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Recommended Core Competencies for Specialists Practicing Breastfeeding and Lactation Medicine

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Abstract

A central goal of the Academy of Breastfeeding Medicine is the development of clinical protocols for managing common medical problems that may impact breastfeeding success. These protocols serve only as guidelines for the care of breastfeeding mothers and infants and do not delineate an exclusive course of treatment or serve as standards of medical care. Variations in treatment may be appropriate according to the needs of an individual patient. The Academy of Breastfeeding Medicine recognizes that not all lactating individuals identify as women. Using gender-inclusive language, however, is not possible in all languages and all countries and for all readers. The position of the Academy of Breastfeeding Medicine (<https://doi.org/10.1089/bfm.2021.29188.abm>) is to interpret clinical protocols within the framework of inclusivity of all breastfeeding, chestfeeding, and human milk-feeding individuals.

Keywords: breastfeeding medicine, competencies, fellowship, lactation medicine, scope of practice, subspecialty

Introduction

THE ACADEMY OF BREASTFEEDING MEDICINE (ABM) is an international physician-led organization whose mission is dedicated to educating and empowering health professionals to support and manage breastfeeding, lactation, and human milk feeding.¹ Members around the world have increased their expertise in breastfeeding and lactation management in their respective fields to provide the best evidence-based support for breastfeeding and lactating families in their practices and communities. In addition, a group

of physicians have dedicated a part or the whole of their practice to the care of complex breastfeeding and lactation problems.

ABM's vision is focused on healthier lives worldwide through excellence in the medical care of breastfeeding and lactating individuals. For ~30 years, ABM has been bringing doctors together to provide evidence-based solutions to the challenges facing breastfeeding across the globe. A vast body of research has demonstrated significant nutritional, physiological, and psychological benefits for both mothers and children that last a lifetime. Although breastfeeding is the

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foundation of health and well-being, many barriers exist in the implementation of evidence-based practices, and the clinical practice of breastfeeding and lactation medicine has outpaced available research. By building on our legacy and sharing it with the broader medical community, we can overcome barriers, influence health policies, and change behaviors.

Looking to the future, the ABM has developed this document outlining the clinical competencies recommended for practicing breastfeeding and lactation medicine. The ABM has developed criteria for the ideal scope of knowledge and skills, the acquisition of which forms the basis of practice for a breastfeeding and lactation medicine subspecialist.²

CLINICAL, EDUCATIONAL, AND SCHOLARLY RECOMMENDATIONS TO SPECIALIZE
IN BREASTFEEDING AND LACTATION MEDICINE

<i>Clinical</i>	<i>Educational/scholarly activities</i>
<ol style="list-style-type: none"> 1. 1000 certified clinical hours <ol style="list-style-type: none"> a. 1000 documented clinical hours certified by a current fellow of the Academy of Breastfeeding Medicine mentor. b. 200 (20%) of these hours may be certified by an International Board Certified Lactation Consultant (teaching latch evaluation, pump mechanics, hand expression, and engagement relief techniques, alternative feeding techniques, and infant weight assessments). 2. Competencies, procedures, and skills listed below 	<ol style="list-style-type: none"> 1. 100 curriculum-specific education hours <ol style="list-style-type: none"> a. Based on below content with appropriate oversight, or 80 continuing medical education <i>with</i> 45 lactation continuing education recognition points 2. Encouraged activities are aspirational but not required. Ideally every medical doctor practicing in the arena of breastfeeding and lactation medicine will give back to the community in one of these ways. <ol style="list-style-type: none"> a. Research (e.g., peer-reviewed publications) b. Quality improvement c. Advocacy d. Scholarly activity (e.g., author textbook chapters, lecturer or host of conferences, create digital material, editor)

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<i>Theme</i>	<i>Category</i>	<i>Subtopics</i>
Systems-based practice and public health	Evidence and recommendations on breastfeeding and lactating	Understand and apply to practice: <ul style="list-style-type: none"> • Importance of breastfeeding for families • Physiological and biological mammalian weaning • World Health Organization (WHO) and ABM recommendations on duration of exclusive and any breastfeeding, along with national medical association recommendations from one's country of practice, and from other professional groups such as World Alliance for Breastfeeding Action (WABA), International Baby Foods Action Network (IBFAN), United Nations Children's Fund (UNICEF), and La Leche League International
	Baby friendly hospital initiative (BFHI)	Demonstrate familiarity with: <ul style="list-style-type: none"> • The WHO/UNICEF <i>Ten Steps to Successful Breastfeeding</i> • One's national BFHI committee and activities • One's regional baby friendly hospitals
	Demographics of breastfeeding	Know and understand: <ul style="list-style-type: none"> • Breastfeeding rates by demographics such as race, age, and socioeconomic status in one's practicing country • Rates and practices across continents with a minimal understanding of at least two other country-specific programs and rates • Methodology of data collection for these statistics • What socioeconomic, racial, education, and ethnic groups are most and least likely to breastfeed in one's region or country
	International, national, and local organizations/ programs that support breastfeeding and lactation	Understand the role of these organizations in: <ul style="list-style-type: none"> • Food/formula support for mother and infant • Breastfeeding support • Provision of free formula that may undermine breastfeeding • International support of infant nutrition and maternal child health, including IBFAN and WABA

(continued)

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Medical knowledge and patient care	Community/peer support	<p>Understand the role of the following in breastfeeding and lactation outcomes:</p> <ul style="list-style-type: none"> • Community outreach and advocacy • Peer counselors • Breastfeeding coalitions • Antenatal and postpartum support groups <p>Develop a deep understanding of one's specific community supporters:</p> <ul style="list-style-type: none"> • Maintain a database of one's local support network that can be distributed • Establish and maintain collaboration with community breastfeeding and lactation supporters • Local/state breastfeeding coalitions and their activities • Specialists who support breastfeeding and lactation
	Role of national/regional supports/policies	<p>Understand the role of the following policies' effects on breastfeeding and lactation outcomes:</p> <ul style="list-style-type: none"> • Public breastfeeding and lactation • Maintenance of lactation while separated from infants, that is, at work, school, incarceration • Milk expression at work, current laws and data from one's region or country • Government assistance for, or insurance coverage of pumps • Paid maternity, paternity, and parental leave • On-site childcare <p>Participate in:</p> <ul style="list-style-type: none"> • Community efforts to support legislation to protect breastfeeding/lactation • The education of others regarding policies that protect and support breastfeeding • Hospital policies that optimize breastfeeding support • Efforts to pass legislation that protects and supports breastfeeding and lactation
	Human milk banking	<p>Understand and apply to practice:</p> <ul style="list-style-type: none"> • Basic guidelines for screening, processing, pasteurization methods, distribution, and typical uses of banked milk • Different models of milk banking: not-for-profit, for profit, government sponsored • Issues of equity and fairness in distribution of human milk • Issues of religion in the use of other's milk (milk siblings, donor pooling) • Issues regarding informal human milk sharing including risks versus benefits, professional statements, and local resources
	Professional guidelines and protocols	<ul style="list-style-type: none"> • Have knowledge and confidence in applying all ABM protocols • Incorporate evidence from other professional organizations into clinical practice • Know and use other breastfeeding education and consulting platforms, either national or international
	Prenatal	<p>Understand and apply to practice:</p> <ul style="list-style-type: none"> • Timing for, and influences on, infant feeding decisions • Real and perceived barriers that influence a person's decision to breastfeed • Role of perinatal mood and anxiety disorders on breastfeeding and lactation rates • Prenatal counseling on breastfeeding and lactation • Evidence-based curricula for prenatal counseling/support • The identification of risk factors that may compromise breastfeeding/lactation • Counseling and referral of patients who have risk factors that may compromise breastfeeding/lactation • Engaging and educating fathers/partners and other family members • Patient education resources

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Recommended competencies, skills, and procedures for practicing breastfeeding and lactation medicine

Theme	Category	Subtopics
		<ul style="list-style-type: none"> • Counseling and management of breastfeeding during pregnancy, as well as tandem nursing postpartum • Counseling on breast changes during pregnancy • Prenatal breast examination • Management of breast pathology during pregnancy • Anticipatory guidance on how certain maternal/fetal/placental conditions and their treatment may impact lactation • Anticipatory guidance on how lactation may impact some maternal conditions such as pregestational diabetes • Anticipatory guidance of how birth experiences may impact lactation
	Birth practices impact on breastfeeding or lactating	<p>Understand how the following birth practices and experiences impact breastfeeding and lactation:</p> <ul style="list-style-type: none"> • Differences in practices between different obstetrical care specialties • Role of the doula • Role of the location of birth • Intrapartum antibiotic use • Induction and augmentation methods • Instrumented delivery • Intrapartum pain medication (analgesia, anesthesia) • Cesarean birth • Skin-to-skin, safe and unsafe practices • Secretory activation • Infant separation • Timing of cord clamping • Infant resuscitation
	Neonatal intensive care unit (NICU)/pediatric intensive care unit	<p>Be aware of the research regarding the use of mother's own milk and donor milk on:</p> <ul style="list-style-type: none"> • Bronchopulmonary dysplasia • Cardiac morphology and function • Feeding tolerance • Infant growth • Necrotizing enterocolitis • Infant neurodevelopment • Childhood obesity • Retinopathy of prematurity • Developmental delay <p>Understand and apply to practice:</p> <ul style="list-style-type: none"> • Neo baby friendly hospital initiative (neo-BFHI) • Evidence for health outcome differences between parent's/mother's own milk, donor milk, and formula • Use of colostrum for oral immune care • Parental and infant benefits of skin to skin <p>Evaluate and promote positive parental outcomes during infant hospitalization, including:</p> <ul style="list-style-type: none"> • Importance of early and frequent milk removal to optimizing long-term milk production • Changes in milk production volumes and volumes that predict successful breastfeeding at discharge • Kangaroo care and related research on nurture science • Parental challenges regarding frequency of milk expression • Potential parental mental health outcomes associated with an NICU admission • Role of breastfeeding and skin-to-skin care during painful procedures <p>Understand and apply to practice:</p> <ul style="list-style-type: none"> • Evidence surrounding targeted fortification of human milk for growth of infants discharged from the NICU • Different options for fortification and discontinuing fortification • Appropriate breastfeeding and lactation support for infants and children who struggle with feeding after discharge

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Recommended competencies, skills, and procedures for practicing breastfeeding and lactation medicine

<i>Theme</i>	<i>Category</i>	<i>Subtopics</i>
	Sleep	<p>Understand and apply to practice:</p> <ul style="list-style-type: none"> • Counsel families on infant sleep patterns immediately postpartum • Role of BFHI in sleep patterns • Risk reduction counseling regarding bedsharing • Factors that are associated with safer infant sleep • The effect of sleep on peripartum mood and anxiety disorders
	Postpartum mothers/lactating parents	<p>Understand and apply to practice:</p> <ul style="list-style-type: none"> • Reasons for premature weaning • Role of the microbiome <p>Understand patient experiences in the postpartum period such as:</p> <ul style="list-style-type: none"> • Postpartum perineal and surgical site pain • Exhaustion • Stress • NICU experiences • Breast changes • Physiological changes • Peripartum mood and anxiety disorder screening and management • Parental confidence • Parental education <p>Understand the immediate postpartum conditions and concerns listed hereunder and their relationship with breastfeeding or lactating:</p> <ul style="list-style-type: none"> • Perineal lacerations • Uterine contractions • Surgical site knowledge • Baby blues • Maternal/birth parent infection • Peripartum mood and anxiety disorders • Nipple wounds • Sexual function • Hormone changes • Fertility • Anesthesia and analgesia effects/safety • Obstetric comorbidities <ul style="list-style-type: none"> ○ Preeclampsia/gestational hypertension ○ Unplanned/emergency cesarean birth ○ Gestational diabetes ○ Obstetric hemorrhage/Sheehan syndrome ○ Retained placenta <p>Know common conditions with respect to lactation outcomes, manage if appropriate:</p> <ul style="list-style-type: none"> • Polycystic ovary syndrome • Obesity • Thyroid disorders • Diabetes type 1, type 2, gestational • Delayed secretory activation • Maternal/lactating parent substance use, recreational drug use, and drug addiction/abuse • Peripartum mood and anxiety disorders, suicidality or psychosis <p>Understand and manage common complications of lactation, including:</p> <ul style="list-style-type: none"> • Lack of maternal/parental knowledge/confidence • Breast engorgement • Nipple pain • Perceived or actual low milk supply • Failed secretory activation

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Theme	Category	Subtopics
		<ul style="list-style-type: none"> • Mastitis spectrum • Chronic breast pain • Immediate postpartum formula supplementation • Nipple vasospasm • Nipple blebs • Overactive let down • Overproduction • Plugged duct(s) • Lactation induction • Galactagogue use • Care of breastfeeding, or lactating parent in context of adoption, surrogacy, fertility, and LGBTQ+ families • Mood, trauma, and social support problems • Superficial skin and nipple/areolar complex diseases • Effect on lactation of pre-existing or new onset maternal diseases • Medication management • Maintenance of breastfeeding or lactating in high-risk conditions of parent or infant • Maternal procedures, imaging, or surgeries • Ankyloglossia/tongue tie effect on lactating dyad
	Contraceptives	<p>Understand and apply knowledge to practice regarding lactation:</p> <ul style="list-style-type: none"> • Lactational amenorrhea • Nonhormonal contraceptives and efficacy • Hormonal contraceptives • Contraceptive efficacy, risks, side effects • Medical eligibility criteria recommended by one's country and/or the WHO • Racial/ethnic health care inequities pertaining to birth control, and how this may impact lactation in vulnerable populations
	Immediate and early care of newborns	<ul style="list-style-type: none"> • Know and understand lactation implications for common and uncommon newborn complications, including: <ul style="list-style-type: none"> ○ Ankyloglossia ○ Child abuse/neglect ○ Concerns and importance of human milk use in complicated infant/child conditions (e.g., diabetes, cancers, immunosuppression) ○ Congenital defects ○ Cleft lip and/or palate ○ Food intolerances and allergies ○ Fractured clavicle ○ Gastroesophageal reflux disease ○ Hypoglycemia ○ Hypotonic infant ○ Jaundice ○ Low birth weight ○ Meconium aspiration ○ Metabolic disorders ○ Neonatal seizures ○ Neurological injury (hypoxia, hypoxic ischemic encephalopathy, brachial plexopathy, facial nerve palsy) ○ In utero positional deformities such as torticollis ○ Prematurity (NICU versus late preterm) ○ Significant weight loss, hypernatremia, dehydration management ○ Poor weight gain with or without poor milk transfer ○ Suck dysfunction ○ Subgaleal hemorrhage ○ Tandem feeding effects ○ Transient tachypnea of the newborn

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Recommended competencies, skills, and procedures for practicing breastfeeding and lactation medicine

<i>Theme</i>	<i>Category</i>	<i>Subtopics</i>
		<p>Understand and apply indications for:</p> <ul style="list-style-type: none"> • Counsel on methods of supplementation • Counsel on appropriate volumes and timing of supplementation
	Absolute, transient, and relative/partial contraindications to breastfeeding or expressed milk feeding	<p>Understand and apply to practice:</p> <ul style="list-style-type: none"> • Absolute contraindications to breastfeeding and how they can be managed • Transient contraindications to breastfeeding • Active or past substance use or abuse during pregnancy and/or lactation • Breastfeeding cessation in the setting of contraindications and educate about feeding options
	Risk factors for breastfeeding difficulties or lactation failure	<p>Evaluate dyads for risk factors for breastfeeding difficulties or lactation failure and treat or counsel appropriately, including:</p> <ul style="list-style-type: none"> • History of breast or chest radiation • History of breast/chest surgeries • History of childhood cancer • Antenatal counseling for a pregnant person with a fetus with congenital defects that may impact infant feeding • History of nipple deformities • History of infertility • History of prior breastfeeding difficulties or lactation failure • History of severe postpartum hemorrhage or Sheehan syndrome • History of mammary hypoplasia • Medication that may impact lactation • History of prolactinoma • Maternal/parental medication that may be incompatible with lactation • Severe postpartum illness in the lactating parent • Anticipated surgery or other medical procedures postpartum
	Medication safety	<p>Understand and apply to practice knowledge of the management of medications in breastfeeding and lactation, including, in particular:</p> <ul style="list-style-type: none"> • Pharmacology of medication transfer to milk • Evidence-based resources available to physicians and patients • Most commonly used medications and their impact on infant health and lactation • Use of iodinated contrast/gadolinium during lactation • Radioisotope contrast agents • Anesthesia for the lactating parent • Use of galactagogues • History of opioid use disorder • Use of cannabidiol oil • Medication counseling with respect to gestational age and health of the infant • The differences in medication side effects during exposure in utero versus during lactation • Newborn/infant signs of in utero medication toxicity
	Care of LGBTQ+ patients human milk feeding including chestfeeding	<p>Be able to evaluate and manage the care of patients who do not identify as cis-gender and/or heterosexual, and common lactation implications for this group, including:</p> <ul style="list-style-type: none"> • Chestfeeding as affirmed terminology among some transgender males • Gender dysphoria in milk production and infant feeding • Colactation risks, benefits, and management • Use of donor milk and milk sharing in LGBTQ+ communities • Induction of lactation in nonbirthing parents and partners

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Recommended competencies, skills, and procedures for practicing breastfeeding and lactation medicine

Theme	Category	Subtopics
Patient care: Lactation support skills	Understanding/supporting normal breastfeeding and lactational physiology	<ul style="list-style-type: none"> • Importance of language and gender-affirming care in patient outcomes • Role of health care providers in patient support, lactation management, and advocacy • One's national laws and practices surrounding LGBTQ+ patients Understand and apply BFHI steps in clinical practice
	Logistics of milk expression	Understand and apply in clinical practice: <ul style="list-style-type: none"> • Basic concept of milk expression <ul style="list-style-type: none"> ○ Types of breast pumps ○ Basic operation of breast pumps ○ Flange fitting ○ Physiology of milk expression ○ Hands-on pumping ○ Management of complications of milk expression ○ Counseling patients on pumping
	Assessment of intake	Understand and apply in practice: <ul style="list-style-type: none"> • Use of infant growth curves • Use of the newborn weight loss tool • Use of pre- and postfeed weights • Counsel families on infant feeding cues and amount of supplementation
	Use of human milk substitutes/infant formulas	Understand and apply in practice: <ul style="list-style-type: none"> • Different infant formula formulations • Counsel families regarding safe preparation of powdered formula • Counsel families on paced bottle feeding
Patient care: Infants and children	Infant	Understand and apply to practice, according to national recommendations: <ul style="list-style-type: none"> • Vitamin D supplementation • Vitamin K supplementation • Introduction of culturally acceptable age-appropriate complementary foods • Indications for iron supplementation
	Toddler	Know and understand common concerns for toddlers: <ul style="list-style-type: none"> • Weaning strategies • Healthy maternal–infant attachment • Dental hygiene and lactation
	Older child	Know and understand issues around the older child: <ul style="list-style-type: none"> • Weaning strategies
	Bottle feeding/other feeding types	Demonstrate familiarity with bottle feeding and feeding with other devices: <ul style="list-style-type: none"> • Finger, cup, syringe, supplemental nursing system • When to introduce a bottle • Paced bottle feeding • Safe storage of human milk
	Prematurity and NICU	Know specific benefits of human milk use and how to manage feeding for the ill infant or preterm infant in the NICU: <ul style="list-style-type: none"> • Instituting pumping or hand expression • Sources of donor milk for intensive care units and their differences, including preterm/term donor milk • Colostrum expression • Hand expression/spoon feeding • Assessment of maternal anxiety/depression (heightened in NICU) • NeoBFHI steps

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Procedural skills/ devices/ interventions	Devices	Demonstrate familiarity with devices utilized with infant feeding: <ul style="list-style-type: none"> • Nipple shields • Shells • Nursing pads • Drip milk collectors • Supplemental feeding devices
	Creams and lotions	Demonstrate familiarity with topical preparations for the nipple: <ul style="list-style-type: none"> • Use of topical application of creams and lotions to the nipple areolar complex
	Procedures	Understand and apply to practice: <ul style="list-style-type: none"> • Imaging in a breastfeeding or lactating patient • Lingual frenotomy • Human milk culture; indications, methods, and interpretation of results • Reverse pressure softening • Management of a nipple bleb • Optional: breast biopsy, occupational/feeding therapies, maxillary frenotomy, incision and drainage of breast abscess, occupational/speech therapy feeding assessment and recommended therapies
Physical examination	Mothers/lactating parents	Understand physical and behavioral signs of mood, affect, stress, and psychological disorders Know normal range of blood pressure, and understand steps in management for hypertensive disorders of pregnancy Understand proper examination of: <ul style="list-style-type: none"> • Preconception, intrapartum, and postpartum breast examination • Breast anomalies, including surgical • Nipple anomalies • Skin, including surgical scars and skin of the breast • Identify extramammary signs of common conditions affecting lactation • Assess for neuropathic disorders of breastfeeding in the hands and arms
	Infants and children	Know and understand steps in management of abnormal newborn, infant, and child vital signs Understand proper examination of: Infant oral cavity: <ul style="list-style-type: none"> • Palate • Lingual and maxillary frenula • Oral lesions • Normal newborn oral structures and anomalies General infant examination: <ul style="list-style-type: none"> • Head and neck examination • Neurologic examination • General examination for wellness and hydration • Dermatological examination, jaundice assessment • Growth assessment Functional assessment of infant feeding: <ul style="list-style-type: none"> • Tongue function with use of validated tools • Suck/swallow/breathe evaluation and suck dysfunction
Practice-based learning and improvement	Culture of safety	Know and understand: <ul style="list-style-type: none"> • Know the reasons for risk mitigation • Culture of safety: open discussions, time outs, risk reporting
	Areas of high risk	Know and understand: <ul style="list-style-type: none"> • Caring for lactating parent/mother and baby and others outside of “original” scope of practice
	Risk mitigation	Understand and apply to practice: <ul style="list-style-type: none"> • Discuss how these risks could be mitigated

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Systems-based learning and improvement	Billing and practice management	Understand and apply to practice, if applicable: <ul style="list-style-type: none"> • Billing for pregnant/lactating person and baby • Local billing practices • Patient responsibility for payment • Billing and practice management with lactation consultants • Different medical systems (solo/group practice, single specialty/multispecialty operation) • “Business Case for Breastfeeding,” Office of Women’s Health, United States
	Working with other provider types	Understand and apply to practice: <ul style="list-style-type: none"> • Positive interdisciplinary and interprofessional practices with others in the community who support lactating dyads • Communicate and coordinate feeding plans with other physicians, providers, and lactation support individuals for whom you provide consultation
	Practice-based learning and quality improvement	Demonstrate understanding of quality improvement processes: <ul style="list-style-type: none"> • Plan, do, study, act cycles, design of interventions • Importance of data and feedback • Engagement of staff
Interpersonal and communication skills Professionalism	Communication skills	Apply communication tools to practice: <ul style="list-style-type: none"> • Use of tools for efficient communication
	Professionalism	Demonstrate professionalism in practice: <ul style="list-style-type: none"> • Respect during physician examination • Process of informed consent for examination or procedures • Documentation of consent • Conflict resolution with interdisciplinary concerns
	Ethical principles	Understand and apply to practice: <ul style="list-style-type: none"> • Shared decision making • Avoiding coercion • The International Code of Marketing of Breast-Milk Substitutes (WHO Code) • Health equity <ul style="list-style-type: none"> ○ Providing breastfeeding and lactation medicine care equitably in one’s community ○ Community engagement for collective impact ○ Attention to health equity in one’s practice (e.g., locations, translation services, data tracking, insurances accepted, and images inclusive of demographics served)
Medical knowledge: Supporting normal physiology	Gross anatomy	Know and understand: <ul style="list-style-type: none"> • Embryonic development of mammary glands • Fetal and prepubertal development of mammary glands • Pubertal development • Anatomic aspects of the breast
	Breast histology	Know and understand: <ul style="list-style-type: none"> • Lactocyte development • Mammary gland before, during, and after lactation • Lactogenesis I during pregnancy • Apoptosis during weaning
	Hormonal control of lactation	Know and understand role of hormones in: <ul style="list-style-type: none"> • Embryogenesis • Mammogenesis • Lactogenesis I, II, III • Endocrine and autocrine control of lactation • Induced lactation
	Synthesis of human milk	Know and understand: <ul style="list-style-type: none"> • Lactocyte function • Intermediary metabolism of mammary gland
	Involution	Know and understand: <ul style="list-style-type: none"> • Weaning • Apoptosis • Changes in breast shape, texture, composition

LGBTQ+, lesbian, gay, bisexual, transgender, queer, questioning, plus.

Methodology

The content was created by consensus by members of the Subcommittee on Subspecialty Development of the ABM Education Committee. These volunteers, who are all fellows of the ABM, were selected for their expertise in various themes and categories in breastfeeding and lactation medicine. The process continued until redundancies were eliminated and no further novel material was identified for addition. The competencies were then sent to general membership for review and commentary. Those suggestions were weighed and incorporated. The content was reviewed by the protocol and education committees and approved by the board of directors of the ABM.

Summary

Physicians across many specialties practice breastfeeding and lactation medicine around the world. The ABM recognizes that excellence in the medical care of breastfeeding, lactation, and human milk feeding leads to healthier lives worldwide. This document aims to improve the provision of clinical lactation care by outlining the recommended clinical competencies for medical doctors practicing breastfeeding and lactation medicine. Ensuring universal knowledge and skills will best promote, protect, and support breastfeeding.

Acknowledgments

The authors recognize that such work is born of the efforts of many. As such, we thank the many physicians across the 20th Century who first began the research and clinical practice forming the basis of this document, in a time when support for their study was minimal. We also honor the energy, passion, and vision of those in practice today, building the future of this field.

Disclosure Statement

The authors are clinicians who practice breastfeeding and lactation medicine and have all contributed to this document. There are no competing financial interests to disclose among authors.

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