Breastfeeding Assessment Score

score	definition	action
A	Offered the breast, not interested sleepy	Full top up* (preferably with EBM)
B	Interest in feeding, however does not latch	Full top up* (preferably with EBM)
C	Latches onto the breast, however comes on and off or falls asleep	Full top up* (preferably with EBM)
D	Latches, however sucking is uncoordinated or has frequent long pauses.	Half top up* *Consider not* topping up if mother is available for another breastfeed. The baby may wake earlier
E	Latches well **, long slow rhythmical sucking and swallowing***—short feed < 10 min	Half top up* **Do Not** top up if mother is available for next feed
F	Latches well**, long slow rhythmical sucking and swallowing***—long feed > 10 min	No top up

*If a top up is required it is preferable for it to be expressed breast milk and also to continue to allow the baby to nuzzle at the breast.

Effective Latch: chin indents the breast, nose slightly clear of breast (head tipped back slightly), wide open mouth, lips flanged back, rounded cheeks, if can see any areola -seen above baby's top lip but not below bottom lip;

***Rhythmic sucking & swallowing**: short period of rapid sucking followed then onwards by slower deeper jaw movements with a suck:swallow ratio of 1 /2:1for bursts of about 15- 30 sucks & audible swallows before a brief pause. Baby remains attached to the breast throughout these suck/swallow/breathe bursts, until satiated.

Adapted from a scale used by Queen Charlotte's Hospital SCBU, London.

Full top up usually 150ml/kg/day up to 180ml/kg/day