



Baby Bonds

Pumping Guide



Tips Before Milk Removal

Apply heat and massage breasts



Tips During Milk Removal

Make sure baby has a good latch.

Make sure your pump flange fits well.

Use hands-on pumping.



VIDEO EXAMPLE

Use breast massage.



VIDEO EXAMPLE

Tips After Milk Removal

Lay back in order to allow the lymphatic fluid in the breast to drain.

Apply cool compresses.

Don't wait too long to empty the breast again.

Mastitis

Severe Engorgement can lead to clogged milk ducts and breast infection which is called mastitis.

If mastitis is not better in 24 hrs it must be treated with Antibiotics.

Call Health Care Provider and Lactation Provider Immediately if

- Fever over 101°F
- Feel generally unwell
- Have red streaks on the breast

Mastitis Signs and Symptoms

- Red streaks on the breast
- Hard spots that are not emptying
- Fever
- Chills
- Flu like symptoms
- Pain in the breast

Melanie Henstrom, IBCLC



Schedule a Consult or Follow Up

Breast Pump Cleaning Guide



Before Each Pumping Session

- **Wash your hands**
 - Use soap and water for 20 seconds
 - Dry hands on a clean towel
- **Inspect Pump Parts Before Assembly**
 - If a part or tubing is broken or moldy, discard part immediately.
- **Clean exterior of pump, pump dials, power switch, and countertops with disinfectant cleaning products or wipes (especially if using a pump that you don't own or share with others).**

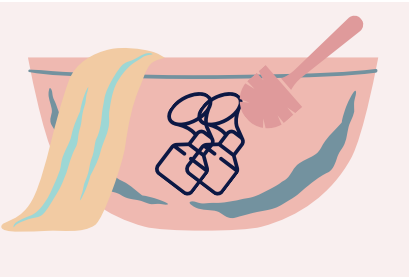
After Each Pumping Session

- **Store Milk Safely**
 - Place cap on milk collection bottle tightly
 - Seal milk collection bag
 - LABEL with the date and time (and the child's name if the milk is going to a childcare provider)
 - Immediately put the milk in a refrigerator, freezer, or cooler bag with ice packs.
- **Clean Pumping Area (with disinfectant products or wipes - especially if sharing a pump with others)**
 - Clean the pump dials
 - Clean the power switch
 - Clean the countertops
- **Disassemble Breast Pump**
 - Remove tubing
 - Separate parts that came into contact with breast and/or breast milk
- **Rinse**
 - Hold the parts under running water to remove remaining milk.
 - DO NOT PLACE IN THE SINK TO RINSE (sinks contain numerous bacteria and contaminants)
- **Clean Pump Parts**
 - Any part that touched a breast or breastmilk needs to be cleaned
 - Cleaning in a dishwasher or by hand in a wash basin or bucket (specifically for washing ONLY your infant feeding items)



How to Clean Your Breastpump Guide

Clean Pump by Hand (do NOT wash parts in the sink)



- Place pump parts in a separate bucket or wash basin with gentle dish soap and hot water.
- Scrub using the pump kit manufacturer's guidelines
 - If using a brush, use a clean one that is only used for infant feeding items.
- Rinse soap off well under hot water or in a basin of fresh and clean water.
- Air dry pump parts thoroughly on a clean dish towel or paper towel
 - Do not wipe or pat items dry
 - Ensure they dry in an area free from dirt and dust
- Clean wash basin and bottle brush with soap and water.
 - Rinse them well
 - Allow them to air dry, too.
 - Should wash basin at least every few days.

Clean Pump in the Dishwasher



- Check to ensure the parts are dishwasher safe
- Place small items in a closed top basket or mesh laundry bag
- Add proper dishwasher soap
- Run the dishwasher using the hot water and heated drying cycle (or a sanitizer setting)
- Remove from dishwasher with clean hands.
- Place any remaining wet or moist parts on a clean dish towel or paper towel to AIR DRY.

Sanitizing for Extra Protection

- Sanitize pump parts, basin, and brush at least once daily to remove extra germs after you've cleaned them using one of the above methods
- This is important if your baby
 - is less than 3 months old
 - was born prematurely
 - or has a weakened immune system

Proper Storage

- Make sure all items have completely air-dried before storing in a clean container or else you risk mold or germs growing.



Schedule a
Consult



For more info, visit
the CDC's [website](#).

Breastmilk Storage & Hygiene



Before Pumping

- Wash Hands with soap
- Ensure pump kit is clean
- Inspect for mold/damage
- Clean pump dials
- Clean/Disinfect countertops

Milk Storage Containers

- Use breast milk storage bags
- Use clean, food-grade containers
- Ensure tight fitting lids
- Avoid: Plastics with bisphenol (BPA) #7 ♻️

How to Collect and Store Milk

- Freeze milk in 2oz-4oz increments to avoid waste.
- Always label milk with the date expressed (and child's name if sending to daycare)
- Leave an inch of space at the top of container; breast milk expands as it freezes
- Milk is safe to be stored in an insulated cooler bag with ice packs (frozen) for up to 24 hours when traveling
- Do not store milk in the refrigerator or freezer door. Place in the main section in the back.

Breastmilk Storage Guidelines

Types of Breast Milk

Storage Locations and Temperatures

Countertop
77°F (25°C) or colder (room temp)

Refrigerator
40°F (4°C)

Freezer
0°F (-18°C)

Freshly Expressed or Pumped

up to 4 Hours

up to 4 Days

up to 6 mos (best)
up to 12 mos (acceptable)

Thawed (Previously Frozen)

1-2 Hours

up to 24 Hours

NEVER RE-FREEZE Breastmilk once it has thawed

Leftover from a Feeding (unfinished bottle)

Use within 2 hours after the child has finished feeding

Breastmilk Storage & Hygiene



Thawing Milk (Thaw the oldest milk first)

How to Thaw

- Thaw under lukewarm running water
- Place in a container of lukewarm water
- Thaw overnight in refrigerator

NEVER

- Never use a microwave to thaw - it destroys the nutrients and can burn baby's mouth
- Never RE-FREEZE thawed milk

Serving Milk

- Serve cold, at room temperature, or warm
- Test the temperature before serving baby by putting a few drops of milk on your wrist. It should feel warm, NOT HOT!
- Swirl to mix the milk fat which may have separated.

Cleaning and Disinfecting Parts

- Wash pumping parts in a separate bucket or basin with a gentle dish soap.
- DO NOT wash parts in the sink. It could contaminate your pump because of all of the germs inside your sink.
- Rinse soap off well
- Air dry pump parts on a clean dish towel or paper towel

Sanitizing Pump Parts and Bottles

- Clean in the dishwasher using hot water and heated dry (or sanitizing cycle)
- Boil in water for 5 minutes (after cleaning with soap and water)
- Steam in the microwave or a steam system according to instructions after cleaning



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For more info, visit
the CDC's website.

Choosing a Breastpump That Meets Your Needs



Potential Pumper

Potential Pumpers are expecting or breastfeeding parents that are not sure if they will want or need to pump.

In this case, our goal would be to get this parent a versatile pump that will fit into the parent's eventual needs if they ever arise. These parents can use most available pumps with success, although the Spectra S2 or S1 is most recommended.

If their pumping needs change unexpectedly, they may have selected a pump that does not meet their needs.

Combination Nursing/Pumping

Combination Nursing/Pumping Parents tend to use their pumps for 25-75% of their milk removal needs.

The Spectra S1 or S2 is the best pump that insurances pay for, but will be best served by pumps that are durable and semi-portable.

The more often they pump, the more their needs will trend towards the need for a heavier duty and more durable pump. These parents have babies that nurse efficiently.

Special Circumstances Pumper

Special Circumstances Pumping Parents are pumping in more complicated situations.

They may have an ill baby for whom human milk is especially vital. They may have low milk supply. They may be pumping after a pregnancy or child loss. These situations can be short-term or long-term.

Finding the pump that is the right fit here will require a strong and reliable pump that fits in with the special circumstances facing the family.

These situations may require sensitivity to determine the unique needs as these are often highly emotional and traumatic circumstances.

Occasional Pumper

Occasional pumpers are breastfeeding parents who are nursing as their primary means of milk expression.

They will be using their pump for less than 10-25% of their milk removal needs.

These parents can use most available pumps with success.

Exclusive Pumper

Exclusive Pumpers are parents who are only using a breast pump to express their milk.

These parents are typically best served by a primary pump with a strong and durable motor to provide adequate milk removal and stimulation. The frequency of their need to pump may make wearable and portable pumps desirable.

Typically, there will need to be a balance between convenience and stronger pumps in terms of supporting the milk production needs and making pumping fit the parent's lifestyle. More than one pump may be required to find that balance.

Pump Dependent Combination Nursing/Pumping

Pump Dependent Combination Nursing/Pumping Parents are those pumping parents who are primarily nursing their babies, but the baby is unable to independently manage the parent's milk supply.

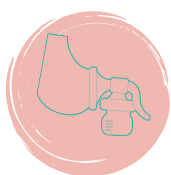
These parents may be dealing with supply concerns (low supply or chronic oversupply) or a baby with poor oral skills or medical conditions.

These parents will need a pump similar to the needs of an exclusive pumper despite latching their babies directly.

Cluster Pumping

Total Time: Varies - typically done over a period of 1-3 hours

Mimic the unpredictable feeding schedules of cluster feeding to support increased prolactin levels and prolonged emptying of the breast to signal increased milk production needs. Often covers a greater span of time than a power pump would.



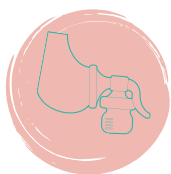
Pump 20 minutes

Rest 10 minutes



Pump 6 minutes

Rest 15 minutes



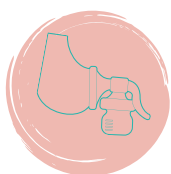
Pump 8 minutes

Rest 20 minutes



Pump 7 minutes

Rest 15 minutes



Pump 9 minutes



Scan to Schedule
a Consultation



Power Pumping

Total Time: 60 minutes

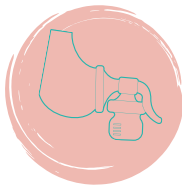
Why Power Pump?

Prolactin levels drive future milk production, and pumping in this patterns elevates prolactin levels longer than just a simple extended pump session would. Power Pumping is normally done in the place of a particular pump session (i.e. my 7 pm pump was a power pump!)



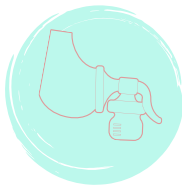
Pump 20 minutes

Rest 10 minutes



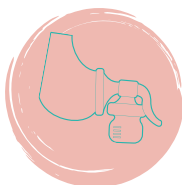
Pump 10 minutes

Rest 5 minutes



Pump 5 minutes

Rest 5 minutes



Pump 5 minutes



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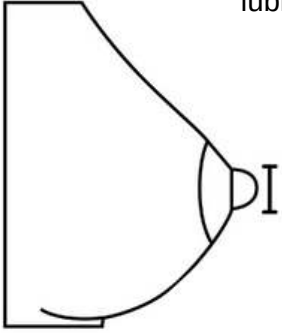
Flange Sizing

An Essential Part of a Positive Pumping Experience



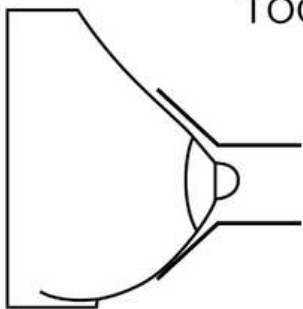
How Should a Breast Pump Flange Fit:

Breast Pump Flanges should fit close to the base of the nipple to allow the nipple to enter the flange tunnel preventing excessive amounts of areola entering the flanges. The nipple should move comfortably within the flange tunnel. Depending on elasticity, the nipple may swell while pumping to touch the sides of the flange. If this causes friction, add lubrication. Sizing up is only necessary if the fit is painful even with lubrication.



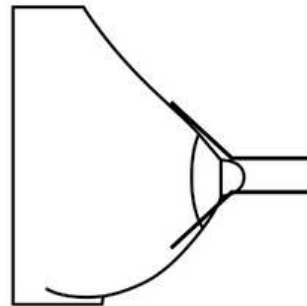
To Get a Good Fit, Measure the Diameter of the Nipple at the Base! No Guessing!

Measure the Nipple **Before Pumping** to Achieve the Best Fit.



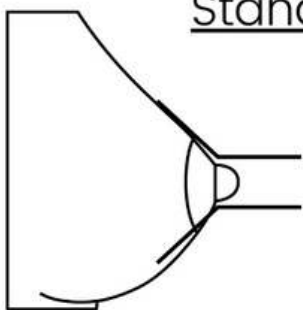
Too Big

Flange is too large and the areola will be pulled excessively into the tunnel. This risks poor milk output, pain, and tissue damage.



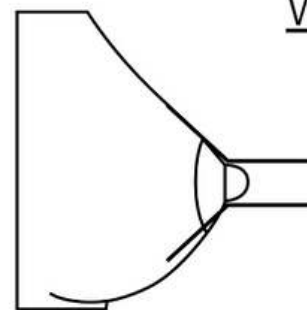
Too Small

The nipple doesn't fit into the tunnel, and there is a high likelihood of tissue damage.



Standard Fit

The nipple fits into the tunnel with 2-4 mm of room around the nipple before pumping to allow movement of the nipple in the tunnel. This fit is appropriate for all standard pumps of the market (except the Willow Pump.)



Willow Pump Fit

For the Willow Pump, we want as close to exact sizing as possible to prevent the areola from being pulled into the tunnel under constant suction. This is a specialized fit just for this particular pump.

Pumping should never hurt! If you are not having a comfortable and effective pumping experience, get help now!

Schedule a Consultation Today for Professional Flange Fitting





BOTTLE IS LEVEL



BABY IS SITTING UP

- USE GOOD POSITIONING
- SLOW FLOW NIPPLE
- LATCHED WELL TO BOTTLE
- TAKE BREAKS TO ALLOW BABY TO DETERMINE WHEN FULL

Paced Bottle Feeding

Paced bottle feeding allows a baby to control their intake with a bottle like they do at the breast. For a baby who is still nursing, this helps to prevent flow preference and allow easier transitions between the breast and the bottle. When a baby is no longer nursing, paced feeding helps to prevent over feeding and helps mimic the intake control a baby has at the breast, which helps prevent obesity later in life.



Non-Paced Feeding Concerns

This baby is laying on their back, and will involuntarily swallow the milk in their bottle to prevent compromising their airway. This is not necessarily an indicator they were hungry, its a survival mechanism.

- Possible ear infections
- Over eating
- Breast refusal
- Increased reflux and gas

VIDEO EXAMPLE



Click link or Scan QR Code to Watch

Parallel Pumping

A more sustainable alternative to Triple Feeding



Schedule a
Consult

Reasons for Parallel Pumping

Parallel pumping is an intervention for situations where baby cannot sustain nursing properly which places the milk supply at risk. Parallel pumping is an easier to manage alternative to triple feeding when longer intervention is necessary.

Benefits of Parallel Pumping

Parallel Pumping allows you to sustain the nursing relationship while dealing with breastfeeding difficulties. Parallel pumping is less time consuming and overwhelming than long term triple feeding. Additionally, the use of the pump on the opposite side while nursing can help baby transfer more milk.

Risks of Parallel Pumping

While better than Triple Feeding, Parallel Pumping can still be a lot of work. Parallel Feeding could cause a heavy letdown that baby could struggle with. If that occurs, turn off the pump during the let down then resume when milk slows.

Parallel Pumping Is An Intervention, Not a Solution.

Parallel Pumping is an intervention as part of a comprehensive plan to address a breastfeeding difficulty. It is not a solution that will fix things on its own.

How to Parallel Pump



Nurse on Side A while simultaneously using a Breast Pump on Side B.

Pump and Nurse for 20-30 minutes (unless instructed by a health care provider to limit time at the breast. (If that is the case, pump while nursing for the recommended time, then finish by pumping to a total of 20-30 minutes). Follow by feeding baby supplemental milk with a bottle.

Repeat Next Feeding by Nursing Side B and Pumping Side A.

Follow by feeding baby supplemental milk with a bottle.

May be repeated at every feeding, or only a certain number of feedings per day as desired. Your lactation consultant and care team will help you decide what is best.





Parallel Pumping

A more sustainable alternative to Triple Feeding

Parallel Pumping Requires Effective Pumping to Make the Magic Happen

The pumping part of Parallel Pumping serves to protect the milk supply and help support the ability to breastfeed long term. That means pumping has to be optimized for this intervention to be successful. You need a heavy duty pump with a well-fitted flange!

Your Care Plan

Use Parallel Pumping for

_____ number of feedings
per day.

Pump/Nurse to total _____
minutes each session using
Parallel Pumping.

Directions for Supplemental
Feeding

Tips and Tricks

Use this hack to make your nursing bra a hands free pumping bra for ease of pumping: https://youtu.be/VwqdT_93ITc



Consider Using Freemie or Spectra Cups to make it easier to pump and nurse simultaneously.

Remember that your mental health matters more than your milk! If this is overwhelming, tell your LC you need a different plan!

Modifications to Consider

Pumping During a Power Outage

Melanie Henstrom, IBCLC

Planning ahead can make power outages less stressful. Exclusively pumping parents, or pump dependent parents, need to continue expressing their milk even in emergency situations such as power outages. Like all emergency situations, we want to have thought ahead and created a plan that protects the milk supply and prevents unnecessary issues. Keeping your breasts emptied and healthy is very important. We can always replace lost milk, and we have options to feed your baby. Breast health is important in emergency situations!

Powering Your Electric Pump

- Car Chargers
- Car Adapters
 - Some Pumps Have AA Battery Options
- Back-Up Battery Packs
- Generators
 - May be a consideration in areas prone to frequent power outages. If you are reliant on frozen milk, this may be an additional concern where a generator can help you protect your baby's stored food.

Keeping Everything Clean

Power outages often disrupt water service, which poses an additional challenge to protecting the milk expressed from contamination.

Things to Consider

- Breast Pump Wipes
- Sanitizing Spray
- Account for pump and bottle washing needs in emergency water storage
- Water can be boiled on propane stoves to increase safety

Alternatives to Electric Pumps to Consider



Hand Expression
Manual Pumps

← Scan the QR Code for a
Video on Hand Expression

Protecting the Milk Stash

- Milk that still has ice crystals can be refrozen
- Use the penny on a frozen cup of water trick to identify freezers that defrosted and refroze
- In the winter, you may be able to store milk outside temporarily to keep frozen.



Need Help?
Schedule a
session today!





Pumping with Painful or Damaged Nipples



Pumping with painful nipples is never fun, but sometimes it's not avoidable. While you wait to meet with me, or are working your care plan, here are some basic measures to improve your comfort while pumping.

Ibuprofen and Tylenol are compatible with breastfeeding. These can be used if desired to manage swelling and pain.

Warm or Cool Compresses can be applied to the breasts and nipples. It's a matter of personal preference as to what feels best and provides the most comfort.

Try warm compresses and heat before pumping to speed milk removal and reduce the amount of time needed to pump.

Try Breast Massage prior to pumping to reduce the amount of time required to pump. Consider hand expression for some or all of your milk removal needs. [This video*](#) is a great resource for these topics.

Try hands on pumping to maintain milk supply while reducing time required to pump. [This video**](#) explains more about this idea.

Saline Soaks and Oil Treatments

Add 1/2 tsp of table salt to 8 oz of warm water to dissolve for a homemade saline solution.

Use a small amount of fresh saline solution to soak your nipples for 1-2 minutes, 6-8 times a day after pumping or nursing.

Apply coconut oil or olive oil to your nipples after the saline soaks.

Cover with a clean, dry breast pad.



Scan to Watch



Strategies for Switching Flange Size, Style, or Pump



JUST GO FOR IT

Not everyone will have trouble switching between pumping set-ups, so we should always hope for the best and assume you won't have any issues. Try your new set-up and see what happens. If you are having pain that is a sign to stop immediately and use the old setup until we evaluate again.

SWITCH IT OUT

If you are not entirely emptying hand express or use the old set up after 20 minutes of pumping with the new setup until your body learns to empty for the new setup without issue. Use warm compresses and breast massage prior to pumping to help with emptying effectively with the new setup quicker.

TRAIN YOUR LET-DOWN

The let-down reflex is a trained reflex, and sometimes it takes some planned training to learn to let-down for a new pump set-up. [Read this](#) for more information about how to do this.

Scan QR
Code to Read



What is a pump set-up?

A pump set-up is the particular combination of pump, flange size, and flange style you are using. Your letdown becomes trained to a particular set up and sometimes changing any aspect of the set up requires some work to make the new set-up work effectively.



Never pump through pain. Pain is a signal that something is wrong and you need help.

The MilkShake Method



What is the MilkShake Method and why do we use it??

The MilkShake method is a simple intervention designed to help get more milkfat combined into breastmilk when nursing or pumping.

This method assists in situations where, for a variety of reasons, the milkfat is not being successfully transferred to the milk, and the milk being expressed is higher in lactose and lower in fat than ideal.

This can occur with an oversupply where large volumes of milk accumulate in the breast, and adequate emptying is not occurring. This allows time for the milkfat to separate from the more watery components of the breastmilk. The fat then clings to the walls of the milk ducts, and that can make it harder for the milkfat to release into the milk.

Another common reason to use this intervention is in the case of a baby with compromised milk transfer, whether weak from an early birth, or from a compromised latch like with a tongue tie. This method can help assure that the milkfat is more readily accessible to help baby get everything they need to grow and thrive.

How to do the MilkShake Method?

To use the MilkShake Method, you use your hands to help stimulate the breasts before nursing or pumping to help make sure the milk in the milk ducts is well combined and any sticky milkfat has been dislodged from the walls of the milk ducts. Use a combination of massage, tapping, and shaking to stimulate the breast.

Be gentle with your breasts! Never touch them more firmly than you would your baby. If it hurts, stop and talk to your lactation consultant!

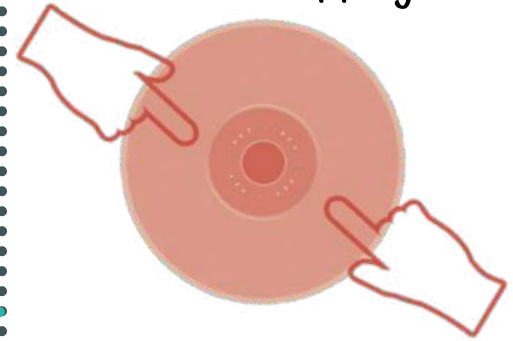


Breast Massage



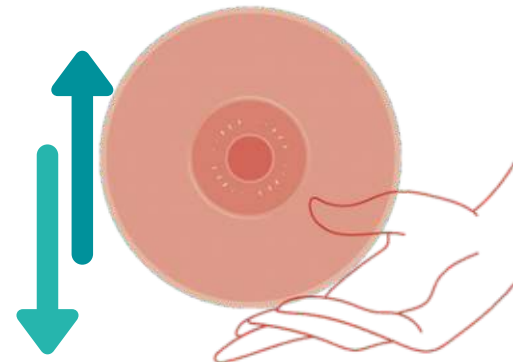
Massage the breast in circles to reduce swelling and encourage milk removal.

Breast Tapping



Use your fingers to gently tap the breasts to help stimulate before hand expression, pumping, or nursing to encourage better milk removal.

Breast Shake



Gently use your hands to shake the breast in an up and down motion for 20-30 seconds to help dislodge the milk fat.

Using Lube to Pump



WHY WOULD I NEED LUBE TO PUMP?

Nipples naturally produce lubrication, but sometimes, even with a properly sized pump flange, there is some friction when pumping. Natural lubrication is not always enough when pumping, so sometimes a little lube in the tube of the flange can help with rubbing or pinching. Always double check your flange size before pumping.

WHAT CAN I USE FOR LUBE?

Food grade coconut oil or olive oil are the safest and most cost effective options for lubing a breast pump flange. The very small amount that could transfer to your milk would not be enough to harm your baby. Lanolin is too thick and sticky to use to lube flanges. If you want to use Lanolin after you pump that is fine, but it is not for lube.

HYGIENE MATTERS.

A common issue with lube for flanges is contamination of the lube or using dirty hands to apply it to the flanges. Be conscientious of hand hygiene and contamination when using pump lube.

Apply a small amount of lube with clean hands **ONLY** inside the tunnel.

