

|  |  |
| --- | --- |
| **DIGITAL CASE STUDY 4** | |
| **Infant Feeding Case Study/Observation:** | |
| IFC Name: |  |
| Number of biological children?: |  |
| Age of Infant: |  |
| Date of Consultation/Observation: |  |
|  | |
| **Assessment – what do you observe?:** | |
|  | |
|  | |
|  | |
| **What is your analysis of the following?** | |
|  | |
| Feeding Dynamics:  Latch Quality:  Digestive Health: | |

|  |
| --- |
|  |
| **Intervention (nature of support provided by you):** |
|  |
| Feeding Environment:  Latch Assessment and Support:  Dietary Evaluation: |
|  |
| **Monitoring and Follow-up:** |
|  |
| Follow up:  Perceived outcome: |
|  |
| **Reflection on Practice and Learning:** |
|  |
|  |