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

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