

INFANT FEEDING HISTORY, 0-6 MONTHS

Age of child	
Particular concerns about feeding of child	
Feeding	
Milk (breastmilk, formula, cow's milk, other)	
Frequency of milk feeds	
Length of breastfeeds/quantity of other milks	
Night feeds	
Other foods in addition to milk (when started, what, frequency)	
Other fluids in addition to milk (when started, what, frequency)	
Use of bottles and how cleaned	
Feeding difficulties (breastfeeding/other feeding)	
Health	
Growth chart (birth weight, weight now)	
Urine frequency per day (6 times or more), if less than 6 months	
Stools (frequency, consistency)	
Illnesses	
Pregnancy, birth, early feeds (where applicable)	
Antenatal care	
Feeding discussed at ante-natal care	
Birth experience (skin-to-skin contact, early breastfeed)	
Rooming-in	
Prelacteal feeds given	
Postnatal help with feeding	

This form is used to assess the introduction of appropriate, adequate and safe complementary foods

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Mother's condition and family planning	
Age	
Health – including nutrition and medications	
Breast health	
Family planning	
Previous infant feeding experience	
Number of previous babies	
How many breastfed and for how long	
If breastfed – exclusive or mixed fed	
Other feeding experiences	
Family and social situation	
Work situation	
Economic situation	
Family's attitude to infant feeding practices	

Reference: Infant and Young Child Feeding Counselling: An Integrated Course, A Trainers Guide World Health Organisation 2006 section 13, page 169.