

Chapter 2

Troubleshooting Guidelines for Hollister Pumps

Hollister Breast Pump Troubleshooting Guidelines

The following troubleshooting guidelines should be used when a WIC participant claims that her breast pump is not working. Ask the mom why she feels her pump is not working correctly and skip to the appropriate troubleshooting statement.

If the pump won't turn on ...

Elite

- Is the pump plugged in?
- Is the vacuum turned on? The vacuum is the on-off mechanism.
- If yes, ask the mother to come in and get a replacement pump. Follow the procedures below to contact Hollister about the pump.

Purely Yours

- Is the AC adapter plugged into the wall?
- Is the AC adapter plugged into correct side of the pump?
- If she is using batteries instead of the AC adapter, the pump may need new batteries.
- If you cannot solve the problem ask the mother to come in and follow the procedures on page 23 to issue her a replacement motor unit and contact Hollister about the pump.

If the mom complains that it hurts to use the pump ...

- Ask if she is using the reducing insert. Most women do not need it.
- Ask how high she normally has the vacuum. Putting the vacuum on high will not help produce more milk and could cause her discomfort. Tell her to turn the vacuum up only as high as is comfortable for her.
- If she complains that the flange feels too tight, or if her nipple is rubbing against the nipple tunnel, or if she has red streaks or blisters around the nipple area in a circular pattern, she may need a larger breast flange.
- Lactation consultants in Texas have found that up to 50 percent of the moms they issue pumps to need a larger breast flange. Extra-large flanges are available from Hollister. The state agency recommends ordering at least one shipping case (six sets of flanges) to have available at each local agency.

If an Elite or Purely Yours pump is making strange noises ...

- Have the mom check that the white valves and diaphragms are in place.
- If so, ask the mother to come in so you can take a look at the pump. If you cannot solve the problem, issue her a replacement motor unit and contact Hollister about the pump.

If the mom is concerned that her breast pump does not have enough vacuum or that her milk supply is decreasing ...

- Please read Concerns about Milk Supply, pages 29–30. Be sure to ask the mother how often she is currently nursing her baby.
- Use the following troubleshooting questions to try to solve the problem over the phone. If you cannot solve the problem over the phone, ask the mom to come in; use the vacuum gauge provided by the state agency to check that the vacuum is working properly. The Guidelines for Using the Vacuum Gauge immediately follow this section.

Purely Yours and Elite

- Are the white valve and diaphragm in place? The pump will not work unless both the valve and diaphragm are in place.
- Is the white valve torn? If so, ask her to replace the white valve with a new one. If she has run out of her replacement valves, have her come in to get two more.
- Does the participant have the vacuum turned up?
- Is she using the reducing insert in the breast flange? Only women with small nipples need this.

One-hand manual breast pump

- Have the mom check for valve placement and integrity of the valve.
- Make sure the piston seal is in place. Sometimes when the piston seal is removed from the piston it is not put back on all the way. A simple way to have her check this is to have her run her finger around the bottom of the piston. It should be flat.
- Is the handle clipped too low? The top of the handle should be flat.
- Hold the manual pump high on its body for better control.
- Is she using the reducing insert in the breast flange? Most women don't need this.

If you are unable to resolve the problem over the phone:

- Have the participant bring the entire pump and kit to the clinic.
- See if you can fix the problem or follow the vacuum gauge instructions on pages 25–26 and see if the vacuum is functioning correctly. If you cannot fix the problem, contact Hollister Quality Control at 1 (800) 323-4060 (press option 3). Even if you know that the pump is out of warranty, you should still contact Hollister Quality Control.
- Tell Hollister you are from a Texas WIC clinic and have a pump that is not working properly. The representative will ask you what the pump is or is not doing.
 - If it is a Purely Yours pump, the Hollister representative will ask you what date it was issued to the participant.
 - If it is an Elite pump, the Hollister representative will ask you for its serial number and what date it was received by your local agency.

Issuing Replacement Parts

If you are unable to fix the problem and the mother is enrolled in WIC and still needs a breast pump, you will need to issue her a replacement part (such as a new motor unit) to fix the pump. This is regardless of whether or not the pump is under warranty.

1. Issue the participant a replacement for only the broken part of the pump, with a new part from a new pump, a new kit, or free replacement parts that you ordered from the state agency. (See page 8 for information on ordering free replacement parts)
2. Log out the replacement part on the appropriate inventory form. For example, if you issue a new Purely Yours motor unit, log the issuance on the WIC Inventory Log for Single-User Electric Breast Pumps.
3. Clearly mark the opened new pump as incomplete so it is not issued to another WIC participant.
4. It is not necessary to give the mom an entire new pump and or kit unless you are uncertain what the problem is. If you are uncertain, let the Quality Control Representative know when you call.

Warranty

- If the pump is under warranty, Hollister will send a label for the pump to be shipped back to the company for the repair or replacement.
- If the pump is not under warranty, you will be transferred to another Hollister representative.

Out of Warranty Purely Yours

If a Purely Yours is out of warranty and the mother is still enrolled in WIC and still needs a breast pump, you may issue a replacement part (such as a new motor unit) to fix the pump.

Out of Warranty Elite

1. Contact Hollister at 1(800) 323-4060; press option 5, “quality assurance.” They will ask for the serial number of the pump, which part of the pump is not functioning correctly, and the date issued.
2. If the pump is out of warranty, Hollister will provide the local agency an address to ship the pump to for the repair estimate. The LA will be responsible for the shipping cost to Hollister. The shipping cost is a breastfeeding-allowable expense.
3. To avoid being liable for the cost of the pump, be sure to write that the pump is “out for repair” on the *Master Inventory Log for Multi-user Electric Breast Pumps*.
4. Once Hollister receives the pump, the company will contact the LA by phone with a repair estimate. If the LA does not choose to repair the pump, Hollister will keep the pump and dispose of it appropriately at no charge.
5. Once the LA has decided not to repair a pump, the pump’s destruction should be noted in the *Master Inventory Log for Multi-User Electric Breast Pumps*.

Generally the state agency recommends repairing a pump if the cost is less than \$100. However, since local-agency funds must be used for the repair, local agencies need not repair pumps that are out of warranty.


Lengths of warranty:

- Purely Yours — received by the local agency prior to January 2004 — 1 year from date of issuance
- Purely Yours — received by the local agency after January 2004 — 2 years from date of issuance
- Elite — received prior to January 2004 — 2 years from the date received at your local agency
- Elite — received after January 2004 — 4 years from the date received at your local agency.
- Hollister one-hand manuals — 90 days

Hollister Vacuum Gauge Guidelines

The vacuum gauge measures the amount of suction produced by the breast pump. To use the gauge:

1. Check whether the gauge is calibrated (with the arrow pointing to zero). If it is already calibrated, skip to step 2.
 - a. If the gauge is not calibrated, use a flat screwdriver to lift the plastic cover off the gauge.
 - b. Adjust the screw at the bottom of the gauge toward – or + to bring the needle back to zero.
 - c. Replace the plastic cover on the gauge.
2. Place the gauge in the breast flange.
3. If you are checking the pump as a one-sided pump make sure you have removed one tube and closed the white pump connector. If you are checking the pump as a two-sided pump make sure both tubes are attached to the white pump connector.
4. If you are using the pump as a double pump, place the additional rubber stopper provided in the other breast flange.
5. Turn on the pump to maximum speed and maximum vacuum settings.
6. Allow the pump to operate for a few minutes to establish a rhythm before taking readings.
7. To read the gauge in mm of Hg be sure to look at the numbers on the inside dial.
8. Appropriate vacuum ranges at maximum speed and vacuum:
 - Elite
 - –223 to –262 mm Hg as a single-sided pump
 - –197 to –232 mm Hg as a double-sided pump
 - Purely Yours
 - –243 mm Hg or greater as a single-sided pump
 - –175 to –214 mm Hg as a double-sided pump

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9. Appropriate vacuum at minimum speed and vacuum settings:
 - Elite
 - -75 mm Hg or less as a double pump
 - Purely Yours
 - -75 mm Hg or less as a double pump
 10. If the levels do not fall within the appropriate ranges:
 - Try checking each side separately to see if both sides are low, or only one side. If only one side is low then the problem is with the kit. Try replacing the white valve.
 - Check that all of the HygieniKit's parts are intact.
 - Ensure that there is an appropriate seal between the flange and the rubber stopper.
 - If the pump still does not give the appropriate readings, call Hollister at 1 (800) 323-4060 (press option 3).

Concerns About Milk Supply

If a mother is concerned about her milk supply and feels her pump is not working appropriately, follow the *Breast Pump Troubleshooting Guidelines* to check that the pump is working properly. If the pump is in good working condition, the following points may be used to guide a discussion about her concerns.

- Consider the length of time the mother has been using the pump.
The first time an electric pump is used, a mother may only get a minimal amount of milk. The more a pump is used, the more her brain becomes familiar with the pump and directs the pituitary gland to make and release milk. Therefore, the more a pump is used, the more milk can be expressed as the brain becomes familiar with the signal. Some women have so much trouble eliciting a let-down that they find more milk can be expressed if they pump one breast while the baby is nursing at the other. This can also be done with a one-handed manual pump.
- Ask the mom what she thinks about when she tries to pump, or if she is under a great deal of pressure at her work.
If she is stressed at work or overly focused on finishing the pumping session as quick as possible she may find it hard to elicit a let down. Tell her to try and think about her baby. She could try looking at a picture of her baby or even listening to a tape of the baby crying.
- Ask the mom if she has been pumping on a regular schedule at work.
It's very easy to get busy at work and skip or delay a scheduled pumping. Remind the mom of the importance of pumping regularly or whenever her breasts feel full or heavy. Unrelieved pressure or fullness in the breasts will cause the mother's body to down-regulate her milk supply.
- Ask how often she has been feeding the baby at the breast when they are together.
A baby is much more effective than the breast pump at eliciting and maintaining a large milk supply. If she has recently stopped feeding her baby at the breast or if she has decreased the number of times she nurses, it may cause her supply to decrease. If this is the case, see if she can use 1–2 days' vacation time to stay home and nurse her baby to boost her milk supply.

- Ask if there is a particular time of day that she finds she produces less milk.

Many women find they pump less milk at the end of the workday and at the end of the workweek. This is normal; it doesn't mean they don't have enough milk. Remind the mother that, the softer or less full the breast, the higher the fat content of the milk. Although the baby may be taking in less volume at the end of the day, the fat content of the milk is higher, ounce for ounce, resulting in a satisfying feeding with less volume. Remind the mother that the best time to collect extra milk is in the mornings.

- Be sure also to ask about her baby — how he seems to be doing — and about the number of dirty and wet diapers each day. If there is a cause for concern (for example, he is no longer producing any dirty diapers), provide her with a copy of 15 Ways to Make More Milk, page 29, and an appropriate referral.

15 Ways to Make More Milk

1. Breastfeed or pump more frequently — or 10–12 times a day. The best way to make more milk is to empty the breasts more often.
2. Nurse your baby at the earliest signs of hunger — small movements after deep sleep, stretching, bringing the hands to the face, turning the head to search.
3. Make sure your baby is positioned well — his mouth should be wide open with the tip of your nipple in the back of his throat, he should be directly facing you (chest to chest), and his chin should be buried in your breast.
4. Let your baby end the feeding by letting go of the breast or falling asleep. Then burp him and offer the other breast.
5. Massage your breasts while your baby is nursing.
6. Avoid pacifiers, formula, and water bottles. All of your baby's sucking should be at your breast.
7. Most babies like to nurse more frequently at one time of the day. Nurse as often as possible during this period.
8. Offer both breasts at each feeding. If your baby still seems hungry, offer both breasts again.
9. Wake your baby to nurse if he sleeps longer than four hours at one time.
10. Get plenty of skin-to-skin contact with your baby. Place your baby, dressed only in a diaper, between your bare breasts or against his father's bare chest. This encourages a sleepy baby to wake and search for the breast.
11. Sleep with your baby — in either the same bed or the same room. If you are uncomfortable with your baby in the same bed, keep his crib or bassinet next to your bed.
12. Pump after you breastfeed. Even if you don't get any milk, you'll be stimulating your body to make more milk.
13. Take your baby with you and nurse everywhere. Texas law says you have the right to breastfeed in public.
14. Take care of yourself. Sleep when your baby sleeps and make easy meals — such as soup or a sandwich.
15. Don't delay asking for help if you need it.

For breastfeeding help and information, call 1 (800) 514-6667.

Tips for Pumping and Storing Milk Long Term

A mother's goal is to pump between 25 and 32 ounces (750–1000 ml) a day by the time her infant is 14 days old. Some mothers who exclusively pump their breastmilk for a compromised infant have difficulty maintaining their milk supply.

Here are some helpful tips:

- Have her express often — she shouldn't wait for her breasts to feel full. Waiting too long between pumpings can cause the milk to dry up.
- Have her express more often and longer — pumping eight to 10 times a day for 10 to 15 minutes each time. Mothers of multiples should plan to pump 10–12 times per day.
- Make sure she is using a double, electric pump. Many mothers report this saves time and studies indicate double pumping increases prolactin, the milk-making hormone.
- Teach her about massaging the breasts, and stimulating the nipples (nipple rolling) prior to pumping. Massage increases the overall fat content of the milk and, in some cases, increases the amount pumped. Nipple rolling increases the release of oxytocin (the hormone that tells your body to eject the milk from your breast).
- Clarify how to use the pump:
 - Start the pump on low suction and work up to the point of flow.
 - Pump until the flow of milk slows down a lot (do not pump more than 30 minutes at a time).
- Share the advantages of:
 - Playing relaxing music. Some women have reported increased volumes of milk when listening to soft tunes.
 - Looking at a picture of the baby. A picture of the baby on or near the pump helps to remind a mother why she is pumping.
 - Pumping while visiting, or right after visiting, the baby in the NICU. Research shows that when mothers pump right after visiting their baby their milk supply increases, especially if they can touch or hold their infant.

- Have her keep a pumping log with the time and amount of milk pumped. This will help her ensure she is pumping often enough.
- Focus on the relationship instead of the ounces. If the mother is doing everything she can to increase her milk supply and it doesn't seem to be working, she may relax more when her baby's condition isn't so critical.
- Always refer when in doubt ...

Counseling Resource

Mother's Milk for Premature Babies, DSHS stock no. 13-46.

