



Lactation Education Resources

NEWSLETTER APRIL 2018

LactationTraining.com

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April 2018



Good luck to all our students
who are taking the April 1st
IBLCE certification exam.
May the force be with you!

The next exam is offered Oct 1, 2018.
The application window is 3/1–5/15, 2018.
There is still enough time to complete a
Lactation Consultant Training Course -
if you get started soon!

[Click here](#) to learn more.

Virtual Lactation Consults

With the burgeoning expanse of opportunities for providing quality lactation consultations via the internet, you need to be aware of some of the issues involving this medium. It is so tempting to hurriedly answer what seems to be a quick and easy question. But what if that quick and easy question is actually just the tip of the iceberg? It may be a serious problem.

Feel free to give general education on lactation issues, provide encouragement and empowerment, and provide basic information. When you get into more than this, giving specific advice for an individual situation, then you have moved into the professional/client relationship and explicit rules apply regarding confidentiality and liability for the advice you give.

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KEEP
CALM
AND
GOOD
LUCK!

Lactation Education Resources
Specialists in online lactation support training

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Featured Course : Breastmilk Storage and Handling

This course highlights human milk storage and handling primarily in a hospital setting. Select benefits and risks are reviewed.

Instructor: Valerie Goodman RN IBCLC

Cost \$15.00. 1 CERP, 1 Nursing Contact Hour and 1 CPE Learn more by [clicking here](#).

Global Health Media



Global Health Media offers videos to train maternal child health care workers including titles on breast-feeding, cup feeding, expressing colostrum and many more. Suitable for in international audience.

<https://globalhealthmedia.org/>

Congratulations Jill!!



Jill Marion from Virginia Hospital Center in Arlington VA completed her 500 hour clinical internship on March 1!

Training for the Baby Friendly Hospital Initiative

*Lactation Education Resources
offers online training for
hospitals seeking BFHI designation.*

EASY TO USE Each lesson is recorded in webcast format so the learner sees the power point slides and hears the speaker's voice. Studies on comprehension and retention of new information show that both audio and visual components are most effective. Our lessons contain both and are rich with photos, graphics and links to web resources.

FLEXIBLE The webinar format allows access to the training program 24/7/365. Each lesson is 20-45 minutes in length so students can access the materials when they have a short window of time, or can do several lessons when they have a longer period of time to devote to it.

AFFORDABLE Unlimited usage contracts are available for large hospitals or hospital systems.



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Virtual Lactation Consults

Continued from pg 1

If you are considering adding virtual consultations to expand your existing services or develop a new service, consider these points:

Can you protect confidentiality?

To receive images and stories about breastfeeding, you need a secure platform. Email and web communications are not necessarily secure. However, there are new and innovative platforms being developed that are great resources for health care providers. Research HIPAA compliant, encrypted platforms that provide secure text and video interactions. Find the one that best fits your needs and budget to allow for ease of mind and protection of your clients' privacy.

Do you have permission?

Start with a permission form that can be completed online. This is essential BEFORE you begin the conversation. Verbal consent will not hold up in a court of law (it's necessary to plan for the worst-case scenario).

Are you qualified?

A strong background in working in a clinical setting is essential to make sure you ask all the right questions and listen "between the lines" for your client's meaning (verbally or in writing). Because you don't have many of the usual visual and auditory cues that you can observe in a one-on-one setting, you need to have your "radar" working over-time. It is easy to misinterpret someone's description of the situation. The parent may not know the right words to fully describe the current situation.

If you are a new lactation consultant, and are having difficulty finding a place of employment, this may seem like the perfect "job" for you. However, remote consultations add a level of difficulty that make them a challenge for new consultants. Consider getting some more hands on experience before undertaking virtual consultations. Or at the very least, get an experienced consultant to be back-up for you who can provide guidance, mentorship and consultation for complex situations.

How can you "see" your client?

There are ways to actually see what is going from something as simple as a picture taken with a smart phone, skype camera or a webcam.

- A picture of a sore nipple to determine severity
- A picture of breasts to determine shape
- A picture of the baby breastfeeding to check positioning
- A picture of the latch to determine correct attachment
- A picture of the baby's mouth to check for tongue tie

These images will help a lot, but all need to be accompanied by instructions to the parent for further assessment to augment what you see on the images.

Provide instructions

Give instructions to the mother to resolve the situation. If it is something she can do while you are talking, all the better. Then she can give you live feedback on how it is working. For example, instructions on hand expression can be very helpful. Is she expressing milk? Or showing adjustments in positioning? Have her send a follow up picture and feedback on how it feels. Real time feedback can be invaluable.

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Virtual Lactation Consults

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You may send her a link for an instructional video. For example, hand expression <https://vimeo.com/65196007>
The mother can watch the video and hand express simultaneously to “watch and do”.

A video for latch-on is available at Stanford University.

<https://med.stanford.edu/newborns/professional-education/breastfeeding/a-perfect-latch.html>

There are many videos on YouTube that could be helpful, just be sure to preview them so you know they are accurate and reflect your clinical recommendations.

Keep records

Just as you would for an in-person consult, you need to keep notes of your assessment, evaluation and recommendations. And just as you would for a in-person consult, send a copy of your report to the responsible primary health care provider afterward.

Provide written instructions

Provide instructions to the mother specific to what you talked about so that she can access it and have it handy for the next several feedings or days. This could be a secure email or a form you complete to attach to an email.

General information related to the issue is a good idea too. The handouts provided for free by Lactation Education Resources are a handy way to do this. There are a wide variety of subjects, and many in different languages.

<https://www.lactationtraining.com/resources/educational-materials/handouts-parents>

Links to websites (that you trust) are also a good idea.

Kellymom is a popular and reliable website covering a wide range of topics. <https://kellymom.com/>

La Leche League has resources in several languages as well. <https://www.llli.org/breastfeeding-info/>

There is a lot of mis-information on the internet, as well as websites provided by, or allowing advertising from, non-breastfeeding supportive sources.

Provide follow-up

In addition to the virtual follow-up you will do, you will want to provide some local resources as well. Suggest a local hospital breastfeeding support or a local childbirth educator.

La Leche League <https://www.llli.org/get-help/Breastfeeding-USA> <https://breastfeedingusa.org/>

To learn more about the use of Social Media and remote consultations to reach breastfeeding mothers, you might be interested in the class by Amber McCann and Jeanette McCulloch, social media mavens, at <https://goo.gl/tNxWx7>

How will you be paid?

Most services currently being offered are client-paid. This means setting up a secure on-line credit card payment system. Some organizations have set up contracts with state or county agencies to cover the cost of providing telelactation services.

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Information for breastfeeding families

Breastmilk Over-supply



Do you feel like you have more milk than your baby can drink? Does your baby have frequent, green, loose stools? Does he gain weight faster than average? Does he appear to be in pain or pass excessive gas? That is breastmilk over-supply.

Or does your baby gulp and sputter during feedings, pull off the nipple choking, arch or become agitated while feeding? This is an over-active let-down reflex.

Reduce breastmilk supply

- ✓ Sage or jasmine tea. Begin with ½ cup tea daily and increase gradually until results are seen
- ✓ Peppermint tea 2-4 cups per day until results are seen
- ✓ Peppermint candies (Altoids Starlight mints, York Peppermint Patties, etc)
- ✓ Discontinue any pumping if possible or if necessary pump only to relieve fullness, not to empty the breast
- ✓ Breastfeed on one breast per feeding, alternating breasts
- ✓ Apply cabbage treatment 2-3 times per day for 15-30 minutes for 1-2 days or until breasts soften. (avoid if allergic to sulfa or a rash develops)
 - Wash chilled green cabbage leaves
 - Score the surface to release juices
 - Wrap leaves around breast; your bra will hold them in place
 - Wear for 20-30 minutes 2-3 times per day
- ✓ Take birth control pills for 4-6 days in resistant cases (consult with your healthcare provider)
- ✓ Take Vitamin B₆ (pyridoxine) 600 mg per day in resistant cases (consult with your healthcare provider)
- ✓ **Discontinue treatment as soon as you see your milk supply begin to decrease!**

Control the let-down reflex

- ✓ Position your baby in upright position (straddle hold or sitting football hold) while leaning back



- ✓ Use Australian hold (mother lying on back with baby positioned on top)
- ✓ Elicit let-down before putting baby to breast with hand simulation or breast pump for 2-3 minutes
- ✓ Compress your breast firmly with your fingers on top and bottom. This compresses about ½ of your milk ducts. Release after the first burst of milk is over.
- ✓ Interrupt feeding to burp baby frequently

Lactation Education Resources 2016. This handout may be freely duplicated. Please be aware that the information provided is intended solely for general educational and informational purposes only. It is neither intended nor implied to be a substitute for professional medical advice. Always seek the advice of your healthcare provider for any questions you may have regarding your or your infant's medical condition. Never disregard professional medical advice or delay in seeking it because of something you have received in this information.



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*Lactation Management Training:
From Novice to Expert*

Contact us!

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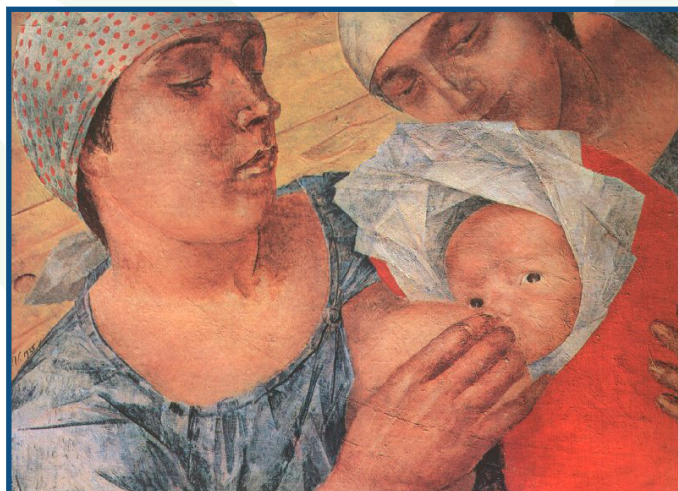
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**Want to be a LC but not sure where to start?
These YouTube videos will help!**

IBLCE Overview

https://youtu.be/90nhHBTb_ME

Pathway 1

<https://youtu.be/oUV1dtpa97Y>

Pathway 3

<https://youtu.be/eOT1AEcj8x4>

Internships

<https://youtu.be/N3hWU4QUrDQ>