



Nutrition



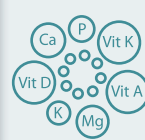
Providing mother's own milk (MOM) for preterm and ill term infants

Mothers are **encouraged and supported to provide their own breast milk** for their infant.



Establishment of enteral feeding in preterm infants

Early enteral feeding is established, based on a standard protocol, preferably with mother's own breast milk.



The role of nutrient supplements for preterm infants

Preterm infants are given **supplements to reduce nutritional deficits**.



The role of human milk banks

Standards are established for the safe use of **human donor milk when mother's own milk is not available**.



Written standards of nutritional practice

All units treating preterm and ill term infants **develop and implement guidelines on nutritional care** and aim at establishing nutrition support teams, inform and train all healthcare professionals regarding the use of these guidelines on nutritional care, and monitor implementation.



Effective implementation of early parenteral feeding

Parenteral nutrition is commenced on the **first day after birth**, usually using standard solutions, and continued until sufficient enteral feeding is established.



Feeding of late preterm infants

Early nutrition, preferably using **human milk**, is established and **feeding difficulties, growth, and breastfeeding are monitored** during and after hospitalisation.



The role of preterm formula

Formula for preterm infants promotes growth and functional outcomes approaching those of preterm infants fed fortified mother's milk.



Family education and training on infant feeding in the unit and after discharge

Parents develop appropriate **knowledge and skills in feeding** their preterm infant.



Monitoring growth in the neonatal unit

Growth monitoring and assessment of nutritional status is performed using **suitable equipment and appropriate growth charts** in order to optimise nutritional support and outcomes.

