Breastfeeding Clinic Visit Summary

Fax **ONLY Group Information** (top section only) to Carolyn Perchuk in the Transcona Office.

Clinic Date	PHN name	Community Area of Clinic	Number Attending Group

Issues discussed in group: [] Difficulty/not latching [] Hydration	[] Slow to gain [] Decreased milk supply [] Sore nipples [] Thrush [] Plugged ducts/mastitis [] Engorgement	[] Oversupply [] Prematurity [] Failure to thrive [] Infant illness [] Maternal illness [] Medications	[] Not confident [] Reflux [] Weaning [] Weight check [] Other - Details of other

Individual Information

Given Name			
Surname			
Birth Date			
PHIN			
Permanent RHA	[] Northern [] Interlake-Eastern [] Prairie Mountain [] Southern [] Winnipeg [] Other	[] Northern [] Interlake-Eastern [] Prairie Mountain [] Southern [] Winnipeg [] Other	[] Northern [] Interlake-Eastern [] Prairie Mountain [] Southern [] Winnipeg [] Other
Support person attended	[] No [] Yes	[] No [] Yes	[] No [] Yes
First visit	[] No [] Yes	[] No [] Yes	[] No [] Yes
Infant age	[] Days if < month [] Weeks if ≥ 1 month	[] Days if < month [] Weeks if ≥ 1 month	[] Days if < month [] Weeks if ≥ 1 month
Referred by	[] PHN [] Physician [] Nurse Practitioner [] Self [] Other	[] PHN [] Physician [] Nurse Practitioner [] Self [] Other	[] PHN [] Physician [] Nurse Practitioner [] Self [] Other
Issues	[] Difficulty/not latching [] Hydration [] Slow to gain [] Decreased milk supply [] Sore nipples [] Thrush [] Plugged ducts/mastitis [] Engorgement [] Oversupply [] Prematurity [] Failure to thrive [] Infant illness [] Maternal illness [] Medications [] Not confident [] Reflux [] Weaning [] Weight check [] Other Details of other	[] Difficulty/not latching [] Hydration [] Slow to gain [] Decreased milk supply [] Sore nipples [] Thrush [] Plugged ducts/mastitis [] Engorgement [] Oversupply [] Prematurity [] Failure to thrive [] Infant illness [] Maternal illness [] Medications [] Not confident [] Reflux [] Weaning [] Weight check [] Other Details of other	[] Difficulty/not latching [] Hydration [] Slow to gain [] Decreased milk supply [] Sore nipples [] Thrush [] Plugged ducts/mastitis [] Engorgement [] Oversupply [] Prematurity [] Failure to thrive [] Infant illness [] Maternal illness [] Medications [] Not confident [] Reflux [] Weaning [] Weight check [] Other Details of other
Interventions	[] Position/latch assist [] Supplementation [] Milk expression/pump [] Nipple shield [] Nipple care [] Education [] Discuss medications [] Confidence building / reassurance [] Refer to primary caregiver [] Other Details of other	[] Position/latch assist [] Supplementation [] Milk expression/pump [] Nipple shield [] Nipple care [] Education [] Discuss medications [] Confidence building / reassurance [] Refer to primary caregiver [] Other Details of other	[] Position/latch assist [] Supplementation [] Milk expression/pump [] Nipple shield [] Nipple care [] Education [] Discuss medications [] Confidence building / reassurance [] Refer to primary caregiver [] Other Details of other
Minutes of Visit			

Note: The visit summary should not be placed in or replace documentation in the paper health record.