breastmilk plus formula?"
- B. "Tell me about your feeding plans for Gabrielle when you return to work?"
- C. "You aren't going to try to work and breastfeed are you?"

### Additional information:

- Danielle shares that she would like to continue breastfeeding and does not want Gabrielle to have any formula.
- Danielle has discussed this with her employer and that are supportive of her plans to pump or feed the baby at work.
- Gabrielle will be with a relative who lives close by and the relative will bring the baby to the clinic for one nursing during lunch break.
- Danielle is concerned about the other nursing times because she has tried pumping with a battery-operated pump she received as a baby shower gift and is only getting 2-3 ounces from both breasts with each pumping.

**Choose the best response to affirm the mother's feeling about the situation.**

- A. "Danielle, you have obviously given this a great deal of thought - that's great!"
- B. "You talked to your employer about this? That must have been so embarrassing for you."
- C. "Why don't you want Gabrielle to have formula? What's wrong with formula?"

**What are the four most pertinent points you would want to include in your education?**

- A. 1) Double electric pump options from WIC, how to use; 2) When to introduce a bottle; 3) Management of milk supply and leaking; and 4) Milk storage and handling.
- B. 1) Pumping challenges when working and breastfeeding. 2) How to request formula if can't produce enough milk. 3) Medications & herbals to boost the milk production. 4) Cost-effective pump options.
- C. 1) Pumping frequency and duration. 2) Requesting formula from WIC & supplementing. 3) Common breastfeeding problems. 4) Milk storage & handling.

**What follow-up care plan would be appropriate for Danielle and her baby?**

- A. Give her an appointment to return to see the nutritionist to ensure her diet is adequate.
- B. Give her resources to call if she has questions and encourage recertification at 6 months.
- C. Encourage her to drink plenty of fluids and continue her prenatal vitamins to ensure an adequate milk production.

**Return to the module to check your answers on page 26.**