



## Dr. Brown's<sup>®</sup> Nipple Level Selection Guidelines for the Specialty Feeding System (SFS)

The Dr. Brown's<sup>®</sup> Specialty Feeding System (SFS) is a unique bottle system designed in collaboration with medical professionals seeking an oral feeding solution for infants identified with complex feeding challenges such as those often observed in infants with cleft lip and palate, ankyloglossia, high-arched palate, oro-neuromotor dysfunction, common or rare syndromic sequences and/or craniofacial anomalies.

Each SFS includes a Dr. Brown's Natural Flow<sup>®</sup> 4 oz or 8 oz bottle vessel and Internal Vent system; 1 – Dr. Brown's<sup>®</sup> standard silicone Level 1 nipple; and an Infant-Paced Feeding Valve in the nipple.

The Dr. Brown's<sup>®</sup> Specialty Feeding Systems may be used in combination with any of the 6 Dr. Brown's<sup>®</sup> nipple levels, including the Ultra-Preemie<sup>™</sup> and Preemie Flow<sup>®</sup> nipples as well as Levels 1-4 as necessary to increase or decrease the nipple flow rate to meet the individual feeding skill of the infant.

Clinical testing of the SFS system revealed the flow rate of the Dr. Brown's<sup>®</sup> Level 1 nipple was sufficient for a full-term infant born with a cleft palate. **However, it is very important to ALWAYS assess the individual infants oral feeding skill ability to safely tolerate the Level 1 nipple flow rate during PO feedings with the SFS prior to recommending a nipple level.**

### Important facts to consider when selecting an appropriate nipple level/flow rate when using Dr. Brown's<sup>®</sup> Specialty Feeding System:

- The use of the Dr. Brown's<sup>®</sup> Infant Paced Feeding Valve allows an infant to generate a bolus by maximizing the infants' skill in the compression phase of sucking through their own lingual elevation and strength with each sucking "attempt". This may result in a maximal flow rate of a specific nipple level. As a result of individual variations across patients, clinicians may consider selecting a slower flow nipple flow rate/nipple level.
- Infants who demonstrate difficulty managing the Level 1 nipple level flow rate, noted through direct observation of behavioral and physiological distress signs during oral feeding with the SFS, may require a decrease in flow rate. If needed, consider replacing the Level 1 nipple with a Preemie Flow<sup>®</sup> or Ultra-Preemie<sup>™</sup> nipple (slower flow nipples) to provide the infant with bolus management, as needed.
- Infants who demonstrate safe, efficient, and positive oral feedings using the Level 1 nipple flow rate may require an increase in nipple flow rate as mature feeding and swallow patterns are demonstrated throughout the continuum of feeding skill development.
- The flow rate of each nipple level does NOT change when using a fully assembled SFS with the Infant Paced Feeding Valve.

**The guidelines on the reverse, adapted from the Dr. Brown's<sup>®</sup> Nipple Level Selection Guidelines for the Clinical Setting, are useful for determining which Dr. Brown's<sup>®</sup> nipple level and flow rate best align with an individual patient's feeding skill.**





## Dr. Brown's<sup>®</sup> Nipple Level Selection Guidelines for the Clinical Setting

To compliment your infant driven and cue based feeding practice, you will need to determine which Dr. Brown's<sup>®</sup> nipple level and flow rate best align with an individual patient's feeding skill.

Please refer to the information listed below:

- **Dr. Brown's<sup>®</sup> Ultra-Preemie<sup>™</sup> Nipple**

Slowest flow rate designed to support infants struggling with bolus control, demonstrated by difficulties in coordination of suck/swallow/breathe or exhibiting stress cues when using faster nipple flows.

- **Dr. Brown's<sup>®</sup> Preemie Flow<sup>®</sup> Nipple**

The Preemie level flow rate is also used for infants requiring a slower flow nipple rate due to difficulties with bolus control or infants with a history of prematurity. Flow rate is 35% faster than the Dr. Brown's<sup>®</sup> Ultra-Preemie<sup>™</sup> nipple.

- **Dr. Brown's<sup>®</sup> Level 1 Nipple**

The Level 1 nipple flow rate may be used for infants with established feeding skills/maturity not requiring the use of a slow flow rate. Flow rate is 60% faster than Dr. Brown's<sup>®</sup> Preemie Flow<sup>®</sup> nipple.

- **Dr. Brown's<sup>®</sup> Level 2 Nipple**

60% faster flow rate than Dr. Brown's<sup>®</sup> Level 1 nipple.

- **Dr. Brown's<sup>®</sup> Level 3 Nipple**

50% faster flow rate than Dr. Brown's<sup>®</sup> Level 2 nipple.

- **Dr. Brown's<sup>®</sup> Level 4 Nipple**

50% faster flow rate than Dr. Brown's<sup>®</sup> Level 3 nipple.

- **Dr. Brown's<sup>®</sup> Y-Cut Nipple**

The Y-Cut Nipple flow rate should only be used when dispensing the highest level of viscosity. Not for use with preterm infants.

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Dr. Brown's<sup>®</sup> Levels 2, 3 and 4 have been reported to be efficient when dispensing thicker liquid consistencies, as reported by Medical Professionals.

Dr. Brown's<sup>®</sup> Medical does not endorse the clinical practice of thickening PO feedings. Nipple level flow rates described above are based on testing with thin liquid viscosity.

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For more information, please contact the Dr. Brown's<sup>®</sup> Medical Advisor at [medical@handi-craft.com](mailto:medical@handi-craft.com)

