

**ANTENATAL DISCUSSION CHECKLIST**

All pregnant women and their partners should receive information and opportunities for one-to-one discussion before 32 weeks of pregnancy on the following:

Topic to discuss	Signed and dated by midwife / doctor	Notes for follow-up/ handouts used
<p><b>Supportive labour and birth practices</b> have a positive effect on mothers and infants. These include:</p> <ul style="list-style-type: none"> <li>• having a companion for support,</li> <li>• moving about and using positions that are comfortable,</li> <li>• choosing pain relief that allows baby and mother to be alert.</li> </ul>		
<p><b>Skin to skin contact</b> at birth, and for at least one hour helps mother and baby to bond with each other and helps mother to relax after birth. It helps baby:</p> <ul style="list-style-type: none"> <li>• to stabilise breathing and heartbeat, and to stay warm,</li> <li>• to be protected from hospital infections (colonised with mother's bacterial flora),</li> <li>• to start breastfeeding.</li> </ul>		
<p><b>Breastfeeding is the normal way</b> to feed and care for a baby. It is important to the health of the baby and the mother.</p> <ul style="list-style-type: none"> <li>• Babies are at less risk of chest and tummy infections, SIDS, allergies, obesity and diabetes.</li> <li>• Mothers who breastfeed are at less risk of breast cancer, obesity and heart disease.</li> <li>• It provides all the baby needs for the first 6 months.</li> <li>• Breastfeeding continues to be important after 6 months when other foods are given.</li> </ul>		
<p><b>Breastfeeding in the first hour</b> after birth provides:</p> <ul style="list-style-type: none"> <li>• a good start to baby's immune system,</li> <li>• food and comfort.</li> </ul>		
<p><b>Keeping baby near</b> (rooming-in):</p> <ul style="list-style-type: none"> <li>• helps the mother to learn about her baby,</li> <li>• is safer, and with less risk of infection from others.</li> </ul>		
<p><b>Good positioning, attachment and suckling</b> help</p> <ul style="list-style-type: none"> <li>• the baby to get enough milk and</li> <li>• mother to be comfortable when feeding.</li> </ul>		
<p><b>Feeding on demand or baby-led feeding</b>, and frequent feeding are needed to develop a good milk supply</p>		
<p><b>Giving formula or water supplements</b> or using a soother in the early weeks <b>can reduce the milk supply</b> and effect baby's health. Discuss with midwife or other health professional before any supplements are given.</p>		
<p><b>If considering formula feeding</b>, know the type for young infants, the cost of using formula, the safety of local water supply, equipment needed, and the risks of incorrect use of formula.</p>		
<p>The <b>midwives on the postnatal ward will help</b> with learning to feed and care for baby. Most parents have questions and midwives expect to be asked.</p>		
<p>The Public Health Nurse, other health services and support groups are <b>in the community</b>. It is good to meet these people during pregnancy.</p> <ul style="list-style-type: none"> <li>• Contact details given</li> </ul>		
<p>Information given on <b>antenatal classes</b></p>		
<p><b>If there are concerns</b> or previous poor experience, arrange for a discussion with lactation consultant, CMS, voluntary supporter or other knowledgeable person.</p>	Referral arranged:	

**See BFHI Link Issues 22, 24, 32 and other Issues for more information on antenatal discussions.**