

# Bottle and Formula Feeding:

## A Guide for Healthcare Professionals



**STEP FIVE:**  
**SHOW MOTHERS HOW TO BREASTFEED AND  
HOW TO MAINTAIN LACTATION, EVEN IF THEY  
ARE SEPARATED FROM THEIR INFANTS.**



*Every family deserves excellent care. Hospitals can support families who plan to bottle feed and/or formula feed by instructing them in best-practices for bottle feeding their infants. Each family should receive individual education that is customized to their personal feeding goals.*

### Safe Bottle Feeding

Bottle feeding can inadvertently be done unsafely. As a healthcare provider, you play a crucial role in teaching caregivers how to safely feed their babies.

#### Things to remember:

- For breastfed infants, bottle nipples should be avoided until breastfeeding is well established, typically 3–4 weeks. Infants can be fed using a cup, spoon, supplemental nursing system, etc.
- Hold the baby upright and support their head and neck with your hand rather than the crook of your arm. Support the head so that it is in straight alignment with the body to facilitate full swallows (avoiding choking). Minimize the chance for air being swallowed by tilting the bottle and allowing the milk to fill the end of the nipple before allowing the baby to latch on.
- Practice paced feeding by feeding a small amount, then remove the bottle to assess if the baby is satisfied, then resume as needed. This allows infants to take the frequent rests they need. Paced bottle feeding helps control the flow of milk for the baby (reducing their stress) and ensures appropriate volume intake.
- Create a pause between spurts of sucking by tilting the bottle down so that milk is no longer in the nipple or remove the nipple for a break. Before removing the nipple, twist it to warn the baby that the nipple is coming out. You can keep the nipple against baby's cheek, so they know it is still available.
- Be careful not to force feed the baby and take appropriate precautions not to overfeed. Doing so can override an infant's natural satiety cue, causing the volume of the feed to be too much. Overfeeding can cause gastric discomfort or irritation, possibly resulting in vomiting. Teach families to feed according to infant hunger and satiety cues. When bottle feeding, pause often and watch for fullness cues.
- If a newborn is sleepy and not waking for feeds, the family should be instructed to wake the baby and feed. Some newborns are very sleepy and may need extra support.
- Recommend a slow flow silicone nipple; avoid rubber nipples as these can leak nitrosamine and break down faster.
- Recommend BPA-free, PVC-free bottles.
- Families that are being discharged from the hospital feeding formula should receive individualized education on the following topics: hand hygiene, equipment hygiene, proper measurement of formula and water, handling and storage, and appropriate feeding methods.

CONTINUED ON REVERSE...

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### Safe Formula Preparation

In most cases, it is safe to mix powdered formula according to the directions on the can. However, powdered infant formulas are not sterile. They may contain a rare bacteria (Cronobacter) that can cause serious illness and death in newborns. If the baby is younger than 3 months, was born prematurely, or has a weakened immune system, families may want to take extra precautions by boiling and then cooling the water used (see below).

Instruct families using powdered infant formula accordingly:

- Check expiration date: never used expired formula.
- Always start with clean hands and sanitized bottles and nipples.
- Use water from safe source to mix powdered infant formula. If families are not sure if tap water is safe they should contact their local health department.
- Use the exact amount of water as instructed on the container. Always measure the water first and then add the powder. Adding more or less formula powder than instructed could cause harm.
- Keep powdered formula lids and scoops clean and close containers of infant formula or bottled water as soon as possible.
- Boil water and let it cool to no less than 158° F/70°C before pouring it into a clean and sterilized feeding cup with a lid, or bottle. Water should cool to this temperature within 30 minutes after boiling.
- Add formula, and carefully shake, rather than stir the bottle.
- Cool the formula to ensure it is not too hot by running the prepared, capped bottle under cool water or placing it into an ice bath, taking care to keep the cooling water from getting into the bottle or on the nipple.
- Test the temperature by shaking a few drops on the wrist.
- Formula should be used within 2 hours of preparation. The remaining unused formula should be discarded.
- If not planning to use the prepared infant formula right away, refrigerate immediately and use it within 24 hours.

**TIP: Remember to recommend direct breastfeeding as the first choice unless it is clinically contraindicated. Start the discussion with, “What have you heard about breastfeeding?”, and address concerns raised. Let parents know that support is available for them—regardless of feeding decisions. Always document the education provided, including education about the possible consequences to the baby’s health or to the success of breastfeeding when introducing breastmilk substitutes.**

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