#### **MOTHER: Secondary**

- Poor latch
- Poor breast/mouth fit
- □ Firm, inelastic breast tissue
- □ Infrequent feeds (<8x/24 hrs)
- Restricted feeding times
- Schedule feeding
- Infrequent pumping sessions \_\_\_\_\_
- Reliance on poor quality breast pump
- Medications \_\_\_\_\_
- □ Hormonal birth control started: \_\_\_\_\_\_
  ◊ Pill ◊ Patch ◊ IUD ◊ Injection
  □ Herbs
- Poor nutrition or <1500kcals/day</p>
- Breast infection

# **MOTHER: Delayed /Suppressed lactation:**

- □ Milk in >72 hrs \_\_\_\_
- D Premature labor & milk in before birth
- □ Corticosteroids for premature labor
- Swelling after birth (edema)
- Hypertension
- Difficult birth/stress/urgent c-section
- □ Severe PP bleeding/ hypotensive / anemia
- □ Placental problems during preg/delivery
- Retained placental tissue
- Placenta accreta, increta, percreta
- Gestational ovarian theca-lutein cyst
- SSRIs in late pregnancy or early pp
- □ Insulin tx of GDM
- Advanced Maternal Age

## **MOTHER: Primary**

- Breast augmentation
- Breast reduction
- □ Breast biopsy/surgery
- Breast radiation
- Blunt trauma to chest or burn wounds
- □ Spinal cord injury//accidents
- Obstructed ducts or nipple pores
- Previous severe mastitis or abscess
- History of Infertility\_\_\_\_\_
- Obesity or Gastric bypass surgery
- □ Thyroid dysfunction (hypo/hyper, or PP)
- GDM/ T1 / T2 Diabetes/ Metabolic Syndr
- □ Hyperandrogenism// clinical or lab
- PCOS
- □ Hx of hyperPRL: tx?\_\_\_\_\_
- □ High PRL, low milk, ok breasts: macro?
- □ Hx autoimmune condition
- Other \_\_\_\_

## LACTATION CURVE RISKS OR RED FLAGS

- Early return of menses
- □ Chronic breast inflammation
- Low baseline prolactin
- Overweight
- Insulin resistance
- Smoker
- □ Infant suck/ bfg struggles/ early term
- New pregnancy
- Family hx alcoholism
- Chronic incomplete breast drainage

## **MOTHER: IGT risk factors**

- □ Breast type (Huggins): 1 2 3 4
- Unusual breast shape\_\_\_\_\_
- Distance between breasts > 1.5"
- General Significant asymmetry of breasts
- □ Prenatal breast growth? 0 1 2
- Description Postpartum breast growth? 0 1 2
- □ Stretch marks with little breast growth
- □ Scant veining
- Bulbous areola
- □ Sparse palpable glandular tissue
- Exposure to disruptive chemicals
- □ Androgynous body type
- Late breast development
- BCPs before breasts fully developed
- Obese/insulin resistant prior to puberty

## **MOTHER: Milk Ejection**

- History of abuse
- Recent traumatic event or birth
- Post-traumatic stress disorder or bfg pain
- Sick premature baby
- Alcohol
- Cigarettes
- □ Thyroid problems, esp hyper (CX-43 prob)
- Diabetes? (CX-43 prob)

#### BABY:

- □ Cardiac or respiratory problems
- □ Suck/swallow/breathe difficulties
- □ Stridor (squeaking)
- □ High or low muscle tone
- □ Torticollis (head pulls to one side)
- □ Small or Large for gestational age baby
- □ Very receding chin
- □ Hard/soft/submucousal cleft palate
- Bubble palate
- □ Restrictive lingual frenulum/tongue-tie
- Lip-tie
- □ Clicking, Tongue retracting or thrusting
- Weak suction or slips off a lot