

# MY LACTATION PLAN

BY

BREASTFEEDING IS IMPORTANT TO ME

MY PLAN IS TO BREASTFEED UNTIL

ON MY HARDEST DAY I CAN CALL

# MY LACTATION PLAN

BY

I HAVE SHARED MY LACTATION PLAN WITH

I WILL SHARE MY PLAN WITH MY OB/PEDITRICIAN

I HAVE MADE THE FOLLOWING PLAN TO TAKE CARE OF MYSELF DURING MY POSTPARTUM PERIOD