

Lactation

Please complete the survey below.

Thank you!

Following delivery of the child, would you recommend

	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
1) Breast feeding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2) Bottle Feeding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3) Maternal choice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If the mother with chronic intestinal failure is breast feeding, please select the frequency which best represents your usual practice or that which you consider to be best practice

	2 weekly	4 weekly	6 weekly	8 weekly	>8 weekly
4) Frequency of physical clinical review	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5) Frequency of maternal blood sampling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6) Frequency of assessment of nutritional status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please select the option below which best describes your opinion or experience with regarding PN formulation in association with breast feeding:

	Increase	Decrease	Remain the same	An individualised approach taken
7) Energy requirements/calorie content	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8) Lipid content	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9) Protein content	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10) Vitamins/Micronutrients content	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- 11) Are there specific vitamin and/or micronutrient changes you would typically make during this period?
-