Are you expecting a baby and considering breastfeeding? Or are you a new mother who wants to keep breastfeeding after returning to work? Bluegrass Community and Technical College has a program to help you combine the demands of working or attending classes and breastfeeding. To learn more about the BCTC program to support breastfeeding and about the Lactation Stations contact the Human Resources Manager or Peggy Rinehart, CLC peggy.rinehart@kctcs.edu

Welcome To Your Breastfeeding-Friendly College

Congratulations on your decision to feed your baby mother's milk! Your baby deserves the best possible start in life and mother's milk provides that! BCTC recognizes the importance of breastfeeding for you and your baby and is a "Breastfeeding Friendly College". You can return to work or school and still provide your baby with the best possible source of nutrition -- mother's milk. Mother's milk provides your baby with the most nutritionally complete, easily digested, convenient and economical source of nourishment. In addition, mother's milk has many health benefits for your baby including a reduction in the incidence and severity of ear infections, respiratory infections, gastrointestinal infections and allergies. Breastfeeding enhances the bond between you and your baby. Benefits for you, as the mother, include more time spent with the baby instead of preparing formula, less risk of premenopausal breast cancer, and more relaxation and stress relief due to hormones produced during lactation. Your decision to breastfeed your baby may provide lifetime benefits for you and your baby!

Participants in the BCTC lactation support program are asked to follow the Participant Guidelines outlined in this packet. If you have questions or concerns contact your personal Lactation Consultant, the BCTC Certified Lactation Counselor, your family physician, or other community breastfeeding support groups. Helpful Information links:

How WIC Supports Breastfeeding
http://nwica.org/?q=advocacy/infographic

Text4baby
http://www.text4baby.org/

Kentucky Cabinet for Health and Family Services Breastfeeding Information
http://chfs.ky.gov/dph/mch/ns/breastfeeding.htm

American Academy of Pediatrics: Healthy Children
http://www.healthychildren.org/English/Page/default.aspx

Kentucky Breastfeeding Resources
http://chfs.ky.gov/dph/mch/ns/Breastfeeding+Resources.htm

Kentucky Breastfeeding Resource Guide 2011
Lactation Room Guidelines

1. For non-urgent breastfeeding questions or to discuss using the lactation room on any BCTC campus site, please call (859-246-6250) or email (peggy.rinehart@KCTCS.edu) Peggy Rinehart, the Lactation Station program representative. You can register to use any lactation room using the online registration form using the link in the Lactation Station menu. Each campus has a sign-in location and key located near the lactation room. You will return the key, after each visit to the room.

2. Review your orientation packet. Consider purchasing a good quality double electric pump designed for working women. The Kentucky Breastfeeding Resource Guide 2011 has information and links to various breast pump manufacturers and retailers, as well as information about your local La Leche League Leader, and Lactation Consultants for information regarding good quality pumps. Community WIC Programs have breastfeeding coordinators who can also help you with decisions about purchasing or renting a pump.

3. Your pumping equipment should be rinsed well after each use. It is recommended that you rinse your pumping equipment first in cold water and then wash with hot soapy water and rinsed well on a daily basis to avoid contamination.

4. Good hand washing before and after pumping is essential to prevent contamination of your milk, your pumping equipment and the environment. Hand sanitizers are stocked in each room.

5. If you do not have access to a refrigerator when on campus, an insulated cooler bag with “blue ice” packs will keep your milk safe all day, and while transporting your milk from campus to home.

6. Each woman using the room is responsible for cleaning up after her use of the room. Please ensure that you clean up any spills. Disinfectant wipes are available in each room for this purpose.

7. Signing in each time you use the room provides important information about room usage and adequacy of each room. This log also demonstrates the importance of providing this room for breastfeeding mothers.

8. Each room has a notebook available for women to write comments or suggestions. There are also “Comment” slips at the sign-in area, which can be filled out and placed in the sign-in box. Please feel free to share your comments, suggestions, or concerns; or contact Peggy Rinehart, CLC, peggy.rinehart@kctcs.edu.
Hints for Mothers who Pump

Your milk is the best food for your baby for the first year of life and longer. There is compelling evidence that babies on mother’s milk are less likely to have infections or be sick. This is especially true for babies in childcare settings. When you are away from your baby, you can express your milk by pumping your breasts and provide your milk for later feedings. The following guidelines may help you in this process.

To Maintain Your Milk Supply

- Frequency is the key. Plan unrestricted nursing throughout evenings, nights, weekends and days off. Milk production is based on supply and demand. Frequent breastfeeding when you are with your baby and regular milk expression when away from your baby will help maintain your supply.
- Expect your baby to want to breastfeed more when you are together, to compensate for time apart during the day.
- Choose the expression method that best meets your needs. If you purchase a pump, practice assembling and cleaning it. If you opt for hand-expression of your milk, learn the technique well in advance of your return to work. Begin expressing and freezing milk about two weeks prior to resuming your work routine. The assurance you gain will make it easier for you to continue after you return to work.
- Delay introducing a bottle until your baby has become expert at nursing and your milk supply is well established, usually at about four to six weeks of age. About two weeks before you return to work, have your baby’s caregiver offer your baby a bottle. Many babies will refuse a bottle if their mother is nearby. Infants older than three months who resist the notion of drinking a bottle might accept milk from a cup or a spoon.

Expressing Milk at Home

- To build up a reserve milk supply, try expressing in the morning before your baby breastfeeds, between feedings, or immediately after feedings. Many mothers get good results by expressing milk from one breast while their baby nurses on the other.

Cleaning Bottles and Pumping Kits

- Rinse bottles and pump equipment in cold water first and then wash in the dishwasher or hot soapy water dishwasher and rinse twice. Air-dry all parts on a clean towel.
Storing Expressed Breastmilk

- Store your milk in clean glass or plastic bottles. Avoid hard polycarbonate plastic, which contains Bisphenol A (BPA). BPA, a xenoestrogen, is an endocrine disruptor, meaning it disturbs the hormonal messaging in our bodies. Plastic bottles made of softer, safer plastics (polyethylene, polypropylene, or polyamide) are safe to use. Born Free, Gerber, Sassy, and Medela make plastic baby bottles which are safe for babies. Discard worn bottles that are cloudy or scratched. Chemicals leach into food when plastics break down. Don't heat plastic bottles in the microwave, or wash them in the dishwasher, since heat degrades plastic, releasing chemicals.

- Save milk in quantities of 2, 3, and 4 ounces so your baby’s caregiver can choose the amount appropriate to your baby’s hunger or feeding pattern. Label each container of milk with the date pumped and quantity. Use the oldest milk first. Add your name and your baby's name to the label if your milk will be given to your baby in a childcare setting. Include the date you are bringing the milk to the childcare setting on the label to indicate when it is to be used. Leave fresh, rather than frozen, milk for your baby whenever possible.

- Use a separate container to store the milk each time you pump. You can later combine cooled batches for a feeding or for frozen storage. You can add refrigerated milk to frozen milk provided the amount you add is less than the amount already frozen.

### Storage Duration of Fresh Human Milk for Use with Healthy Full Term Infants

<table>
<thead>
<tr>
<th>Location</th>
<th>Temperature</th>
<th>Duration</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Countertop, table</td>
<td>Room temperature (up to 77°F or 25°C)</td>
<td>6–8 hours</td>
<td>Containers should be covered and kept as cool as possible; covering the container with a cool towel may keep milk cooler.</td>
</tr>
<tr>
<td>Insulated cooler bag</td>
<td>5-39°F or -15-4°C</td>
<td>24 hours</td>
<td>Keep ice packs in contact with milk containers at all times, limit opening cooler bag.</td>
</tr>
<tr>
<td>Refrigerator</td>
<td>39°F or 4°C</td>
<td>5 days</td>
<td>Store milk in the back of the main body of the refrigerator.</td>
</tr>
<tr>
<td>Freezer compartment of a</td>
<td>5°F or -15°C</td>
<td>2 weeks</td>
<td>Store milk toward the back of the freezer, where temperature is most constant. Milk stored for longer durations in the ranges listed is safe, but some of the lipids in the milk undergo degradation resulting in lower quality.</td>
</tr>
<tr>
<td>Refrigerator</td>
<td>0°F or -18°C</td>
<td>3–6 months</td>
<td></td>
</tr>
<tr>
<td>Freezer compartment of</td>
<td>-4°F or -20°C</td>
<td>6–12 months</td>
<td></td>
</tr>
<tr>
<td>refrigerator with separate</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>doors</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chest or upright deep freezer</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Thawing and Warming

- Defrost frozen milk in the refrigerator, or use water "bath" to defrost.
  - To defrost in the refrigerator, move the milk from the freezer to the refrigerator the night before it is needed.
  - To defrost in the water "bath" put the bottle of frozen milk in a pan of warm (not hot) water or hold under warm tap water until thawed.
- After thawing, shake gently, or swirl, to mix and pour the portion for this feeding only, into the feeding bottle or cup. Refrigerate the remainder for the next feedings.
- Antibodies in breastmilk may survive freezing if the milk is properly stored, but cannot survive intense heating (microwave oven).
- Microwave heating causes “hot spots” in the milk that can burn the baby's mouth and throat. Never use a microwave to thaw or heat milk.
- Warm only enough milk for one feeding. Keep the remainder of the thawed milk refrigerated for use later on the same day. Thawed milk may be refrigerated 24 hours.
- **DO NOT** re-freeze milk that has been warmed and partially utilized for a particular feeding.