



# London Health Sciences Centre

## Patient Information

### GUIDELINES FOR FINGER FEEDING

Finger feeding is a way to feed your baby by using an infant feeding tube attached to your finger. This is often a **short-term** way to feed your baby until he is feeding at the breast. When learning to finger feed, work with a person who is skilled at helping breastfeeding families.

#### Advantages of Finger Feeding

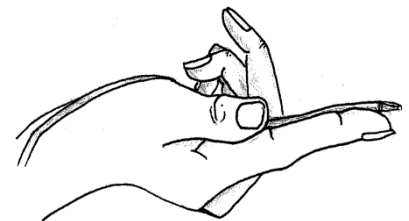
- Helps your baby to keep his tongue down and forward over the lower gum
- Helps your baby to suck with his tongue cupping your finger
- Avoids the use of an artificial nipple
- Provides a way to feed your baby until baby can breastfeed well

#### Supplies You Will Need

- #5 French feeding tube
- Container (syringe, cup or bottle)
- Expressed breast milk or pasteurized donor milk from a human milk bank
- If breastmilk is not available, use a store-bought formula
- Syringe with sterile water for cleaning the inside of the feeding tube
- Medical tape or a band-aid to secure the tube (optional)

#### How to Finger Feed

1. Wash your hands. The nail on the finger you are using should be clean and cut short. Many people like to use their index or middle finger.
2. Hold your baby in a comfortable, upright, sitting position. Your baby's neck and shoulders need to be supported.
3. Put the breast milk in the container. The larger end of the feeding tube will be placed in a bottle or cup or attached to the syringe.
4. Line up the smaller end of the feeding tube with the end of the finger you will be using to finger feed. The feeding tube will be resting on the soft pad of your finger (not the nail side) or along the side of your finger. You may tape the feeding tube or use your thumb to help hold the feeding tube in position.
5. Tickle your baby's lips until he opens his mouth enough for you to put your finger with the feeding tube inside.
6. Put your finger and the feeding tube inside your baby's mouth so that the soft part of your finger remains upwards and the nail side is against your baby's tongue. The feeding tube should stay on the upper surface or side of your finger.



Illustrator: Nancy Chao

7. Your baby will likely begin sucking on your finger. If your baby does not start sucking, try gently stroking your finger inside your baby's mouth. If your baby gags on your finger, move your finger a little toward your baby's lips.
8. As your baby sucks, try to keep your finger flat. You should feel your baby's tongue wrap around your finger and draw your finger in. Check that your baby's lips are rolled out. If the lower lip is drawn in, gently pull down on baby's chin.
9. If your baby must suck many times before swallowing or your feeds are taking longer than usual, talk to your health care provider or a person skilled in helping breastfeeding families.

## **How to Clean the Feeding Tube and Container**

1. Clean the feeding tube and the container right after every feeding. Do not let the milk dry in the feeding tube. If it does, use a new feeding tube.
2. Clean the feeding tube and container with warm, soapy water and rinse well. Squirt cooled boiled water through the tube with a syringe until the water runs clear. Push air through the tube to help dry the inside of the tube. Infant feeding tubes should not be boiled.
3. Remove the syringe from the feeding tube. Take apart the syringe. Place the feeding tube, container and syringe parts on a clean towel to dry. Once they are dry, place in a clean zip-lock bag or a covered container.
4. Replace the feeding tube and syringe as suggested by your health care provider. Never use a damaged feeding tube or syringe.

**Work with a health care professional that is skilled with helping breastfeeding mothers until your baby fully breastfeeds**

## **References**

- 1) Hoover, K. (2016) Feeding methods. In K. Wambach & J. Riordan (Eds.) *Breastfeeding and Human Lactation* (5<sup>TH</sup> ed.). Burlington, MA. Jones and Bartlett Learning, 249-250
- 2) Martens, P.J., Mannel, R., & Walker, M. (2013). *Core curriculum for the lactation consultant practice*. Jones and Bartlett Learning, 657-658
- 3) Walker, M. (2017). *Breastfeeding management for the clinician: Using the evidence* (4th ed.). Burlington, MA. Jones & Bartlett Learning, 274.
- 4) Watson Genna, C. (2017) *Supporting Sucking Skills in Breastfeeding Infants*, 3rd Ed. Burlington, MA: Jones and Bartlett Learning, 373-375.

Originally developed by the Middlesex London Breastfeeding Coalition August 1998, revised June 2015. Currently revised by the Breastfeeding Coalition of Southwestern Ontario with representation from Chatham Kent Health Alliance, London Health Sciences Centre, Middlesex London Health Unit, Strathroy Middlesex General Hospital, St. Thomas Elgin General Hospital and Southwestern Public Health, March 2020.