WMC Worldwide
Publishing, Educating, Consulting

Professional resources to simplify breastfeeding management...
WMC Worldwide, the proud parent of Breastfeeding Outlook, publishes the Breastfeeding Outlook newsletter and a variety of resources to support breastfeeding management and lactation exam preparation, including self-learning packages, flash cards, and parent handouts.

WMC Worldwide also sponsors continuing education programs and provides the consultation services of Marie Biancuzzo, RN MS IBCLC.

A note to the reader:
The author and publisher have made every attempt to check content for accuracy. Because the health care sciences are continually advancing, our knowledge base continues to expand. Therefore, we recommend that the reader check product information for changes in dosages, contraindications, and other information before administering any medication or intervention.

A request to the reader:
We invite your comments and constructive suggestions. If you find an error, please notify us at info@breastfeedingoutlook.com as soon as possible. Please visit www.breastfeedingoutlook.com for updates and corrections.

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A Self-Learning Package

by Marie Biancuzzo, RN MS IBCLC
About Marie

Marie Biancuzzo is the author of the best-selling book, *Breastfeeding the Newborn: Clinical Strategies for Nurses*. The first editor of *AWHONN Lifelines* and current editor of *Breastfeeding Outlook*, Marie has written several self-learning packages and more than 100 articles, many published in peer-reviewed journals. A founding member of the United States Breastfeeding Committee, she is currently President of Baby-Friendly USA.

Marie has first-hand clinical experience with breastfeeding management. In more than two decades of practice, she has held positions as staff nurse, clinical nurse specialist, and nurse administrator at community and university-based hospitals. Formerly the breastfeeding and lactation coordinator for the University of Rochester Medical Center in Rochester, NY, Marie has practiced per diem as a staff nurse in nearly all sub-specialties of maternal/child health.

Marie is also an experienced educator. She has held faculty appointments at the University of Rochester School of Nursing and at Georgetown University School of Nursing. Marie has been certified by the American Nurses Association as a continuing education specialist and completed special training in testing procedures. In addition, she was chosen to serve on the National Council Licensure Examination (NCLEX) panel to develop the RN licensing exam twice. In *Marie Biancuzzo's Lactation Exam Review* and other seminars, she has taught thousands of novices and experts across the United States.

In more than 20 years of nursing, writing and speaking, Marie has consistently earned praise for her knowledge, warmth, enthusiasm, and interactive teaching style.
Preface

I have always enjoyed the opportunity to browse the latest medical journals, checking the tables of contents and flipping the pages to read the latest research. Unfortunately, I don’t always have time to do so.

And, while I’m greatly interested in the latest breastfeeding-related news—laws proposed and passed, new technology and products, media coverage, pop culture references, etc.—it can be hard to find time for that, too.

Do you know what I mean? Does your daily practice keep you hopping? Do you sometimes feel like you’ve been too busy to keep up with the outside world? Are you looking for an update before taking your IBLCE exam?

When I started Breastfeeding Outlook (then known as Breastfeeding Today) back in 1999, it was to address just such concerns. I wanted this newsletter to help breastfeeding professionals stay up-to-date on the exciting, thought-provoking “stuff” of the field. I wanted to provide information about the latest research that should be the core of solid, evidence-based clinical practice. I wanted to assist exam candidates in brushing up on the new stuff that the IBLCE loves to include on the exam.

I think you’ll find the stories in the newsletter’s back issues as informative today as they were when they first hit the printed page. You’ll see “hot topics,” from caffeine to alcohol, epidurals to frenuloplasty. You’ll see coverage of the AAP’s statements, the ABM’s protocols, and the WHO’s guidelines. Above all, I hope you’ll refresh and deepen your understanding of these important issues in ways that may inform your clinical practice, help you pass the exam, or simply earn desired continuing education credits.

Finally, a quick request. This self-learning package looks back at those topics Breastfeeding Outlook has covered over the last few years. If there’s a topic you’d like to suggest we cover in an upcoming issue, feel free to drop us a line at newsletter@breastfeedingoutlook.com We’re always happy to hear your feedback.

Breastfeeding Outlook Index, 2002

Issue 1
- Beer: What Effect Does It Have?
- The Original Fast Food [editorial]
- CA Bill Calls for Informed Consent for Formula “Gifts”
- Mastitis: New Evidence for Old and Recurring Problem
- World Health Organization Passes Infant Feeding Resolution
- Very Little Patient-Controlled Analgesia Morphine in Colostrum
- Core Curriculum for Lactation Consultant Practice [media review]
- The National Front
- Recently Seen
- Professional Library
- Parent Education Resources
- Letter to the Editor
- Did You Know?

Issue 2
- How Soon Can Preterm Infants Breastfeed?
- Did We Stumble Again? [editorial]
- Academy of Breastfeeding Medicine Has Four Protocols
- Continuation of Breastfeeding More Likely with Support
- Breastfeeding Eases Pain for Newborns
- Expert Panel to Study Infant Formula
- Reclaiming Breastfeeding for the United States [media review]
- The National Front
- Recently Seen
- Professional Library
- Parent Education Resources
- New Product Announcements
- You Asked?
- Did You Know?

Issue 3
- Cleft Repair: Breastfeeding Sooner or Later?
- Reciting the Litany of Benefits [editorial]
- Peer Counselors
- Longer Duration of Breastfeeding Protects Against Breast Cancer
- If My Mom Were a Platypus [children's book review]
- Follow Me Mum: The Key to Successful Breastfeeding [media review]
- Breastfeeding the Newborn: Clinical Strategies for Nurses, 2nd ed. [media review]
- The National Front
- Recently Seen
- Parent Education Resources
- New Product Announcements
- You Asked?
- Did You Know?

Issue 4
- Cabbage Leaves: What is the Evidence?
- Was My Father Right? [editorial]
- Incidence of Breastfeeding in U.S. Highest Since 1954
- Breastfeeding Increases Risk of Asthma
- Breastfeeding Decreases Risk of Asthma and Allergy
- Frenuloplasty Can Improve Latch for Severely Tongue-Tied Infants
- The Breastfeeding Atlas (2nd ed.) [media review]
- The National Front
- Recently Seen
- Parent Education Resources
- Letter to the Editor
- You Asked?
- Did You Know?
Breastfeeding Outlook Index, 2003

Issue 1
- Caffeine: What’s the Straight Scoop?
- The Breastfeeding Agnostics? [editorial]
- Epidurals Appear to Have Adverse Effects on Breastfeeding
- Breastfeeding Eases Pain
- Mead Johnson Recalls Formula
- Maternal and Infant Assessment for Breastfeeding and Human Lactation [media review]
- The National Front
- Recently Seen
- Professional Library
- Parent Education Resources
- You Asked?
- Did You Know?

Issue 2
- Are Videotapes Effective Teaching Tools?
- In the Dark [editorial]
- Federal Funding Disproportionate to National Goals
- CDC Studies Breastfeeding Rates
- Breastfeeding for Two Months Protects Against Childhood Obesity
- New AAP Guideline for Vitamin D Supplementation
- Kangaroo Mother Care [media review]
- The National Front
- Recently Seen
- Professional Library
- Parent Education Resources
- You Asked?
- Did You Know?

Issue 3
- Re-Lactation: Second Chance for First-Best
- Claims to Shame [editorial]
- Exclusive Breastfeeding for Six Months: No Reason Not To!
- Bedsharing is Linked to Prolonged Breastfeeding
- Cesarean vs. Vaginal Birth: At 6 Days, Milk Transfer Same
- Kangaroo Mother Care II [media review]
- The National Front
- Recently Seen
- Professional Library
- Parent Education Resources
- Letter to the Editor
- Did You Know?

Issue 4
- Flame Retardants: How Do We Advise Parents?
- What’s to Lose? [editorial]
- Breastfeeding Campaign Again Delayed
- Breastfeeding and Adolescent Obesity Not Linked
- Risk Factors for Early Breastfeeding Parents
- Bilingual Breastfeeding Handouts [media review]
- The National Front
- Recently Seen
- Professional Library
- Parent Education Resources
- You Asked?
- Did You Know?
Goals and Objectives

Goal: To help professionals update their clinical breastfeeding and lactation management through a structured review of recent research studies.

Objectives: Using selected research studies and other media published in 2002 and 2003, the participant will be able to:

• describe how study results can influence breastfeeding and lactation management.
• counsel mothers appropriately, based on emerging societal issues and trends.
• describe new technologies that support breastfeeding in terms of their indications, advantages, disadvantages, and clinical how-to techniques.
• describe new statements and efforts by national and international organizations that may drive changes in recommendations for lactating mothers and their Nurslings.
Instructions for Users of this Package

Welcome to the Simplifying Breastfeeding Management Series!

We know you'll want to take advantage of the convenience and affordability of earning contact hours and CERPs when you want, where you want!

The Simplifying Breastfeeding Management series gives nurses, lactation consultants, childbirth educators, and others a great opportunity to earn continuing education credits toward licensure or certification renewal. You'll appreciate that you pay only for what you need. If you need only the learning package, that's what you'll pay for. If you have the package and need the continuing education credits, that's what you'll pay for. If colleagues borrow your package and want the continuing education credits, that's all they pay for!

We've enclosed materials so that you can start earning credits right away! It's easy! Just complete the steps below and submit the required forms with payment, and you'll be on your way to earning credits.

1. Track the time it takes you to complete this self-learning package. Include time for reading the information, doing the learning activities, and completing the pre- and post-tests.

2. Complete the 10-question true/false pre-test.

3. Read the Breastfeeding Outlook newsletter issues for 2002 and 2003. If you don't have the back issues, you can order them from www.breastfeedingoutlook.com or with the Order Form at the end of this package.

4. Complete the post-test on your own, without assistance from anyone else. Write your answers on the answer sheet. Copies of the post-test and answer sheet are available at the end of this package or on our web site at www.breastfeedingoutlook.com

5. Answer all questions carefully. Remember that payment is for the opportunity to earn credits, and it will not be refunded if you do not pass the post-test.

6. Complete the evaluation of the package found on pages 18–19.

7. Enclose payment. We accept checks drawn on US banks, as well as Visa, Mastercard, American Express, and Discover. Payment details are on the answer sheet.

8. Mail the answer sheet, evaluation form and payment to:
Breastfeeding Outlook, Dept. CE
PO Box 387
Herndon VA 20172-0387
Or, if paying by credit card, fax to: 703-787-9895

Please allow up to 2 weeks for a response to your application for continuing education recognition. We hope you find this a great learning experience!

Continuing Education Approval

Approved for 4.0 contact hours.
Approved for 4.0 L-CERPs.
Approved for 4.0 CPEs at level II for RDs and DTRs.

Note: Occasionally, the number or availability of contact hours may change. Check www.breastfeedingoutlook.com for updates.
Frequently Asked Questions

Q: Where do I send my completed post-test?
A: Mail your post-test and other materials to us here at Breastfeeding Outlook, Dept. CE, PO Box 387, Herndon VA 20172-0387 or fax to 703-787-9895. Please do not send your materials to your certifying or licensing agency; they are not involved in the preparation or processing of your post-test!

Q: Can I submit the post-test at any time?
A: It is a good idea to complete the post-test as soon as you can after you receive your self-learning package, since the certifying agencies do occasionally change the rules about how providers calculate credit hours; if that happens the number or availability of contact hours awarded for this package may change.

Q: Can I do the entire self-learning program at home?
A: Yes!

Q: Other organizations charge an additional $25 fee to people who use borrowed booklets to earn continuing education recognition. How much extra do you charge?
A: We charge no additional fee! Someone using a borrowed self-learning package will pay the same amount as anyone else applying for credits.

Q: I would like to get both nursing contact hours and CERPs. Is there an additional fee to get credit for both?
A: No. Your Certificate of Achievement will show approval from multiple certifying bodies. The fee that you pay will cover it all.

Q: How well do I have to do to pass the post-test?
A: The passing level is 80%.

Q: How and when will I find out my score?
A: We will send both our response and your results no later than two weeks from when we receive your completed post-test. Sometimes, we are able to send a response even sooner.

Q: If I fail the test, how much will I have to pay to take it again?
A: You'll only have to pay a $10 processing fee.

Q: How can I find out about updates or modifications to the package?
A: Check our web site at www.breastfeedingoutlook.com for information. Updates and other modifications will be listed there.

Q: Can I contact you if I have questions or comments?
A: Yes, please do! We like to hear from people who purchase our publications. E-mail us at info@breastfeedingoutlook.com or write to us at Breastfeeding Outlook, PO Box 387, Herndon VA 20172-0387. We discourage phone calls, which tend to be more time-consuming for our staff and would eventually force us to raise our publication prices.

Q: I really enjoyed the self-learning package. Do you publish others?
A: Yes! We have several packages already available and new ones are always in development. Visit our web site at www.breastfeedingoutlook.com to see what's new!
Pre-test

Please answer the following questions as true or false:

T  F  1. Foxman et al found that mastitis occurs most often in first-time mothers.
T  F  2. According to the Institute of Medicine, a lactating mother can safely consume up to 1.5 g of alcohol per kg of body weight.
T  F  3. Pugh et al. concluded that peer counseling has only a minor effect on breastfeeding duration.
T  F  4. Peak effects of caffeine occur within the first two hours after consumption.
T  F  5. Cardiorespiratory status is better during breastfeeding than during bottle feeding.
T  F  6. Breastfeeding of infants with cleft defects is best begun after surgery.
T  F  7. The AAP recommends that all infants receive 200 IU of vitamin D per day.
T  F  8. According to a recent study, tongue-tie occurs in about 10% of the population.
T  F  9. Research shows that lactation is most successful for mothers who have used a galactagogue.
T  F  10. Vitamin D intake of 200 IU should begin in infancy and continue through adolescence.

Answers can be found on page 12.
References


Chandra RK. Five-year follow-up of high-risk infants with family history of allergy who were exclusively breast-fed or fed partially whey hydrolysate, soy, and conventional cow’s milk formulas. *J Pediatr Gastroenterol Nutr.* 1997;24(4):380-388.


Seth AK, McWilliams BJ. Weight gain in children with cleft palate from birth to two years. *Cleft Palate J.* 1988;25(2):146-150.


Be sure to read the 2002 and 2003 issues of *Breastfeeding Outlook* before you complete the post-test!
Post-test

You may use the learning package to look up answers to the following questions. Write the best answer on the answer sheet (page 17). Please be sure to complete all test items.

1. Which of the following can we tell lactating women about beer?
   a. Research has shown that beer increases milk supply and has few short-term adverse effects.
   b. It appears that consumption of beer elevates prolactin levels.
   c. Infants consume more milk when their mothers drink alcoholic beer.
   d. Non-alcoholic beer has no effect on either prolactin levels or the infant’s suck behavior.

2. Which one of the following groups has the greatest risk of mastitis, compared to the others?
   a. primiparae who are suckling their infants.
   b. multiparae who are suckling their infants.
   c. primiparae who have had a cesarean delivery.
   d. multiparae who are using a hand pump.

3. If a mother knows in advance that her infant will be having a blood sample drawn, you can advise her that suckling during the procedure:
   a. dramatically eliminates crying and grimacing.
   b. somewhat reduces crying and grimacing.
   c. reduces crying, but substantial grimacing indicates pain.
   d. has no effect on crying and grimacing.

4. If parents ask about the role of the FDA in regulating infant formula, which of the following would be the most appropriate response?
   a. The FDA establishes quality-control procedures for manufacturing of infant formula.
   b. The FDA makes sure ingredients in infant formula are beneficial for infants.
   c. The FDA has made only a few recalls of formula since the Infant Formula Act of 1980.
   d. The FDA can recommend but not regulate the labeling of infant formula.

5. Based on the recent study by Dennis et al, what can we determine?
   a. Breastfeeding at one week has been associated with the presence of peer counselors.
   b. Telephone support is as good as in-person support for breastfeeding mothers.
   c. Some mothers decline help from peer counselors.
   d. Peers require at least an 18-hour training course to effectively provide support.

6. Which of the following contains the most caffeine?
   a. a 12-ounce can of cola
   b. a 12-ounce glass of iced tea
   c. a 10-ounce mug of coffee
   d. a 6-ounce cup of black tea

7. Which of the following might be a criticism of the epidural study by Baumgarder et al?
   a. The study had low statistical power.
   b. Cesarean section was a confounding factor in the study.
   c. The data collection tool used in the study lacks established validity.
   d. Prolonged second-stage labor was a confounding factor in the study.

continued on the next page
8. Which of the following recommendations would be appropriate for a breastfeeding mother who wants to drink caffeinated beverages?
   a. Limit your caffeine intake to about 400 mg per day.
   b. Limit your caffeine intake to about 200 mg per day.
   c. Expect side effects in the baby about 30-40 minutes after breastfeeding.
   d. Remember that the amount of caffeine in the infant’s blood is the same as in the mother’s milk.

9. Studies by Carbajal et al and Gray et al have shown that when infants are breastfed during venipuncture they have pain relief that is:
   a. similar to what they experience by using a pacifier, but better than what they get from consuming glucose water.
   b. similar to what they experience by consuming glucose water, but better than when they suck a pacifier.
   c. marginally statistically different from what they would experience with being held.
   d. more effective than sucking a pacifier, being held, or consuming glucose water.

10. Currently, the AAP recommends that vitamin D supplements should be given to:
    a. all breastfed infants, beginning at 2 months old.
    b. all breastfed infants, beginning at 6 months old.
    c. only breastfed babies living in cloudy climates.
    d. all dark-skinned babies, regardless of feeding method.

11. Bergmann’s recent study showed that:
    a. bottle-fed babies had BMIs about the same as breastfed infants at 3 months.
    b. at 6 months, a higher proportion of breastfed infant exceeded the 90th and the 97th percentiles.
    c. At 6 months, a higher proportion of bottle-fed infant exceeded the 90th and 97th percentiles.
    d. the prevalence of obesity nearly tripled by age 6 among children who had been bottle-fed.

12. All of the following could be criticisms of the CDC’s study on breastfeeding EXCEPT:
    a. the study required recall over a long time period.
    b. “exclusively breastfed” babies received water.
    c. the study had a limited sample size.
    d. a stratified analysis was performed on the data.

13. In Kramer’s study, compared to infants who were exclusively breastfed for 3 months then received mixed feedings, infants who were exclusively breastfed for 6 months or longer had a:
    a. lower prevalence of atopic conditions.
    b. lower prevalence of gastrointestinal infections.
    c. lower mean length.
    d. lower mean head circumference.

14. Based on the existing studies, which of the following is true about re-lactation?
    a. Nipple stimulation is needed about every 2 hours.
    b. Relactation is unlikely to be successful unless women use galactogogues.
    c. An electric pump is necessary to establish supply.
    d. Chances of full relactation are greater if the “gap” is less than 10 days.

continued on the next page
15. According to Evans et al, which of the following would be good advice to a mother who has had a cesarean delivery?
   a. An average-size baby takes in about 100 ml on the 2nd day of life.
   b. An average-size baby takes in about 75 ml on the 2nd day of life.
   c. Cesarean-delivered babies take in the same quantity of milk on days 1 to 5.
   d. Cesarean-delivered babies can have little milk transfer after day 10.

16. The American Academy of Pediatrics Committee on Nutrition’s 2003 statement on obesity recognizes that breastfeeding:
   a. varies directly with obesity.
   b. varies inversely with obesity.
   c. has no significant impact on obesity.
   d. has not been studied in relation to obesity.

17. Bromine-based fire retardants could be characterized as:
   a. rarely found in the U.S.; few people are exposed to them.
   b. somewhat uncommon; only plastics workers are exposed to them.
   c. very common; they are found in most homes, offices, and vehicles.
   d. not well understood, but banned in the United States.

18. The recent study of PBDEs by the Environmental Working Group aimed to:
   a. compare PBDE contamination in human milk and cow’s milk formula.
   b. warn mothers that any amount of PBDEs in their milk warrants clinical follow-up in their infants.
   c. caution mothers with high levels of PBDEs in their milk not to breastfeed.
   d. advise that PBDE levels in humans are doubling every 5 years and the source is dietary fats.

19. Dewey et al showed that:
   a. infants breastfeed as few as two times and as many as ten times during the first day of life.
   b. most mothers have a copious supply of milk at between 36 and 48 hours.
   c. there was a significant correlation between intrapartum medication and excess infant weight loss in multiparous women.
   d. there was a significant association between low maternal confidence and excess infant weight loss in primiparous women.

20. Which of the following is true about the FluMist® vaccine?
   a. It is injectable, and any baby will fuss when it is administered.
   b. It is a live virus, and can be shed from the mother to the infant.
   c. The CDC has said that it is safe for breastfeeding mothers.
   d. The AAP has said that it should be given directly to the baby.
Post-test Answer Sheet

Answers to Post-test

Please make sure to completely fill in each circle you select.

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Statement from Participant

I have:

☐ Completed the 10-question true/false pre-test on page 8.

☐ Read all of the 2002 and 2003 issues of Breastfeeding Outlook.

☐ Completed the open-book post-test on pages 14–16 without assistance from others.

☐ Written answers to the post-test in the spaces to the left.

☐ Completed and returned the evaluation form on pages 18–19.

☐ Understood that payment is for the opportunity to earn credits and is not refunded if I do not pass the post-test.

☐ Enclosed my payment.

By signing below, I declare that the above statements are true.

Signed _______________________________________________________________________________________

If IBCLC, date of certification: ____________________________________________________________________

We will not grade your post-test until you mail or fax all of the following materials:

- Package evaluation
- This sheet, completed and signed
- Payment for $25.00 (Check, Visa, MasterCard, American Express or Discover) to:

Breastfeeding Outlook, Dept. CE
PO Box 387, Herndon VA 20172-0387
Fax: 703-787-9895

Name ___________________________________ Organization ___________________________________

Address ______________________________________________________________________________________

City, State, ZIP ________________________________________________________________________________

Phone ___________________________________________ E-mail ______________________________________

Please select a payment method for the continuing education fee of $25.00:

☐ Check enclosed ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover

Name on card _________________________________________________________________________________

Card Number # ___________________________________________ Exp date __________

Signature _____________________________________________________________________________________
Evaluation

Our aim is to provide high-quality learning resources for health care professionals. We need your help! Now that you have used this resource, please let us know what you think! **Please make sure to completely fill in each circle you select.**

1. The extent to which the self-learning package met the stated objectives: .................................. _______ Excellent _______ Good _______ Fair _______ Poor _______
2. Extent to which this self-learning package met my personal learning goals: .......................... _______ Excellent _______ Good _______ Fair _______ Poor _______
3. Information was clear, concise and well-organized ............................................................. _______ Excellent _______ Good _______ Fair _______ Poor _______
4. Theoretical information given was relevant to clinical situations ........................................ _______ Excellent _______ Good _______ Fair _______ Poor _______
5. Rate the following:
   • Satisfaction with ordering and shipping ................................................................. _______ Excellent _______ Good _______ Fair _______ Poor _______
   • Clarity of instructions for completing the self-learning package .......................... _______ Excellent _______ Good _______ Fair _______ Poor _______
6. Overall, this self-learning package was: ........................................................................_______ _______ Excellent _______ Good _______ Fair _______ Poor _______
7. How long did it take you to complete this self-learning package (hours & minutes)?  ____________________________
8. Professional Credentials (check all that apply)
   ○ RN  ○ MD  ○ FACCE or other childbirth certification
   ○ Certified by NCC  ○ CLC  ○ Other
   ○ CNM  ○ IBCLC
   ○ RD  ○ CLE
9. What was your main reason for purchasing this self-learning package?
   ○ To earn CERPs or L-CERPs for recertification
   ○ To earn contact hours for nursing ("CEUs")
   ○ To earn recognition for other profession(s)
   ○ Price was reasonable
   ○ To earn credits at my own pace
   ○ Other
10. How did you hear about this self-learning package?
    ○ Flyer in the mail to you or to workplace
    ○ Coworker, supervisor or friend told me
    ○ Breastfeeding Outlook web site
    ○ E-mail lists
    ○ ILCA web site
    ○ Other

continued on the next page
Evaluation (continued)

11. Is a self-learning self-learning package an effective learning tool for you? Why or why not?

12. Would you recommend this self-learning package to a colleague? Why or why not?

13. How long did it take you to complete this self-learning package?

14. How could it be improved?

15. We would like to develop more self-learning self-learning packages to meet your needs! Please check the topics you would be interested in:

   ○ Breastfeeding the Preterm Newborn
   ○ Helping the Infant with Failure to Thrive
   ○ Breastfeeding Medications During Labor
   ○ Breastfeeding and Maternal Postpartum Medications
   ○ Ethics and the Lactation Professional
   ○ Candida: Implications for Breastfeeding Couplets
   ○ Breastfeeding Infants with Special Needs (Cleft, etc.)
   ○ Predicting and Preventing Early Breastfeeding Cessation
   ○ Other (please specify) ________________________________

Thank you for your feedback!

Please send your completed evaluation form to:
Breastfeeding Outlook, Dept. CE
PO Box 387 • Herndon VA 20172
Or fax to: 703-787-9895

Do you ever feel like you’re too busy with your clients to know what’s going on in the outside world? Are you looking to update your knowledge before taking the IBLCE exam? Are you a Breastfeeding Outlook subscriber who’s looking for a chance to earn continuing education credits? This handy self-learning package is just what you need!

It will help you:

♦ Describe current studies in breastfeeding and lactation management
♦ Counsel mothers appropriately, based on emerging issues and trends
♦ Describe new technologies that support breastfeeding
♦ Describe new statements and efforts by national and international organizations

Plus, it includes evidence-based guidance about cleft repair, alcohol, caffeine, re-lactation, tongue tie, and much, much more!

Earn Continuing Education Recognition

The Simplifying Breastfeeding Management series is designed to help lactation consultants, nurses, dietitians, childbirth educators, and other health care professionals to enhance their breastfeeding promotion skills. These user-friendly packages make it easy to:

♦ Earn continuing education credits towards your license or certification renewal.
♦ Learn evidence-based practice when and where it is convenient for you.
♦ Update your staff’s knowledge of breastfeeding with research-based strategies.