MUSC Prenatal Evaluation:

Date:

Surgeon present:

Speech Pathologist present:

Congratulations on your new baby! We are happy to be a part of the team caring for your child. Please keep this paper available for future use or questions. We will discuss the following with regards to feeding:

**Why bottle and breast feeding is different for your cleft baby:**

Babies with a cleft palate are unable to produce adequate suction, which is the heart of “sucking.” Cleft babies will “munch” on a paci or nipple, however, they are unable to express formula/breast milk because the open palate prevents your baby from creating the suction needed to express milk.

**Breastfeeding:**

While your baby can not breast feed for nutrition, we encourage bringing baby to breast (if desired) for bonding. You may use breastmilk in the bottles if also desired.

**Special Bottles:**

We are providing you with bottles today called Dr. Brown’s Specialty feeding system. They are unique because the blue valve allows your baby to simply compress the nipple to express milk. The blue valve is critical to feeding success and should not be removed. The blue valve may be used in other Dr. Brown’s bottles. You should start out by using a level 1 nipple (provided). Based on how your baby is feeding (discussed today), you may need a faster or slower nipple. As your baby ages, you will need to increase the level of the nipple. The bottles and valve do not change, just the nipples. Please **DO NOT** add rice cereal to your baby’s bottle. If you are advised to add rice to the bottle, please contact the team speech pathologist before doing so.

**If you have any questions or concerns regarding your baby’s eating, please contact Melissa Montiel, SLP at (w) 843-876-7200 or montiel@musc.edu**