

Feeding Your Baby

Your baby is about to begin an important step towards going home, oral feeding. Our goal is for feeding to be a nurturing experience for you and your baby, as well as provide good nutrition for growth and development. Beginning to feed your baby is an exciting time, yet comes with some special challenges since most babies don't begin to coordinate their suck, swallow, breath until 34 weeks.

It is very important that we learn how to respond to your baby's specific hunger cues. Each baby is different and may be more or less hungry at different times of the day and from day to day. Success is not based on how much your baby takes but that the feeding was safe, nurturing, provided adequate nutrition, and was individually/developmentally appropriate. You, your baby's nurse and the developmental team will partner together as your infant begins this stage. We are here to support you, address challenges, and adjust our plan with your input.

Listed below are some things to remember as you work through this part of your baby's development:

- **Quality** of feeding is more important than **quantity**
- Try your best to have the environment be:
 - Calm and quiet with dim lighting
 - To keep your baby focused on feeding it is important to try to:
 - Swaddle with hands to mouth
 - Limit position changes as it can distract and use energy
 - Little to no talking, if talking is necessary, please speak in a soft quiet voice
 - No rocking or bouncing
- If your baby falls asleep and stops sucking, your baby is telling you they are done, avoid trying to wake them
- If your baby loses tone (limp arms, no longer hands to mouth) the feeding becomes unsafe because they can choke. Please stop and let your nurse know what is happening.

Feeding your baby will take time but will be one of your most gratifying experiences as you watch your baby continue to develop.

How do we know when your baby is ready to start oral feeding? Feeding Readiness is assessed by the nursing staff for several days once your baby begins to show cues (hand to mouth, awake before cares) around 33-34 weeks. Feedings will be started when your baby scores a 1 or 2 on the readiness scale (below) at least 50% of the time for a minimum of 2 consecutive days.

Feeding Readiness

Score	Description
1	Drowsy, alert or fussy prior to care. Rooting and/or hands to mouth. Awakens at scheduled feeding time. Good tone.
2	Drowsy or alert once handled. Some rooting or takes pacifier. Adequate tone.
3	Briefly alert with care. No hunger behaviors. No change in tone.
4	Sleeping throughout care. No hunger cues. No change in tone.
5	Needs increased O ₂ with care. Apnea and/or bradycardia with care.



Quality of Nippling

Score	Description
1	Nipples with a strong coordinated suck throughout feed.
2	Nipples with strong coordinated suck initially, but tires with progression.
3	Nipples with consistent suck, difficulty coordinating swallow; some loss of liquid, or difficulty pacing.
4	Nipples with a weak/inconsistent suck. May require some rest breaks.
5	Unable to coordinate suck/swallow/breath pattern. May result in A/Bs or significant amounts of liquid loss.

Once oral feedings begin, the quality of nipple scale (above) will track your baby's feeding progression. Your bedside nurse will be able to answer any questions you may have