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
- Breast infection
- Medications _
- □ Hormonal birth control started: _____ ◊ Pill ◊ Patch ◊ IUD ◊ Injection
- Herbs
- Gastric bypass surgery: when?
- Poor nutrition or <1500kcals/day</p>
- Deficient in zinc, iodine, iron, mag or calcium

MOTHER: Delayed /Suppressed lactation:

- Milk in >72 hrs _____
- Difficult birth/stress/urgent c-section
- □ Swelling after birth (edema)
- Hypertension
- Premature labor & milk in before birth
- □ Corticosteroids for prem labor < 3d to delivery
- □ Overweight/obese or excess preg gain
- GDM/T1/T2 Diabetes/ Metabolic Syndr
- □ Insulin tx of T2 or GDM during pregnancy
- Advanced Maternal Age
- □ 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
- Derived Prenatal tocolytics (for preterm contractions)
- B-6 for hyperemesis- dose_____

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
- Diabetes T1 or T2
- □ Thyroid dysfunction (hypo/hyper, or PP)
- □ Hyperandrogenism/ clinical or lab
- □ Hx of hyperPRL: tx? _
- Hx autoimmune condition
- Exposure to EDCs when?_____
- Other _____

LACTATION CURVE RISKS OR RED FLAGS

- Early return of menses
- Chronic breast inflammation
- Low baseline prolactin
- Insulin resistance
- □ Smokes cigarettes; marijuana?
- □ 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"
- □ Significant asymmetry of breasts
- □ Prenatal breast growth? 0 1 2
- □ Postpartum breast growth? 0 1 2
- □ Stretch marks with little breast growth
- □ Scant veining
- Bulbous areola
- □ Sparse palpable glandular tissue
- Exposure to disruptive chemicals during critical windows
- □ 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
- Weak infant suck
- □ Breast surgery, especially peri-areolar
- Spinal cord injury
- □ Alcohol or Cigarettes
- □ Thyroid problems, esp hyperT

BABY:

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- **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
- Restrictive maxillary frenum/lip-tie

Weak suction or slips off a lot

□ Clicking, Tongue retracting or thrusting