A Working Mom’s Breastfeeding Support Guide

Alaska DHSS, Section of Women’s, Children’s and Family Health | July 2017
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About this Toolkit

This toolkit is designed as a resource for women who intend to continue feeding their infants breastmilk while working. Evidence continues to mount regarding the benefits of breastfeeding for both women and their infants. The American College of Obstetricians and Gynecologists (ACOG) recommends exclusive breastfeeding for the first 6 months of life, with continued breastfeeding as complementary foods are introduced through the infant’s first year of life, or longer as mutually desired by the woman and her infant.

According to Status of Women in The States Among all states, Alaska has the highest rate of women’s labor force participation; 68.3 percent of women aged 16 and older work. This is why this toolkit is important; if companies provide appropriate accommodations for a majority of their labor force then they will see a decrease in absenteeism and an increase in hard work.

As seen below, Alaska is ahead of the U.S breastfeeding rates in all 5 categories; however there is a distinct decrease in the amount of women who continue to breastfeed after 6 months. With the help of this toolkit and the right mindset we hope to change these statistics. This toolkit includes helpful information such as stories from fellow mothers, a list of questions to ask your childcare providers, FAQ’s, door hangers to use while pumping and so much more.

**Breastfeeding Rates U.S. vs. Alaska**

<table>
<thead>
<tr>
<th>State</th>
<th>Ever Breastfed</th>
<th>Breastfeeding at 6 months</th>
<th>Breastfeeding at 12 months</th>
<th>Exclusive breastfeeding at 3 months</th>
<th>Exclusive Breastfeeding at 6 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S.</td>
<td>81.1</td>
<td>51.8</td>
<td>30.7</td>
<td>44.4</td>
<td>22.3</td>
</tr>
<tr>
<td>AK</td>
<td>90.8</td>
<td>62.1</td>
<td>38.4</td>
<td>55.3</td>
<td>27.8</td>
</tr>
</tbody>
</table>

*Data from 2016 Centers for Disease Control and Prevention (CDC) breastfeeding report card*
This is a moment that needs to be celebrated! Not every mom continues breastfeeding while working. The fact that you are reading this guide means this is something you intend to do. Continuing to breastfeed after going back to work means that your baby will be:

- Protected from infections and illnesses that include diarrhea, ear infections and pneumonia.
- Less likely to develop asthma
- Less likely to become obese
- At a reduced risk of sudden infant death syndrome (SIDS)

While you are taking care of everything do not forget to take care of yourself!

1) Get Plenty of Rest. Being a mom and working can be tiring, no matter how you feed your baby. Rest when you can, sleep when the baby is resting, and don’t be afraid to ask family members for help when it comes on to household tasks.

2) Talk with Other Breastfeeding Moms. Seek out other nursing mothers at work or in your neighborhood to share experiences and gain support.

3) Minimize Leaking. Wear washable or disposable nursing pads inside your bra to help keep milk from leaking onto your clothes. **Expressing milk every 2-3 hours** will also help. Wear clothes in layers so if you accidentally leak, you’ll have a sweater or jacket to wear over your blouse. Cross your arms firmly over your chest if you feel the milk starting to flow when you aren’t ready for it.

4) Eat Nutritious Foods. Eating healthy foods will help you feel better about yourself and give you extra energy for handling the tasks of working and motherhood. See “Snacks.”
Know Your Rights

Current Laws

- Federal law- Section 4207 of Patient Protection and Affordable Care Act states that employers MUST provide breastfeeding women with private space (not a bathroom) and time to express milk at work, for 1 year after the child’s birth.

- The Alaska Statute 29.25.080 states that a municipality may not enact an ordinance that prohibits or restricts a woman breastfeeding a child in a public or private location where the woman and child are otherwise authorized to be. In a municipal ordinance, "lewd conduct," "lewd touching," "immoral conduct," and similar terms do not include the act of a woman breast-feeding a child.

- 2014 Alaska House Concurrent Resolution 18 encourages hospitals and birthing facilities in the state to participate in the Baby-Friendly Hospital Initiative and to support breastfeeding.

You can learn more about these laws at:

- Breastfeeding Law: Know your legal rights (http://breastfeedinglaw.com/)
- United States Breastfeeding committee (http://www.usbreastfeeding.org/workplace-law)
- Alaska House Majority Coalition (http://akhouse.org/page/4/?bill=HB26)
It is important to know that your insurance coverage may include the **rental or purchase of a dual electric breast pump or a manual breast pump at no cost to you**. This means you do not have to pay a copayment, co-insurance, or a deductible. If you’re eligible, you’ll also be fully covered for breastfeeding support. If your coverage does not mention anything about breast pump you can write your insurance company to ask why you are not covered (See pg. 7).

WIC also provides **electric breast pumps for loan and free manual pumps**. A counselor will determine which pump is right for you. Electric pumps are available on a priority basis and stock is limited.

For more information contact your insurance provider or visit:

- For Blue Cross Blue Shield general information on electric and manual pump coverage visit: [http://www.bluecrossma.com/bluelinks-for-employers/whats-new/plan-updates/breast-pumps.html](http://www.bluecrossma.com/bluelinks-for-employers/whats-new/plan-updates/breast-pumps.html)

- For electronic pump rental information and rental locations visit: [http://dhss.alaska.gov/dpa/Pages/nutri/wic/breastfeeding/default.aspx](http://dhss.alaska.gov/dpa/Pages/nutri/wic/breastfeeding/default.aspx)
Sample Letter
No Coverage Policy for Breast Pump

To Whom It May Concern:

I am enrolled in a [INSURANCE COMPANY NAME] plan, policy number [POLICY NUMBER]. I recently tried to purchase a breast pump through my health insurance. The Patient Protection and Affordable Care Act requires that my insurance coverage of this preventive service be with no cost-sharing. However, when I contacted [INSURANCE COMPANY NAME] about the coverage, I was told I could not get coverage of [BREAST PUMP REQUESTED].

Under § 1001 of the Patient Protection and Affordable Care Act (ACA), which amends § 2713 of the Public Health Services Act, all non-grandfathered group health plans and health insurance issuers offering group or individual coverage shall provide coverage of certain preventive services for women with no cost-sharing. The list of women’s preventive services which must be covered in plan years starting after Aug. 1, 2012 includes “comprehensive lactation support and counseling and costs of renting or purchasing breastfeeding equipment for the duration of breastfeeding” (see attachment).

My health insurance plan is non-grandfathered. Thus, the plan must comply with the women’s preventive services.

[INCLUDE THIS PARAGRAPH IF YOUR PLAN DOES NOT HAVE A CLEAR PROCESS TO GET A PUMP] My health care provider has prescribed that I use [BREAST PUMP REQUESTED]. The insurance plan has not established a process for me to obtain a pump, such as through a durable medical equipment supplier, and thus it remains an over-the-counter product for the purposes of my plan. As the FAQs on the preventive services (dated February 20, 2013) state, “OTC recommended items and services must be covered without cost-sharing...when prescribed by a health care provider.” Accordingly, [INSURANCE COMPANY] must cover [BREAST PUMP REQUESTED] as required under the Affordable Care Act.

[LAST PARAGRAPH OPTIONS]
(1) I have spent [TOTAL AMOUNT] out-of-pocket on [NAME OF BREAST PUMP], despite the fact that it should have been covered. I have attached copies of receipts which document these out-of-pocket expenses. [COMPANY NAME] must rectify this situation by reimbursing me for the out-of-pocket costs I have incurred during the period it was not covered without cost-sharing. Furthermore, [COMPANY NAME] must ensure breastfeeding support and supplies, including lactation counseling are covered without cost-sharing in the future by changing any corporate policies that do not comply with the Affordable Care Act.
(2) I am prepared to order [BREAST PUMP REQUESTED] when [COMPANY NAME] assures that I have coverage without cost-sharing. I expect that [COMPANY NAME] will rectify this situation and notify me within 30 days of receipt of this letter that [BREAST PUMP REQUESTED] will be covered without cost-sharing.

Sincerely,
[YOUR SIGNATURE]

For more information visit The National Women’s Law Center at https://nwlc.org/
Preparing to Pump
At Work
Speaking With Your Supervisor

Tell your supervisor, manager, or Human Resources personnel during your pregnancy that you will need time and a space to pump breast milk when you return to work. Be ready to offer ideas on how to make it work and explain what you will need.

- Do not be afraid to talk with your supervisor about your needs. They will never know if you don’t tell them, and most are happy to support you.
- Tell your supervisor before you have the baby so there is time to make arrangements while you are away.
- Share “My Lactation and Work Plan” to discuss your needs (See pg. 11).

The chart below outlines some of the most common responses moms receive when talking to their employer and may help you consider and prepare for any concerns your employer may have.

<table>
<thead>
<tr>
<th>If your employer says...</th>
<th>Try responding with...</th>
</tr>
</thead>
<tbody>
<tr>
<td>“The bathroom is the only space available.”</td>
<td>“Breast milk is food for my baby so it shouldn’t be expressed in a bathroom, but I looked into some solutions that other companies have used that I think will work here too.” [If needed: “Finding a space that isn’t a bathroom is required by law.”]</td>
</tr>
<tr>
<td>“How am I supposed to cover your position while you are on break?”</td>
<td>“I thought through a schedule and how we could handle it. It’s actually pretty similar to how we handle other staff breaks - can I tell you what I had in mind?”</td>
</tr>
<tr>
<td>“This will be bad for business.”</td>
<td>“Actually, a lot of companies say that it’s good for business. Breastfeeding will help keep me and my baby healthy so I can do my best work.”</td>
</tr>
<tr>
<td>“Why can’t you just pump when you get home?”</td>
<td>“If I don’t pump as often as my baby eats, my supply will go down and I won’t make enough to feed her. It’s really important to me and it’s only temporary.”</td>
</tr>
<tr>
<td>“My daughter/niece/friend drank formula and she’s the smartest/fastest/healthiest kid in her class.”</td>
<td>“Lots of kids do! But this is really important to me and is recommended by the American Academy of Pediatrics. I can’t do it without your support.”</td>
</tr>
<tr>
<td>“I can’t make any promises if it gets busy.”</td>
<td>“I’m more than willing to be flexible and I know we can make this work for both of us.” [If needed: “Accommodating me is required by law.”]</td>
</tr>
</tbody>
</table>
If all else fails remind your employer that when they support breastfeeding it helps their bottom line

Research proves that workplace lactation programs/support:

- Reduce absenteeism
- Improves productivity
- Improves employee jobs satisfaction
- Improves loyalty and retention
- Enhance company image in the eyes of the community
- Reduce short term and long term health costs (mothers and babies are healthier)

For every dollar invested in basic lactation programs, employers see a $2 return on investment (U.S. Dept. of Health and Human Services)

Arguments for Breastfeeding in the Military

- Parental absenteeism from the workplace is 3 times higher for formula fed infants than for breastfed infants – this impacts Mission Readiness
- Mothers who are breastfeeding have a quicker uterine recovery and return to pre-pregnant weight quicker – this impacts Mission Readiness
- Workplaces that provide lactation support experience less turnover and lower losses of highly skilled and trained personnel – this impacts Mission Readiness and Retention
- Offering lactation support increases personnel loyalty, morale and satisfaction this impacts Retention
- Direct economic savings for military personnel by not purchasing infant formula

For more information visit www.breastfeedingincombatboots.com

I was active duty military at the time and thankfully I was protected within our operating instructions. I had a nice room and I was able to pump 15 months (enough for mine and other babies!) but the support wasn’t there. I was constantly accused of pumping to get out of work, taking hour long pumping, or just plain old “abusing the privilege”. None of it was true but it added to my stress and I cried a lot. Thankfully I’m a SAHM (Stay at home mom) now so I won’t have to deal with it. It could’ve been so much worse but it could’ve been better too. My main advice would be to keep all your pump parts in a big Ziploc in the fridge so you don’t have to bring multiplies OR wash them. It saved so much time!

– Olivia Channell
My Work Place Lactation Plan

When I return to work from my maternity leave, I want to be a good employee while also providing for my new baby. My health care providers have told me that breastfeeding my baby is one of the most important things I can do for our health. A clean, private space and a little extra break time to express milk for my baby during the workday will allow me to follow doctor’s advice and provide milk for my baby while we are apart. This helps our company by lowering health care costs and absenteeism. Providing space and time for nursing breaks is also the law in the U.S. and New York.

Your support is important to me! These simple, temporary accommodations will make it easier for me to give my best to my baby and my company.

RETURN TO WORK I would like to return to work gradually, if possible, so my baby and I can adjust to being apart. Some options we can discuss:
- Working part-time for awhile
- Working from home
- Working a flexible Schedule (ex: taking Wednesdays off)
- Other ideas:

TIME I will need to express my milk every 2-3 hours for around 20 minutes each time, not counting time to get to the lactation area. I will use my usual breaks and my meal period. This accommodation is valuable to me. I will not abuse this time, and if more time than my usual break is needed, I am willing to:
- Come in early to make up time
- Take unpaid time
- Stay later in the day to make up time
- Other ideas:

PLACE I will need a clean, private area where I can safely express my milk during these nursing breaks. A bathroom is not an appropriate place and is not allowed by law. The area should also be near my work station, and ideally near a sink and refrigerator. The space needs to be large enough for a chair and a flat surface for the pump. I will/will not need electricity for my breast pump. Some options we can discuss:
- The private office of a manager or supervisor
- A small area not in use much that can be secured for privacy
- The private office of a coworker
- A conference or meeting room
- Other ideas:

SUPPORT Support from my supervisor and coworkers will help me feel relaxed and confident. Research has shown this makes milk expression more efficient, and increases employee loyalty, retention and team building.

EDUCATION I would like to participate in any breastfeeding or new parent classes or support group meetings held at my workplace. If my company contracts with a lactation consultant, I would like to use those services during my maternity leave and once I am back at work.

Signature of Employer: Date:
Signature of Employee: Date:
The Plan

Once you have informed your supervisor that you plan on breastfeeding when you give birth what should you do next?

During Maternity Leave you should:

- Breastfeed exclusively before you go back to work so your body will build a strong foundation for making milk.
- Breastfeed whenever your baby shows feeding cues, or at least 8-12 times every 24 hours.
- Do not use bottles or pacifiers during the first month so baby becomes a pro at breastfeeding.
- Try to take at least 6 weeks maternity leave, if possible, so you will fully recover from childbirth and you and your baby get breastfeeding off to a good start.
- If you must return to work sooner, call your WIC peer counselor or a lactation consultant for ways to keep your milk production strong.

Before Returning to Work:

- Ask the WIC Office, lactation consultant, or healthcare provider whether you need a breast pump, and which kind is best for you.
- Practice pumping your breast milk during the morning or other times when your breasts feel fuller.
- Remember that pumping takes practice. Don’t be surprised if you only get a little the first few times. Babies are usually much better at removing milk.
- Store any milk you collect in small quantities (1-2 ounces). Baby may not take a large amount at one feeding, and your milk is too valuable to waste!
Preparing Baby

*Wait until about 2 weeks before you go back to work to help your baby learn to drink from a bottle. Some ideas to try:*

- Only put a small amount of breast milk (around 1 oz.) in the bottle. These are practice tries right now.
- Offer it when baby is not super hungry or upset. Some babies are more eager to try something new if they are a little sleepy.
- Ask someone else to offer the bottle. Babies often prefer to nurse when they are with mom.
- Don’t force baby to accept a bottle. If the baby refuses, try again later.
- Some babies prefer a cup, dropper, or spoon. Some babies “reverse cycle feed.” This means they reverse the times they eat by breastfeeding more when mom is at home and may not take much when mom is away. This is normal, as long as babies get 8-12 feedings in a 24-hour period.

Getting Support from Family

- Be sure to let family members know how important it is that you be supported in your decision to breastfeed.
- Connect with friends who are also breastfeeding to get support, or join a mother’s group in your community.

“I would have started pumping sooner before my maternity leave ended to have a better milk stash. I was told to start two weeks before I went back. That wasn’t enough time. My body makes just enough, no extra really. You hope for the best when pumping at work, but it takes couple tries to get comfortable. So you don’t yield a meal necessarily. Don’t give up. Focus on whatever end goal you have.”

– Heather Ball (La Leche League USA)
The Pumping Bag Checklist

- **The Pump**

- **Pump Flanges**
  This very important part is connected to the pump tubes. No pumping without flanges, so do not forget them!

- **Extra Membranes**
  You might be surprised to learn how much of a difference changing the membranes make in the strength of your pump’s suction. If you feel you aren’t pumping enough or your pump is losing power, try changing the membrane.

- **Backup Battery Pack and AC Adapter**

- **Milk Collection Bottles with Lids**
  You will need bottles to pump into.

- **Ice Pack and Cooler**
  You will need a small cooler and ice packs to store and transfer your milk.

- **A Sharpie**
  To write the date on your milk collection bags.

- **1-Gallon Ziploc Bag**
  Put the pump parts (that touches milk – flanges, collection bottles, etc) into a gallon Ziploc bag and pop it into the refrigerator. The milk on them stays fresh all day so no need to wash them. Just take them home at the end of the day and wash them then.

- **Steam Bags**
  If you don’t have access to a refrigerator to store your pump parts in, then another good option is using steam bags. You simply rinse the parts; put them in the steam bag, pop in the microwave and done! Great and fast option when you can’t wash or store your parts.

- **Extra breast pad**
  Especially in the beginning, bringing extra breast pads is a must. You might leak and will need a few extra pairs.

- **Hand Sanitizer**
  For those occasions when you do not have access to a sink.

- **Extra Blouse**

- **Snacks** - See page 15 for some helpful ideas
### Pumping Snacks

Choose One From Each Group

#### Group 1: Foods High In Protein

<table>
<thead>
<tr>
<th>Cheese Cubes or Slices</th>
<th>Yogurt Dip</th>
<th>Peanut Butter</th>
<th>Hummus</th>
<th>Glass of low-fat milk</th>
<th>Nuts and seeds:</th>
<th>Deli meat slices:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>o Almonds</td>
<td>o Turkey</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>o Walnuts</td>
<td>o Chicken</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>o Sunflower seeds</td>
<td>o Low sodium ham</td>
</tr>
</tbody>
</table>

#### Group 2: Foods with Grains

<table>
<thead>
<tr>
<th>Whole grain crackers</th>
<th>Pretzel sticks</th>
<th>Sliced pita</th>
<th>Wholegrain rice cakes</th>
<th>Whole grain flour or corn tortilla, whole grain bread</th>
<th>Mixed finger-food cereal in a bag:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>o Wheat Chex</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>o Toasted Oats</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>o Mini wheats</td>
</tr>
</tbody>
</table>

#### Group 3: Fruits and Vegetables

| Any combination of prepared vegetables: |
| o Celery sticks |
| o Carrot sticks |
| o Pepper slices |
| o Cucumber slices |
| o Tomato slices |
| o Radishes |
| o Olives |

| Any combination of prepared fruit: |
| o Apple slices |
| o Peach slices |
| o Cut-up cantaloupe |
| o Cut-up watermelon |
| o Orange slices |
| o Hulled strawberries |
| o Banana or plantain slices |

| Dried fruits with no added sugar: |
| o Raisins |
| o Apricots |
| o Craisins |
| o Prunes |
| o Plantains |

| Any combination of canned, frozen, soaked or dried beans: |
| o Kidney beans |
| o Pinto beans |
| o Chickpeas |
| o Lima beans |
| o Soy beans |

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Organic Oasis Restaurant and Juice Bar offers free wheatgrass shots to pregnant women and breastfeeding moms!
## Sample Schedules

### Job with Afternoon or Evening Shift (ex: Retail)

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morning</td>
<td>Feed baby at home</td>
</tr>
<tr>
<td>12:30 p.m.</td>
<td>Leave baby with childcare provider; feed baby before leaving</td>
</tr>
<tr>
<td>1:00 p.m.</td>
<td>Arrive at work</td>
</tr>
<tr>
<td>3:00-3:20 p.m.</td>
<td>Break – express milk (eat a nutritious snack)</td>
</tr>
<tr>
<td>6:00-6:30 p.m.</td>
<td>Meal break – express milk while eating</td>
</tr>
<tr>
<td>8:30-8:50 p.m.</td>
<td>Break – express milk (eat a nutritious snack)</td>
</tr>
<tr>
<td>10:00 p.m.</td>
<td>End work</td>
</tr>
</tbody>
</table>

**Breastfeed baby at childcare provider before going home**

### Job with split shifts (ex: Restaurant)

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>10:30 a.m.</td>
<td>Leave baby with childcare provider; feed baby before leaving</td>
</tr>
<tr>
<td>11:00 a.m.</td>
<td>Arrive at work</td>
</tr>
<tr>
<td>2:00 p.m.</td>
<td>Leave work; feed baby at childcare provider before going home</td>
</tr>
<tr>
<td>4:00 p.m.</td>
<td>Feed baby at home</td>
</tr>
<tr>
<td>4:30 p.m.</td>
<td>Return to work</td>
</tr>
<tr>
<td>7:00-7:20 p.m.</td>
<td>Break – express milk (eat a nutritious snack)</td>
</tr>
<tr>
<td>10:00 p.m.</td>
<td>End work</td>
</tr>
</tbody>
</table>

**Breastfeed baby at childcare provider before going home**

### Typical Day Job

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:15 a.m.</td>
<td>Leave baby with childcare provider; feed baby before leaving</td>
</tr>
<tr>
<td>8:00 a.m.</td>
<td>Arrive at work</td>
</tr>
<tr>
<td>10:00-10:20 a.m.</td>
<td>Break – express milk (eat a nutritious snack)</td>
</tr>
<tr>
<td>12:00-12:30 p.m.</td>
<td>Lunch break – express milk while eating</td>
</tr>
<tr>
<td>2:30-2:50 p.m.</td>
<td>Break – express milk (eat a nutritious snack)</td>
</tr>
<tr>
<td>5:00 p.m.</td>
<td>End work</td>
</tr>
</tbody>
</table>

**Breastfeed baby at childcare provider before going home**
Pumping At Work

Before you pump, wash your hands with soap and water. If soap and water are not available, use an alcohol-based hand sanitizer that has at least 60% alcohol. Make sure the area where you are pumping and your pump parts and bottles are clean. Breasts and nipples do not need to be washed before pumping.

If you need help to get your milk to start flowing without your baby there, you can:

- Think about the things you love about your baby.
- Bring a photo or a blanket that has your baby's scent on it.
- Apply a warm, moist cloth to your breasts.
- Gently massage your breasts.
- Visualize the milk flowing down.
- Read a book or watch a movie on your phone.

Relaxation is key when trying to pump at work. I struggled with this for a while, as I work in a stressful environment that isn’t breastfeeding friendly (a prison). What helped me relax I found was reading a book. I brought books to work with me and would read during my pump breaks and I found that when doing this I was much more relaxed. Having photos and videos of baby while pumping is good too. I wasn’t able to have my phone with me while pumping due to security so I emailed pics to myself to keep on my desktop to look at.

- Tonya Ann (La Leche League of Anchorage)
Storing Your Milk

Rule of 5’s

- **5 hours at room temperature.** If the room is very warm (more than 85 degrees F/29 degrees C), 3-4 hours seems to be a safer time range.

- **5 days in the fridge** (store milk in the back of the refrigerator where the temperature is the coldest.)

- **5 months in a regular freezer** (the separated compartment in a typical fridge/freezer unit) According to the CDC, milk frozen for longer than the recommended time ranges is safe, but may be lower in quality as some of the fats in the milk break down.

Babies will not drink the milk if it has gone bad!

Breastmilk Storage Guidelines

<table>
<thead>
<tr>
<th>Where</th>
<th>Temperature</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>At room temperature</td>
<td>66-78°F (19-26°C)</td>
<td>4 hours (ideal) up to 6 hours (acceptable)*</td>
</tr>
<tr>
<td>In a refrigerator</td>
<td>&lt;39°F (&lt;4°C)</td>
<td>72 hours (ideal) up to 8 days (acceptable)**</td>
</tr>
<tr>
<td>In a freezer</td>
<td>0°F to -4°F (-18 to -20°C)</td>
<td>3 months (ideal) up to 12 months (acceptable)</td>
</tr>
</tbody>
</table>

*The preference is to refrigerate or chill milk right after it is expressed

**Eight days is acceptable, ideally collected in a very clean and careful way
Other Storage Tips

- Containers or bags should not be filled to the top – leave at least one inch of space to allow the milk to expand as it freezes.

- Mark the date on the storage container. Also include your baby’s name on the label if your baby is in a group daycare setting.

- If you are pumping and storing your breastmilk at work in a common refrigerator, make sure you label it with your name or put it in a bag (also marked) so it is not mistaken for regular milk.

- Keep frozen breastmilk in the middle of the freezer where the temperature is most consistent. The temperature on the sides can fluctuate and you do not want milk to partially thaw because it cannot be refrozen.

**Mayo Clinic states that freshly expressed breast milk can be stored in the back of a deep freezer for up to 12 months. However, using the frozen milk within six months is optimal.**
Cleaning Your Pump

Cleaning your pump is extremely important! Here is some information on how from the CDC

How to Keep Your Breast Pump Kit Clean

Providing breast milk is one of the best things you can do for your baby’s health and development. Pumping your milk is one way to provide breast milk to your baby. Keeping the parts of your pump clean is critical, because germs can grow quickly in breast milk or breast milk residue that remains on pump parts. Following these steps can help prevent contamination and protect your baby from infection. If your baby was born prematurely or has other health concerns, your baby’s health care providers may have more recommendations for pumping breast milk safely.

**BEFORE EVERY USE**

- **Wash hands** with soap and water.
- **Inspect and assemble** clean pump kit. If your tubing is moldy, discard and replace immediately.
- **Clean** pump dials, power switch, and countertop with disinfectant wipes, especially if using a shared pump.

**AFTER EVERY USE**

- **Store milk safely.** Cap milk collection bottle or seal milk collection bag, label with date and time, and immediately place in a refrigerator, freezer, or cooler bag with ice packs.
- **Clean pumping area,** especially if using a shared pump. Clean the dials, power switch, and countertop with disinfectant wipes.
- **Take apart** breast pump tubing and separate all parts that come in contact with breast/breast milk.
- **Rinse** breast pump parts that come into contact with breast/breast milk by holding under running water to remove remaining milk. Do not place parts in sink to rinse.
- **Clean pump parts** that come into contact with breast/breast milk as soon as possible after pumping. You can clean your pump parts in a dishwasher or by hand in a wash basin used only for cleaning the pump kit and infant feeding items.

Follow the cleaning steps given on the next page.
Clean Pump Kit

CLEAN BY HAND

Place pump parts in a clean wash basin used only for infant feeding items. Do not place pump parts directly in the sink!

Add soap and hot water to basin.

Scrub items using a clean brush used only for infant feeding items.

Rinse by holding items under running water, or by submerging in fresh water in a separate basin.

Air-dry thoroughly. Place pump parts, wash basin, and bottle brush on a clean, unused dish towel or paper towel in an area protected from dirt and dust. Do not use a dish towel to rub or pat items dry!

Clean wash basin and bottle brush. Rinse them well and allow them to air-dry after each use. Wash them by hand or in a dishwasher at least every few days.

OR CLEAN IN DISHWASHER

Clean pump parts in a dishwasher, if they are dishwasher-safe. Be sure to place small items into a closed-top basket or mesh laundry bag. Add soap and, if possible, run the dishwasher using hot water and a heated drying cycle (or sanitizing setting).

Remove from dishwasher with clean hands. If items are not completely dry, place items on a clean, unused dish towel or paper towel to air-dry thoroughly before storing. Do not use a dish towel to rub or pat items dry!

After Cleaning

FOR EXTRA PROTECTION, SANITIZE

For extra germ removal, sanitize pump parts, wash basin, and bottle brush at least once daily after they have been cleaned. Items can be sanitized using steam, boiling water, or a dishwasher with a sanitize setting. Sanitizing is especially important if your baby is less than 3 months old, was born prematurely, or has a weakened immune system due to illness or medical treatment.

For detailed instructions on sanitizing your pump parts, visit www.cdc.gov/healthywater/hygiene/healthychildcare/infantfeeding.html

STORE SAFELY

Store dry items safely until needed. Ensure the clean pump parts, bottle brushes, and wash basins have air-dried thoroughly before storing. Items must be completely dry to help prevent germs and mold from growing. Store dry items in a clean, protected area.

Learn more about safe and healthy diapering and infant feeding habits at www.cdc.gov/healthywater/hygiene/healthychildcare.
Additional Information
Oatmeal Chocolate Chip Lactation Cookies

**Ready In** 27 minutes
**Yield** 4 ½ Dozen

**INGREDIENTS**

- 1 cup butter
- 1 cup granulated sugar
- 1 cup packed brown sugar
- 4 tbsp. water
- 2 tbsp. flax seed meal
- 2 eggs
- 1 tsp. vanilla extract
- 2 cups flour
- 1 tsp. baking soda
- 1 tsp. salt
- 3 cups thick cut oats
- 1 cup chocolate chips
- 2-4 tbsp. brewer’s yeast

**DIRECTIONS**

1. Pre-heat oven 375
2. Mix flax seed meal and water, set aside 3-5 minutes
3. Cream butter and sugar
4. Add eggs
5. Stir flax seed mix into butter mix and add vanilla extract
6. Beat until well blended
7. Sift dry ingredients (except oats and chocolate chips)
8. Add butter mix to dry ingredients
9. Stir in oats and chocolate chips
10. Drop parchment paper lined backing sheets and bake for 8-12 mins.
Child Care Providers

Thread is a helpful website to visit when trying to find child care programs that are close to home or work. Parents are encouraged to visit and interview providers before making a final decision about their child care.

Questions to Ask your Child Care Provider

1. Do you have a space for mothers to breastfeed or express their milk on site?
2. Do you have any policies in place to help breastfeeding moms/babies be successful?
3. Has your staff been trained on how to handle breast milk?
   a. Do they receive continuing education about breastfeeding?
4. Is a refrigerator available for storage of expressed milk?
   a. What are your guidelines for breast milk storage to keep it safe?
5. How do you determine when to feed a baby?
   a. Do they eat on a set schedule or does each infant have a feeding plan?
   b. Does your staff know how to identify hunger cues (besides crying)?

Find more information at: http://threadalaska.org/child-care/

It helped me to have the caregiver text me when my little one was eating so I could stay on schedule. Scheduling meetings a ways off of pumping times helped me not feel rushed. Looking at pictures of my little one while I pumped helped with the letdown. Some sort of reminder when arriving home to unload milk helps as easy to get distracted with home life once enter the door. Commend yourself (the mother) for pumping at work! It isn’t easy, but our littles benefit immensely!!!

– Calisa Schouweiler Kastning
My experience was very positive! I had a boss who was super supportive. I had my own office in the program I worked, but if I happened to be away from my program (residential therapist) and at the main office, she let me pump in her office, no matter what she was doing. If for some reason her office wasn’t available she made sure there were other private areas I could use. I pumped 3 times a day for as long as I needed, I never felt pressured to stop or be faster. It was the best experience (considering pumping was not my favorite).

- Carolyn Roberts

It’s pretty hard as a teacher if your plan time doesn’t fall at a feed time. My coworkers were very supportive and willing to sacrifice their own plan times to sub in my classroom for morning pumps. It can be done though with the right support!!! As babe got older I dropped the 9 am pump and only pumped at lunch and right after school, that was much better.

– Nicole McFadden

...I went back to work at 5 weeks, I’m a server so I couldn’t just drop what I was doing every 2 hours to pump while at work. I tried lactation shakes, cookies, brownies, eating foods that might increase my supply, but by 4 months I just couldn’t anymore. I was a single parent doing it all on my own and being a server was where I was going to make the most cash fast. It deeply saddened me to have only made it to 4 months. I would have tried to prepare myself on information before baby was born on pumping, and schedules, and my diet. I’ll be better prepared next time.

– Victoria Jane Saenz

It was hard at first but then you get the hang of things and get in a routine. Buy an electric wireless pump (I got mine through insurance for free), buy hands free pumping bra so you can have your hands to eat or browse the internet or continue work, whatever! I bring a big bag that carries it all and then a separate one for dirty parts, and bring enough parts so you don’t have to was one continuously (because that’s annoying!). My work has a fridge that I can put my milk in so bring a cooler if not. It was hard at first because everything was so new but you’ll become a pro in no time.

– Lea Cecchini
I wasn’t working but I exclusively pumped for twins for a year. Best thing that helped was setting small goals. Also the quote “never quit on a bad day” got me through the rough times. For storing milk always put the date and amount of breastmilk in each bag, the freeze flat! Massage and always empty completely to avoid getting clogs and mastitis. Hands free pumping bra is a life saver.

– Sierra Leslie

Listening to relaxing music while pumping can also help with output. My pumping location at work was, unfortunately an office with no lock. I ended up putting a sticky note on the door stating what I was doing so people wouldn’t come in.

– Jill Derrick

Drink lots of water! Also, be easy on yourself and try not to obsess over how much you are pumping. Do your best and that is all you have. The more you stress the harder the pumping will be. The hands free nursing bra and the massaging until completely empty were big for me! I kept my pumping equipment in a black bag in the fridge at work so I didn’t have to clean it during the day. Then I would take it home and clean it at night. Also, I learned quickly to put my milk in whatever container I wanted to store it in while it was fresh. It is hard to portion it out or transfer it once the fat had settled out. I had a sign for my office that said “Mamma at work” with a milk jug on it, so my coworkers didn’t knock while I was pumping.

– Kim King Jones
Frequently Asked Questions

Does the break time have to be paid break time?
Employers are not required under the FLSA to compensate nursing mothers for breaks taken for the purpose of expressing milk. However, where employers already provide compensated breaks, an employee who uses that break time to express milk must be compensated in the same way that other employees are compensated for break time. In addition, the FLSA’s general requirement that the employee must be completely relieved from duty or else the time must be compensated as work time applies.

Do employers need to create a permanent, dedicated space for use by nursing mother employees?
No. A space temporarily created or converted into a space for expressing milk or made available when needed by the nursing mother is sufficient provided that the space is shielded from view, and free from any intrusion from co-workers and the public.

If the only space available at a work site is a bathroom, can employers require employees to express breast milk there?
No. The statute specifically states that the space provided for employees to express breast milk cannot be a bathroom.

Are used pumps OK?
Doctors, lactation consultants, and pump manufacturers will tell you that it's not a good idea to borrow or buy someone else's used pump. This is because bacteria and viruses from the previous owner can get trapped inside the pump. They are potentially hazardous to your baby's health, even with thorough and repeated sterilization and cleaning.

My frozen breast milk changed color. Is this OK?
Breast milk that's been frozen or refrigerated may look a little different from fresh breast milk, but that doesn't mean it has gone bad. It's normal for early breast milk to look kind of orange and the mature milk to look slightly blue, yellow, or brown when refrigerated or frozen. And it may separate into a creamy looking layer and a lighter, more milk-like layer. If this happens, just swirl it gently to mix it up again. Thawed milk may smell or taste soapy due to the breakdown of fats in the milk. The milk is still safe to drink, and most babies won't have a problem with it. If your baby doesn't like it, the milk can be heated to scalding (bubbles around the edges) right after it is pumped or expressed and then quickly cooled and frozen. This switches off the enzyme that breaks down the milk fats.
Alaska Community Resources

La Leche of Alaska
http://www.llli.org/web/alaska.html

State Women, Infants, & Children (WIC)
http://dhss.alaska.gov/dpa/Pages/nutri/WIC/default.aspx

Women’s Boutique
https://alaska.providence.org/services/w/womens-boutique

Alaska Breastfeeding Coalition
http://alaskabreastfeeding.org/

Cuddlers
Parent and baby group meets every Monday, Thursday and Saturday from noon-1p.m. in the Maternity Center classroom in the Heritage South Building
http://alaska.providence.org/services/m/maternity/breastfeeding

Breastfeeding Support Line
Call to talk with a trained lactation consultant weekdays 9a.m.-3:30p.m.  
(907) 212-2574

Anchorage Resources

Anchorage Pediatric Group
(907) 562-2423

Alaska Center for Pediatrics
(907) 777-1800

JBER Lactation Consultant
(907) 580-1445

JBER Outpatient Pediatric Clinic
(907) 580-2908

Latouche Pediatrics
(907) 562-2120
Sandra Frenier, IBCLC

Providence Nursing Boutique
(907) 212-5886

The Children's Clinic in Anchorage
(907) 562-2944

South Central Foundation
(907) 729-5420

Women, Infants, & Children (WIC)
(907) 343-4430
L Street: Suite 209

WIC Breastfeeding Peer Counselor
Support Line: (907) 343-4755

Alaska Native Medical Center
Ada Scott, IBCLC (907) 952-3477  
Sarah Stevens, IBCLC (907) 717-5027
Virginia Osborn, IBCLC (907) 345-4126
Jonna Gerboth, IBCLC (907) 212-5886
Resources by Region

### Matanuska-Susitna
- **Mat-Su Regional Medical Center**
  - Family Birthing Center
  - (907) 861-6645

- **Ptarmigan Pediatrics**
  - (907) 357-4543

- **WIC Wasilla**
  - (907) 376-4080

- **WIC Palmer**
  - (907) 746-4080

- **Valley Native Primary Care Center**
  - Tish Benson, CLC (907) 631-7817

- **JBER, Pediatrics Outpatient**
  - Heidi Koslo, IBCLC (907) 841-2327

### Fairbanks
- **Alison Muñoz, IBCLC**
  - (907) 456-2990

- **Jennifer Willeford, IBCLC**
  - (907) 347-5498

- **Sherrie Perry, LPN, IBCLC**
  - (907) 488-4207

- **Andrea Trinchet, RN, BSN, IBCLC**
  - (907) 378-3207

### Kodiak
- **Heather Preece, MHSc, IBCLC, RD, CSP**
  - (907) 512-6762

### Juneau
- **Bartlett Regional Hospital**
  - Angela Lessard, IBCLC
  - (907) 500-8269

### Sitka
- **Mountainside Family Healthcare**
  - Clinical Herbalist
  - Sharon Sullivan, IBCLC, RNC-OB
  - (907) 747-1722

### National Resources

- **La Leche League International**
  - Provides education, information, support, encouragement and health care professionals
  - [https://www.llli.org/](https://www.llli.org/)
  - 1-877-4-LaLeche

- **Baby Café USA**
  - Educates mothers about formula use and marketing impact on breastfeeding
  - [http://www.babycafeusa.org](http://www.babycafeusa.org)

- **Every Mother, Inc.**
  - Provides counseling and lactation training and resources
  - [https://www.everymother.org](https://www.everymother.org)

- **Mom2Mom Global**
  - Network of breastfeeding support and advocacy for military families
  - [https://www.mom2momglobabl.org/](https://www.mom2momglobabl.org/)

### Facebook Breastfeeding Support Groups
- Best for Babes Foundation
- Dispelling Breastfeeding Myths
- The Leaky Boob
- Breastfeeding Moms Unite!

### Helpline Numbers

- **National Office on Women’s Health Helpline**
  - (800) 994-9662

- **InfantRisk Center Helpline**
  - (806) 352-2519