

San Maternity

Breastfeeding – Positioning & Attachment

Breastfeeding Information – Handout 3

Updated Jun 2023

Ensure you are comfortable – perhaps with a pillow to support your back and a glass of water nearby. If you are wearing a bra, it may be helpful to remove this while you are learning.

- Unwrap your baby.
- Bring the baby to you, not the breast to the baby.
- Baby should be facing flat against you, chest to chest, supporting your baby behind the shoulders and neck (with a flat hand).
- Tuck baby's bottom arm under and around your chest.
- Holding your baby at the same level as your breast, align your baby's nose with the nipple.
- A well-positioned finger or thumb may be useful to tilt the nipple towards the baby's nose, keeping the fingers well out of the way under your breast, towards your rib cage.
- Encourage your baby to have a wide gape prior to attaching, by gently brushing the baby's bottom lip against your areola.
- As the baby's mouth opens widely the baby is brought quickly onto the breast. With your flat hand, extra pressure on the baby's back will assist with attachment.
- The baby's chin will be pressed firmly into the breast, with the head tilted back slightly so that the nose is free. Pulling in the baby's bottom and legs close to your body will help achieve this.
- The baby's lips will be flanged outwards.
- Baby's cheeks will be puffed out and be close to the breast.
- Baby will have a good mouthful of breast and when baby begins to suckle you will not feel any pain.
- After an initial period of rapid suckling, your baby will commence steady, rhythmical sucking and swallowing with pauses. This is the normal pattern of suckling once your milk has come in. (There is less swallowing and more suckling in the first few days as the volume of colostrum available is less than that of the breast milk).

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