OSCE checklist for breastfeeding support

An OSCE checklist for breastfeeding support covers asking how feeds are going, helping the mother get comfortable, checking the baby's position and attachment, watching a full feed and giving clear advice about feeding and seeking help.

OSCE checklist for breastfeeding support: steps to practise

1. Wash your hands, introduce yourself, confirm the mother's identity, and ask how she feels and how feeds have been going. Ask if she is happy for you to watch a feed and offer privacy.
2. Ask about the baby's wet and dirty nappies, alertness, colour, sleep and weight, and about any breast or nipple pain or damage.
3. Help the mother get into a comfortable position, with her back and arms supported and the baby brought to the breast, not the breast to the baby.
4. Check the baby's position: head and body in a straight line, held close and facing the breast, nose opposite the nipple, head free to tilt back.
5. Check the attachment: the mouth wide open, the chin touching the breast, more areola visible above the top lip than below the bottom lip and the lips turned out.
6. Watch the feed for a change from quick sucks to slow deep sucks with swallowing, and ask the mother whether there is pain.
7. Show how to break the suction gently with a clean finger before removing the baby if it needs to be re-attached.
8. Explain responsive feeding: feed whenever the baby shows feeding cues, which is often 8 or more times in 24 hours in the early weeks, and how to tell that a baby is getting enough.
9. Explain what to do for engorgement or sore nipples, and to seek help the same day for a red, hot, painful breast with fever, or a baby who is jaundiced, very sleepy, feeding poorly or has few wet nappies.
10. Wash your hands, record what you saw and what you taught, and refer to the midwife, health visitor or infant feeding team for persistent pain, poor weight gain or any concern.

What candidates commonly forget

- Not checking the baby's position and attachment
- Giving advice without watching a feed
- Not asking about wet and dirty nappies
- Assuming pain is normal
- Not explaining the warning signs for mother and baby
- Not giving contact details for more help

Local policy comes first

This is our own practice checklist. Your college, hospital or country may do some steps differently. Where local policy and this list disagree, follow local policy.

Practise the hands-on steps with a classmate or in a skills lab, because an AI patient cannot watch your technique. You can practise the talking part with an AI patient, and try one station free with no sign-up. Next, try Midwifery postnatal home visit with a feeding problem. Back to the OBG nursing OSCE page: OBG nursing OSCE, or see the full OSCE checklist list.

Common questions

What is the OSCE checklist for breastfeeding support?

Ask about feeds and nappies, help the mother get comfortable, check the baby's position and attachment, watch a feed, explain responsive feeding and signs of enough milk, explain warning signs, record and refer if needed.

What are signs of a good attachment?

A wide mouth, chin touching the breast, more areola above the top lip than below the bottom lip, slow deep sucks with swallowing and no pain.

How do I know the baby is getting enough?

Steady wet and dirty nappies, a baby who is alert and settled after feeds, and weight gain. Ask your course for the nappy numbers it teaches.

Sources

- NHS: breastfeeding
- NICE NG194: postnatal care

Checked 2026-11-13. Fees and rules change, so confirm them with the regulator before you book.