

## SCREENING FOR MILK PRODUCTION PROBLEMS

### MOTHER: Secondary

- Poor latch, struggles from start
- Poor breast/mouth fit
- Firm, inelastic breast tissue
- Infrequent feeds (<8x/24 hours)
- Restricted/scheduled feeding times
- Infrequent pumping sessions \_\_\_\_\_
- Chronic incomplete breast drainage
- Reliance on poor quality breast pump
- Breast infection
- Smokes cigarettes or uses tobacco products
- Medications \_\_\_\_\_
- Hormonal birth control started: \_\_\_\_\_
  - ◇ Pill ◇ Patch ◇ IUD ◇ Injection
- Herbs, teas \_\_\_\_\_
- Eating disorder \_\_\_\_\_
- Poor nutrition or <1500kcal/day
- Deficiency zinc, iodine, iron, calcium, protein
- Gastric bypass surgery: when? \_\_\_\_\_
- New pregnancy

### MOTHER: Delayed/Suppressed lactation:

- Milk in >72 hours \_\_\_\_\_
- Difficult birth/stress/urgent c-section
- Swelling after birth (edema)
- Hypertension
- Overweight/obese or excess pregnancy gain
- GDM/ T1 / T2 Diabetes/ Metabolic Syndrome
- Insulin treatment of T2 or GDM during pregnancy
- Advanced Maternal Age
- Severe PP bleeding/hypotensive/anemia
- Placental problems during pregnancy/delivery
- Retained placental tissue
- Placenta accreta, increta, percreta
- Gestational ovarian theca-lutein cyst
- SSRIs in late pregnancy or early pp
- Corticosteroids for prem labor 3-9 d prior to birth
- Prenatal tocolytics (for preterm contractions)
- B-6 for hyperemesis- dose & duration? \_\_\_\_\_

### MOTHER: OTHER Primary

- Breast surgery: augmentation, reduction, other
- Breast or cranial radiation, or chemotherapy
- Blunt trauma to chest or burn wounds
- Spinal cord injury, accidents (nerves)
- Obstructed ducts or nipple pores
- Previous severe mastitis or abscess
- History of Infertility or PCOS
- Obesity, excessive pregnancy weight gain \_\_\_\_\_
- Diabetes T1, T2, Insulin Resistance
- Thyroid dysfunction (hypo/hyper, or PP)
- Hyperandrogenism/clinical or lab
- Low baseline prolactin
- Other \_\_\_\_\_

### MATERNAL RED FLAG RISK FACTORS

- Failed oral glucose tol test or elevated A1C
- Early return of menses
- Chronic breast inflammation
- Family hx alcoholism
- History of autoimmune condition
- History of hyperprolactinemia: tx? \_\_\_\_\_
- Exposure to hormonal disruptors- when?

### MOTHER: IGT risk factors

- Breast type (Huggins): 1 2 3 4
- Unusual breast shape \_\_\_\_\_
- Distance between breasts > 1.5"
- Significant asymmetry of breasts
- Prenatal breast growth? ◇ None ◇ A little ◇ A lot
- Postpart breast growth? ◇ None ◇ A little ◇ A lot
- Stretch marks with little breast growth
- Scant veining
- Bulbous areola
- Sparse palpable glandular tissue
- Masculine body shape
- Late breast development
- Obese/insulin resistant prior to puberty
- Hormonal birth control before breasts fully developed

### MOTHER: Milk Ejection

- History of abuse
- Recent traumatic event or birth
- Post-traumatic stress disorder or bfg pain
- Weak infant suck
- Breast surgery, especially peri-areolar
- Spinal cord injury
- Alcohol or Cigarettes
- Thyroid problems, especially hyperthyroid

### BABY:

- Weak suction or slips off a lot
- 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
- Restrictive maxillary frenum/lip-tie
- Clicking, tongue retracting or thrusting
- Cardiac or respiratory problems