

NORTHWESTERN UNIVERSITY FEINBERG SCHOOL OF MEDICINE
DEPARTMENT OF SURGERY
POLICIES & PROCEDURES

Lactation Policy for Surgical Trainees

Updated August 2020

Given the short- and long-term medical and neurodevelopmental advantages of breastfeeding, the American Academy of Pediatrics recommends breastfeeding infants up to one year (1). To maintain milk supply, women need to express milk every 3-4 hours.

Rangel et al found that 58% of surgical trainees failed to meet their personal breastfeeding goals, and only 41% of surgical residents successfully continued lactation at 6 months (vs. 60% in the general US population) (2). Reported barriers to meeting breastfeeding goals included inadequate time, limited flexibility in work hours, insufficient access to lactation spaces (particularly in and around operating rooms), and perceived lack of support from administrators and peers.

The Northwestern Department of Surgery Residency Program has developed this policy in order to support the health and wellness of our lactating surgical residents.

Nursing mothers have access to following dedicated lactation rooms in Feinberg Pavilion and Galter Pavilion:

- Feinberg 2nd Floor, Rooms 2-316A and 2-316B (entry through the women's restroom)
- Feinberg 2nd Floor, Rooms 2-532 and 2-533 (by the Feinberg Cashier) – entry code is 4040
- Galter 5th floor, Room 5-122 (turn right off the public elevators, through Same Day Surgery doors, to the left)

Find a complete list of dedicated lactation rooms on the Chicago campus here:

<https://www.mcga.w.northwestern.edu/benefits-resources/benefits/family-resources.html>.

1. Departmental support

- The Department of Surgery strives to create a welcoming and inclusive environment for our diverse workforce.
- The Department of Surgery supports all residents who chose to provide breast milk to their infant(s). This includes appropriate time and facilities to express and store milk during the work hours, across all clinical settings (inpatient floor, ICU, outpatient clinic and operating rooms).
- This policy applies to all sites in which residents rotate.
- The Department of Surgery commits to the distribution of this policy to all faculty, staff and residents.
- If issues or concerns arise regarding a lactating resident's ability to express milk, the Program Director will lead conflict resolution to define and meet the lactating resident's specific needs.

2. Challenges faced by lactating surgical residents

- Health and wellness
 - Infrequent or insufficient expression can lead to plugged ducts, mastitis, or decrease in supply.

- Stress regarding significant time spent away from young child and ability to provide adequate amount of milk for them.
- Concern that she will be viewed differently than peers or as performing in a subpar manner purely due to lactation goals.
- Resident commitment to clinical obligations
 - Inability to schedule lactation breaks in advance given the unpredictable nature of clinical practice can potentially lead to infrequent or insufficient pumping.
 - Significant stress related to clinical obligations impacting the duration a resident is able to lactate (i.e. decreased supply leading to premature cessation of lactation duration goal)

3. Responsibilities of lactating resident

- Ongoing commitment to patient care and careful consideration for clinical continuity when determining appropriate times to express milk.
- Clear communication with attending surgeons, advanced practice providers and co-residents on the lactating resident's service regarding specific needs for lactation (e.g. planned frequency and timing, coverage if needed, specific concerns, etc.)

4. Clinical Settings

- Inpatient floors and ICU
 - Lactating resident needs to have clear communication with team members (co-residents, advanced practice providers) regarding pumping needs (See Section 3).
- Outpatient clinic
 - Lactating resident will be allowed to leave clinic to pump at a necessary interval.
 - Lactating resident will not leave during a patient encounter.
- Operating Room
 - Lactating resident will notify attending surgeon(s) on each service that they will require lactation breaks during prolonged procedures.
 - Lactating resident will minimize interruption to operating team by pumping before or after cases whenever possible and will not leave during critical portions of the operation.
 - Lactating resident will reach out to available team members to serve in their absence and will minimize their time out of operating room.
- Weekly conference and M&M
 - Lactating residents are allowed to leave mandatory teaching conference for pumping if necessary.

1. SECTION ON BREASTFEEDING. Breastfeeding and the use of human milk. Pediatrics. American Academy of Pediatrics; 2012 Mar;129(3):e827–41.
2. Rangel EL, Smink DS, Castillo-Angeles M, Kwakye G, Changala M, Haider AH, et al. Pregnancy and Motherhood During Surgical Training. JAMA Surg. 2018 Jul 1;153(7):644–9.