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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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Breastfeeding Outlook: A Review of 2004–2005

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 obesity to alcohol, pacifiers to gastric bypass surgery. 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, 2004

Issue 1
- Discarding Milk During Candidiasis: Weighing the Evidence
- The Real and Present Danger [editorial]
- IOM Makes Safety Recommendations
- Peer Counseling: Offering is Not Enough
- Epidural Associated with Breastfeeding Problems
- Drugs for Pregnant and Lactating Women [media review]
- The National Front
- Recently Seen
- Professional Library
- Parent Education Resources
- New Product Announcements
- You Asked?
- Did You Know?

Issue 2
- Raynaud Phenomenon: How Can We Help?
- Domperidone Warning: Important or Importation? [editorial]
- No Evidence to Withhold Cups and Pacifiers from Preemies
- Number of MERs Only Factor Related to Consumption
- Domperidone Now Illegal in U.S.
- Impact of Birthing Practices on Breastfeeding [media review]
- Breastfeeding Outlook Celebrates 5th Anniversary
- The National Front
- Recently Seen
- Professional Library
- Parent Education Resources
- New Product Announcements
- You Asked?
- Did You Know?

Issue 3
- The Straight Skinny on Breastfeeding after Gastric Bypass
- Weapons of Mass Production [editorial]
- Human Milk Has Analgesic Effect
- Kangaroo Care More Effective than Incubator
- ABM Gives Milk Storage Guidelines
- Breastfeeding and Human Lactation [media review]
- The National Front
- Recently Seen
- Professional Library
- Parent Education Resources
- New Product Announcements
- You Asked?
- Did You Know?

Issue 4
- Ovarian Cysts: How Are They Related to Breastfeeding?
- Top Dog [editorial]
- Advancing Feeds at 30mL/day
- Longer Storage Reduces Antioxidant Capacity
- AAP’s New Jaundice Statement
- The National Front
- Recently Seen
- Professional Library
- Parent Education Resources
- New Product Announcements
- You Asked?
- Did You Know?
Breastfeeding Outlook: A Review of 2004–2005

Breastfeeding Outlook Index, 2005

Issue 1
- Do Hydrogel Dressings Work?
- Doing the Norm in the Storm [editorial]
- Rocket Fuel Found in Milk
- Newborns Prefer Smell of Human Milk
- AAP Issues New Statement
- The National Front
- Recently Seen
- Professional Library
- Parent Education Resources
- New Product Announcements
- You Asked?
- Did You Know?

Issue 2
- Shell Shock: Little Evidence to Support Good Practice
- Per Mother’s Request [editorial]
- HIV Transmission Risk Higher with Mixed Feedings
- Alcohol is Not Galactagogue
- Breastfeeding and Returning to Work [media review]
- The National Front
- Recently Seen
- Professional Library
- Parent Education Resources
- New Product Announcements
- You Asked?
- Did You Know?

Issue 3
- Fat Chance! How Breastfeeding Reduces Obesity
- MREs for Wee Folk [editorial]
- Benefits of Donor Milk Questioned
- Anatomy of the Lactating Breast: An Update
- Women’s Health in Complementary and Integrative Medicine: A Clinical Guide [media review]
- The National Front
- Recently Seen
- Professional Library
- Parent Education Resources
- New Product Announcements
- You Asked?
- Did You Know?

Issue 4
- Do Pacifiers Lead to Early Weaning?
- Force-Fed Foolishness [editorial]
- Tongue-Tied Newborns Can Benefit from Clipping
- Extended Lactation Reduces Risk of Diabetes
- I’m Made of Mama’s Milk [children’s book review]
- Breastfeeding and Catholic Motherhood [media review]
- The National Front
- Recently Seen
- Professional Library
- Parent Education Resources
- New Product Announcements
- 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 2004 and 2005, 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 2004 and 2005. 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 21–22.

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 3.5 contact hours.
Approved for 3.5 L-CERPs.

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 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:

1. Mothers should cease breastfeeding immediately upon diagnosis of candidiasis.
2. Women with symptoms of Raynaud’s phenomenon in their nipples should apply warm compresses after breastfeeding.
3. A mother’s perception of her Milk Ejection Reflex (MER) is more reliable than the infant’s suckling pattern.
4. Women who have had gastric bypass surgery are at increased risk for vitamin B deficiency and fat malabsorption.
5. Mother’s milk has no real analgesic properties.
6. Frozen milk has fewer antioxidants than formula.
7. Breast shells should be avoided prior to 36–38 weeks of gestation.
8. Mennella et al. (2005) verified that alcohol is a galactagogue.
9. The protein content of human milk is higher than any other mammalian milk.
10. Ramsay et al. (2005) found 4-18 ducts at the base of mothers’ nipples.

Answers can be found on page 14.
References


Be sure to read the 2004 and 2005 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 20). Please be sure to complete all test items.

1. During freezing and refrigeration, yeast cells are:
   a. completely destroyed, and therefore the milk expressed during the episode will not re-infect the baby.
   b. completely destroyed, but extreme temperatures dramatically alter the milk’s protective components.
   c. inactivated, but not destroyed, and the benefits of milk expressed during the episode usually outweigh any potential harm.
   d. unaffected, and milk expressed during the episode should be discarded because it is likely to re-infect the mother.

2. Graffy et al (2004) showed that peer counseling:
   a. significantly increases the duration of breastfeeding.
   b. significantly increases the duration of breastfeeding.
   c. was associated with fewer reports of “not enough milk.”
   d. is critical to the breastfeeding mother’s self-confidence.

3. Which of the following medications has been effective in reducing the nipple vasospasms of Raynaud’s phenomenon?
   a. Ibuprofen
   b. Celebrex
   c. Nifedipine
   d. Atropine

4. The Food & Drug Administration (FDA) issued a warning about domperidone that:
   a. listed studies showing that the oral form of the drug has life-threatening cardiovascular effects.
   b. listed studies showing that the oral form of the drug has minor adverse GI effects.
   c. listed studies that substantiated the adverse effects of the oral form of the drug.
   d. did not list studies to substantiate the adverse effects of the drug.

5. Collins et al (2004) showed that pacifiers were:
   a. strongly associated with shorter breastfeeding duration.
   b. weakly associated with shorter breastfeeding duration.
   c. not associated with shorter breastfeeding duration.
   d. predictive of a shorter length of hospital stay.

6. Grange et al (2004) warned that breastfeeding mothers who have had gastric bypass surgery are likely to experience:
   a. vitamin B6 deficiency, and the mother may be symptomatic before the infant.
   b. vitamin B6 deficiency, and the infant may be symptomatic before the mother.
   c. vitamin B12 deficiency, and the mother may be symptomatic before the infant.
   d. vitamin B12 deficiency, and the infant may be symptomatic before the mother.

7. For infants who underwent venipuncture, Upadhyay et al (2004) showed that receiving expressed milk was positively correlated with:
   a. changes in heart rate.
   b. changes in oxygen saturation.
   c. duration of crying.
   d. all of the above.

continued on the next page
Post-test (continued)

8. Which of the following might you tell parents about quality control of infant formula?
   a. The FDA strictly polices the quality of infant formula, which results in frequent recalls.
   b. Formula contaminated with Enterobacter sakaii is found only in factories, not homes.
   c. Multiple problems, including the presence of glass particles and levels of vitamin D far above recommended levels, have been found in formula.
   d. Most problems with formula are reported in FDA data.

9. Bergman et al (2004) showed that cardiorespiratory stability was:
   a. weakly correlated with kangaroo care at 8 hours.
   b. strongly correlated with kangaroo care at 8 hours.
   c. weakly correlated with kangaroo care at 5 hours.
   d. strongly correlated with kangaroo care at 5 hours.

10. Caple et al (2004) demonstrated that advancing feedings for newborns at a rate of 30 ml/kg/day is:
    a. safe if they are fed formula, but not human milk.
    b. safe if they are fed human milk, but not formula.
    c. safe whether they are fed human milk or formula.
    d. unsafe whether they are fed human milk or formula.

11. You might explain to mothers that hydrogel dressings are:
    a. the single best approach to alleviating sore nipples in the first days postpartum.
    b. more effective than lanolin in alleviating sore nipples.
    c. less effective than lanolin in alleviating sore nipples.
    d. no more effective than other treatments in alleviating sore nipples.

12. The 2005 statement of the American Academy of Pediatrics (AAP) on breastfeeding differs from previous statements in all of the following ways except:
    a. Exclusive breastfeeding is established as the normative model.
    b. Prevention of obesity and diabetes are listed as benefits of breastfeeding.
    c. Banked milk is identified as a suitable alternative to mother’s milk.
    d. A tool is proposed for properly documenting milk transfer.
    e. Skin-to-skin contact is recognized as the ideal heat source for newborns.

13. According to Kirk et al (2005), perchlorate (often called “rocket fuel”) can:
    a. inhibit the uptake of vitamin B12 and impair the synthesis of red blood cells.
    b. inhibit the uptake of iodine and impair thyroid function.
    c. contribute to an overload of toxic heavy metals in the body.
    d. interfere with cell wall synthesis and cause mental impairment.

14. Which of the following conclusions can be drawn from Alexander’s study of inverted nipples?
    a. All of the women who used breast shells reported that they didn’t like them.
    b. All of the women who used breast shells reported complete or near complete eversion of their nipples.
    c. Over 1/3 of the women in the intervention group did not use breast shells; thus, it is difficult to determine their effectiveness.
    d. A few of the women in the intervention group did not use breast shells; statistical measures compensated for this.

continued on the next page
Post-test (continued)

15. Which of the following is true about the MAIN study of breast shells?
   a. None of the 463 women who wore the shells from 25-35 weeks of gestation reported having uterine contractions.
   b. The principle outcome of this study was the amount of nipple protrusion that occurred.
   c. This study sought to address shells’ effectiveness during both the antepartum and postpartum periods.
   d. Because of the clear treatment details in this study, we can accurately conclude that shells are ineffective.

16. Postnatal transmission of HIV is most likely to occur:
   a. before 1 month of age.
   b. between 1–3 months of age.
   c. between 3–6 months of age.
   d. after 6 months of age.

17. In Africa, which of the following recommendations would most reduce the risk of HIV transmission?
   a. exclusive breastfeeding
   b. mixed feeding
   c. exclusive formula feeding

18. According to Mennella et al (2005), what happens to the hormones of a healthy lactating woman who consumes the equivalent of 1–2 alcoholic drinks?
   a. Oxytocin decreases; prolactin increases.
   b. Oxytocin decreases; prolactin decreases.
   c. Oxytocin increases; prolactin increases.
   d. Oxytocin increases; prolactin decreases.

19. New research suggests that a mother who asks about the effects of alcoholic drinks can be told:
   a. Consuming 1–2 drinks will not make your milk unsafe for your baby, and it can increase your milk supply.
   b. Consuming 1–2 drinks will not make your milk unsafe for your baby, but it can decrease your milk supply.
   c. Consuming 1–2 drinks will not make your milk unsafe for your baby, and it will have no effect on your milk supply.
   d. Consuming 1–2 drinks will make your milk potentially toxic to your breastfed infant.

20. A parent asks you how breastfeeding is related to preventing obesity. Which of the following responses is most accurate?
   a. Leptin signals satiety, and it may be related to the breastfed baby’s ability to self-regulate intake.
   b. Adiponectin regulates fat metabolism, and it has been shown to be elevated in obese children.
   c. The forebrain regulates fat and carbohydrate metabolism; therefore, it may regulate the volume of milk consumed.
   d. Obesity is largely determined by genetic characteristics, but breastfeeding is still very beneficial to the infant.
Post-test Answer Sheet

Answers to Post-test

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

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 1 |   |   |   |   | 11 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 2 |   |   |   |   | 12 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 3 |   |   |   |   | 13 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 4 |   |   |   |   | 14 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 5 |   |   |   |   | 15 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 6 |   |   |   |   | 16 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 7 |   |   |   |   | 17 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 8 |   |   |   |   | 18 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 9 |   |   |   |   | 19 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 10 |   |   |   |   | 20 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

Statement from Participant

I have:

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

☑ Read all of the 2004 and 2005 issues of Breastfeeding Outlook.

☑ Completed the open-book post-test on pages 16–19 without assistance from others.

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

☑ Completed and returned the evaluation form on pages 21–22.

☑ 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: \[\text{Excellent} \quad \text{Good} \quad \text{Fair} \quad \text{Poor}\]

2. Extent to which this self-learning package met my personal learning goals: \[\text{Excellent} \quad \text{Good} \quad \text{Fair} \quad \text{Poor}\]

3. Information was clear, concise and well-organized: \[\text{Excellent} \quad \text{Good} \quad \text{Fair} \quad \text{Poor}\]

4. Theoretical information given was relevant to clinical situations: \[\text{Excellent} \quad \text{Good} \quad \text{Fair} \quad \text{Poor}\]

5. Rate the following:
   - Satisfaction with ordering and shipping: \[\text{Excellent} \quad \text{Good} \quad \text{Fair} \quad \text{Poor}\]
   - Clarity of instructions for completing the self-learning package: \[\text{Excellent} \quad \text{Good} \quad \text{Fair} \quad \text{Poor}\]

6. Overall, this self-learning package was: \[\text{Excellent} \quad \text{Good} \quad \text{Fair} \quad \text{Poor}\]

7. How long did it take you to complete this self-learning package (hours & minutes)? \[\quad \text{__________________________}\]

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
Breastfeeding Outlook: A Review of 2004–2005

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 alcohol, hydrogel dressings, maternal gastric bypass surgery, 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.