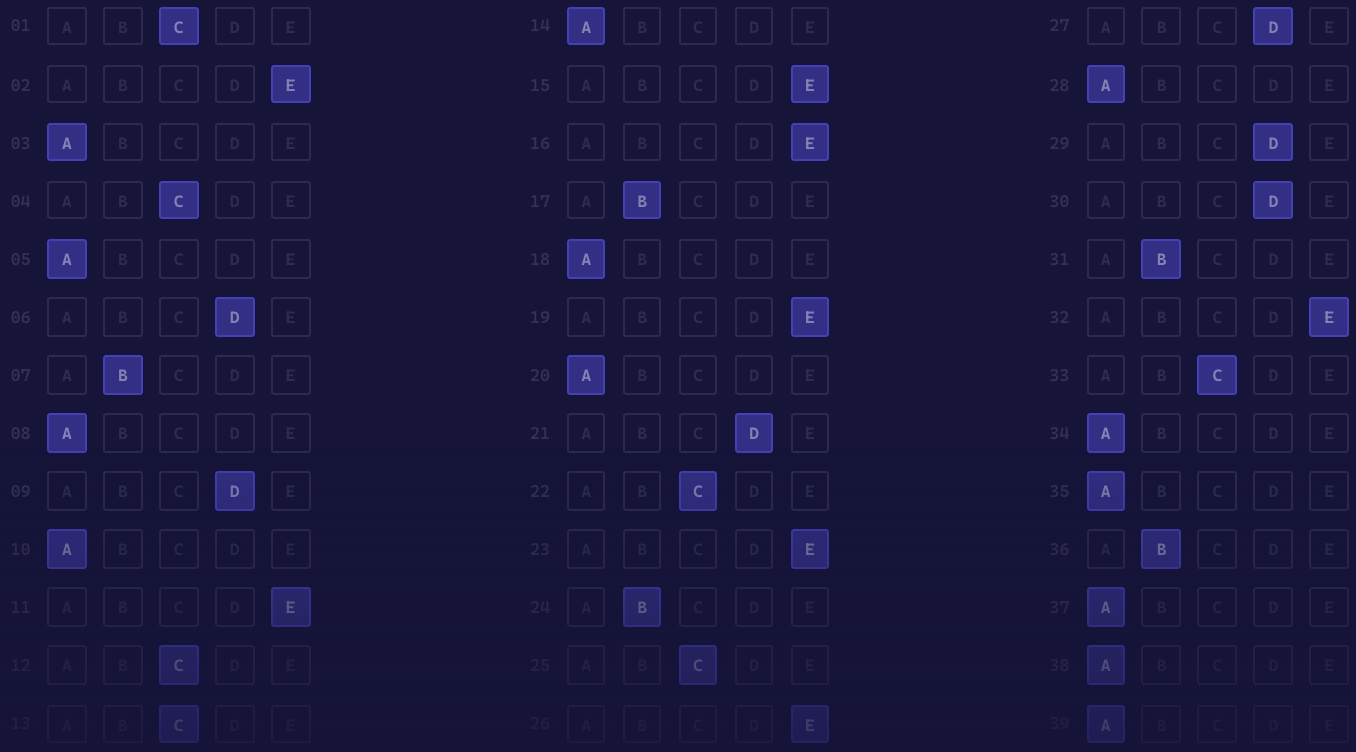
MOMETRIX
SMARTER PREP. BETTER RESULTS.



PRACTICE QUESTIONS

IBCLC Examination

IBDAN

International Board Certified Lactation Consultant - Danish

EDITION	QUESTIONS	FORMAT
Demo	9	Limited Edition PDF

WEB www.mometrix.net

SUPPORT support@mometrix.net

Before you begin

What this is

9 practice questions for IBCLC Examination `IBDAN`, each with its answer key and an explanation. Answer a question before you read its key — the explanation is worth more once you have committed.

If something looks wrong

Send us three things and we will check it:

- the exam code, `IBDAN`
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

mometrix.net

QUESTION 1 MULTIPLE CHOICE

Which of the following hormones are directly responsible for milk production (lactogenesis) and milk ejection (let-down) respectively? (Choose two.)

A **Oxytocin**

B Estrogen

C **Prolactin**

D Progesterone

ANSWER **A** · **C**

WHY Prolactin is the primary hormone responsible for milk synthesis (lactogenesis). Oxytocin is responsible for the milk ejection reflex (let-down). Estrogen and progesterone are involved in mammary duct and alveolar development during pregnancy but do not directly cause milk production or ejection once lactation is established.

QUESTION 2 MULTIPLE CHOICE

Which of the following are recognized indicators of an effective, deep latch during breastfeeding? (Choose two.)

A **The infant's lips are flanged outward against the breast**

B Audible clicking sounds are heard throughout the feed

C More of the areola is visible above the infant's upper lip than below the lower lip

D **The infant's chin indents into the breast with sustained rhythmic suckling**

ANSWER **A** · **D**

WHY Effective latch indicators include flanged lips, chin pressed firmly into the breast, sustained rhythmic suckling and swallowing, and a wide-open mouth. Clicking sounds typically indicate a shallow latch or poor seal, and more areola should be visible above the upper lip (asymmetric latch) — not below.

mometrix.net

QUESTION 3 SINGLE CHOICE

Which factor most directly increases milk production in a breastfeeding parent?

A **Increased frequency and effective removal of milk from the breast**

B Increased maternal fluid intake beyond thirst

C Routine use of galactagogue herbal supplements

D Limiting feeding duration to 10 minutes per breast

ANSWER **A**

WHY Milk production operates on a supply-and-demand mechanism governed by autocrine control. Frequent and effective removal of milk (through breastfeeding or expression) is the primary driver of increased supply. Maternal fluid intake above thirst does not increase milk volume, galactagogues have limited evidence, and limiting feeding duration reduces removal and therefore supply.

QUESTION 4 SINGLE CHOICE

Which maternal condition is generally considered a contraindication to breastfeeding?

A Maternal Type 1 diabetes mellitus

B Maternal well-controlled hypothyroidism

C **Maternal untreated active tuberculosis**

D Maternal iron-deficiency anemia

ANSWER **C**

WHY Untreated active tuberculosis is a contraindication because of the risk of transmission to the infant through respiratory droplets; the mother and infant should be separated until the mother is no longer infectious. Diabetes, well-controlled hypothyroidism (with levothyroxine), and iron-deficiency anemia are not contraindications and breastfeeding is generally encouraged, often with appropriate monitoring and supplementation.

mometrix.net

QUESTION 5 SINGLE CHOICE

A 4-day-old exclusively breastfed infant is noted to have bilirubin levels in the high-intermediate range on a transcutaneous bilirubin meter. The infant is feeding 8 times in 24 hours with adequate output. What is the most appropriate first-line lactation-related intervention?

A Supplement with formula after every feed to reduce bilirubin

B Discontinue breastfeeding and switch to expressed milk only

C Increase feeding frequency and ensure effective latch and milk transfer

D Recommend phototherapy immediately without further assessment

ANSWER C

WHY Breastfeeding jaundice (also called breastfeeding failure jaundice) in the first week is typically due to insufficient milk intake and reduced bilirubin elimination through stooling. The first-line intervention is to increase feeding frequency, optimize latch and milk transfer, and re-evaluate. Phototherapy decisions should follow established bilirubin nomograms, and routine formula supplementation is not indicated when effective breastfeeding can be optimized.

QUESTION 6 SINGLE CHOICE

A breastfeeding parent is prescribed medication. According to Hale's Medications & Mothers' Milk and standard lactation pharmacology principles, which characteristic of a medication makes it MOST compatible with continued breastfeeding?

A Long half-life and high oral bioavailability in the infant

B High molecular weight and high protein binding in maternal plasma

C Low pH and active transport into breast milk

D High lipid solubility and low molecular weight

ANSWER B

WHY Medications that are most compatible with breastfeeding typically have high molecular weight (limiting transfer into milk), high protein binding in maternal plasma (reducing the free fraction available to enter milk), low oral bioavailability in the infant, and short half-lives. Low molecular weight, high lipid solubility, low protein binding, and active transport into milk increase infant exposure.

QUESTION 7 SINGLE CHOICE

Compared with mature cow's milk, human milk contains a higher proportion of which macronutrient?

A Casein

B Whey protein

C Calcium

D Saturated fat

ANSWER B

WHY Human milk has a whey-to-casein ratio of approximately 60:40 or 70:30 early in lactation, favoring whey, while cow's milk is casein-dominant (around 20:80 whey-to-casein). Whey is more easily digested by the infant. Calcium content and saturated fat content are higher in cow's milk than in human milk.

QUESTION 8 SINGLE CHOICE

During a prenatal lactation consultation, which maternal history factor is most important to document because of its direct association with potential breastfeeding challenges?

A Pre-pregnancy shoe size

B Previous breast surgery involving periareolar incision

C Childhood dietary preferences

D Maternal birth order

ANSWER B

WHY Previous breast surgery, particularly reduction mammoplasty with periareolar incisions, can disrupt nerve and ductal pathways and is strongly associated with reduced milk supply and breastfeeding difficulties. Documenting this history allows for anticipatory guidance, prenatal planning, and close postpartum follow-up. The other factors are not directly associated with lactation outcomes.

mometrix.net

QUESTION 9 SINGLE CHOICE

At approximately what age does an exclusively breastfed infant typically regain birth weight and begin to gain weight steadily, indicating effective feeding?

A Within 24 hours of birth

B By day 3 to 5 of life

C By 2 weeks of age

D By day 10 to 14 of life

ANSWER D

WHY It is normal for newborns to lose up to 7-10% of birth weight in the first few days. Most healthy, exclusively breastfed infants regain their birth weight by approximately day 10 to 14, after which weight gain of about 20-30 g/day is expected through the early months.

mometrix.net