

|  |  |
| --- | --- |
| **DIGITAL CASE STUDY 5** | |
| **Infant Feeding Case Study/Observation:** | |
| IFC Name: |  |
| Number of biological children?: |  |
| Age of Infant: |  |
| Date of Consultation/Observation: |  |
|  | |
| **Assessment – what do you observe?:** | |
|  | |
| Latching challenges:  Feeding Patterns: | |
|  | |
| **What is your analysis of the following?** | |
|  | |
| Latch and feeding efficiency:  Post-Feed Symptoms:  Weight Loss/Gain: | |

|  |
| --- |
|  |
| **Intervention (nature of support provided by you):** |
|  |
| Latch Assessment & Correction:  Feeding Observation and Reflux Assessment:  Weight Monitoring and Support:  Reflection on Practice and Learning: |
|  |
| **Monitoring and Follow-up:** |
|  |
| Follow up:  Perceived outcome: |
|  |
| **Reflection on Practice and Learning:** |
|  |
|  |