LATCH Assessment- What to look for

A poor latch can indicate poor milk transfer. This means excess weight loss to baby, but also sore nipples for mom. When assessing the baby's latch, ask yourself the following questions.

Before the latch:

- 1. What is the infant's state?
 - Baby should be in calm state prior to feeding. Crying is a late sign of hunger.
- 2. Are feeding cues observed?
 - Make sure mom understands what feeding cues are. When baby is next to mom, she will be able to respond to early feeding cues.

Beginning the latch:

- 1. Does the nursing start with the baby's nose at the level of the mother's nipple?
 - When baby is not in alignment with mom's nipple, they are more likely to have difficulties latching on or maintaining a latch.
- 2. Does the baby open his mouth wide (in a gape)?
 - If mom "rushes" to place babe to breast before the gape, the baby will most likely have a shallow latch.
- 3. Is the baby moved onto the breast once the gape is seen?
 - Moms should not lean into the baby. She will soon have a sore back. Always bring baby to breast.
- 4. Does the baby's lower lip and tongue make contact with the breast before the upper lip?
 - This will help secure a proper latch. Having the lower lip and tongue make contact with the breast first helps ensures the lips to be flanged and for a deep latch
- 5. Is mom supporting her breast, by compressing across from baby's nose and chin?
 - Supporting the breast will assist the baby take a deep latch. Mom should place her fingers and compress the breast across from her baby's nose and chin. This helps the baby obtain a deep latch for the best possible milk transfer
- 6. Is the baby taking in the first 1 ½ to 2 inches of the breast?
 - For adequate milk transfer, baby should have a deep latch. A shallow latch does not facilitate adequate milk transfer and causes sore nipples.

Assessing the quality of the latch:

- 1. Is the baby's mouth positioned asymmetrically to the breast hold?
 - Moms should support their breast across from the baby's nose and chin to assist the baby get a deep latch.
- 2. Does the mother feel pain?
 - Breastfeeding should not be painful. Mom should feel a slight tugging initially, but should not feel a sharp or pinching sensation when breastfeeding.
- 3. Is the baby's mouth open wide (140 degrees)?
 - Baby's mouth should be open wide to facilitate a deep latch.
- 4. Are the baby's lips sealed around the mother's breast?
 - A poor seal is an indication of a poor latch. In order for milk transfer to happen, there must be a good seal.
- 5. Are the baby's upper and lower lips flanged out?
 - When the lips are not flanged out, breastfeeding can be painful.
- 6. Are the baby's cheeks rounded?
 - Baby's lip should be rounded and not dimpled when breastfeeding. Dimpling is an indication of a poor latch.

Assessing adequate milk transfer:

- 1. Is the baby's jaw moving in a rocker motion?
 - The baby's jaw should
- 2. Can you hear the baby swallowing?
- 3. Does the baby end the feeding with arms and hands relaxed?
- 4. Does the baby appear satiated at the end of the feeding?
- 5. Is the breast soft after feeding?