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*Human Milk*  
*for*  
*Our Babies*

**Instructions and frequently asked questions  
for human milk donors**

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## **Introduction**

Breastmilk is the optimal food for babies and is particularly important for premature and critically ill babies. These babies have higher very specific nutritional and immunity needs. Parents may be unable to provide milk for their baby for a number of reasons including maternal illness, prescription medications or low milk production. The Te Whatu Ora Waitaha Canterbury campus has a Human Milk Bank for accepting and pasteurising screened donated breast milk to help in these situations.

Parents who volunteer to donate to the Human Milk Bank are usually producing more milk than their baby needs.

If you are interested in becoming a human milk donor we you can complete a lifestyle questionnaire(general Health Screen) and to undertake blood tests(for common infection in the blood). Factors that may exclude you from becoming a donor include smoking, drinking alcohol regularly, taking certain medications or recreational drugs.

## **What is the Human Milk Bank?**

This is a facility that accepts donated breast milk from registered screened donors. Milk donations are then pasteurised(heat treated using the Holder method of pasteurisation) and stored frozen until required.

## **How can I become a donor?**

If you are remain interested in becoming a human milk donor after reading this pamphlet you will guided through the process by NICU/Milk Bank staff.

You can also complete the lifestyle questionnaire and consent form on the Human Milk Bank website and return these in person or via email to the Human Milk Bank.

The Human Milk Bank appreciates the support from the donor mothers and volunteers and from those who contribute financially to maintain this service.

## **Information for mothers who are expressing and donating milk**

Thank you for this act of altruism. The gift of your breastmilk to the Human Milk Bank will nourish and contribute to providing essential building blocks towards life-time health.

If your baby is in the Neonatal Unit, you may be using one of our hospital grade electric breast pumps. If you are at home and using your own breast pump, the milk bank staff will be happy to discuss pumping breast milk for milk donation with you. Most electric breast pumps are suitable. If using a suction pump (Hakaa, Milk Bar) please apply suction. We don't accept drip milk as the nutritional quality for milk donation is not the same as pump milk.

As a donor you will receive the following:

- Lifestyle/Health questionnaire
- Consent to donate form
- Expressing equipment – if required and available
- Single-use milk collection containers
- Expressing labels to label the milk collection containers
- Human Milk Bank donor card
- Plastic bags and zip ties
- Bag tag (so we can double check your details. Name and NHI is important on this label)

While pumping/ expressing, it is important to keep everything as clean and hygienic as possible to avoid contaminating the milk you will be donating. Before you start expressing, please ensure you read the general hygiene guidelines.

Milk production depends on milk removal or 'supply and demand'. The more you remove the more is made. There is no absolute right time to express – express when it is convenient for you and ensure that you express often enough to encourage production. One option for expressing is when your baby only feeds on one side you may express the other side after the feed. You will find what works for you. Milk bank staff are happy to discuss this with you.

## **Contacting the Human Milk Bank**

If you have any questions or concerns, please contact the Human Milk Bank.

Mobile: 021 190 5008 (Milk Bank Manager)

Phone: (03) 364 4344 (leave a message if unattended)

Email: [milkbanknicu@cdhb.health.nz](mailto:milkbanknicu@cdhb.health.nz)

Website: [google/CDHB Human Milk Bank](https://www.google.com/search?q=CDHB+Human+Milk+Bank).

*The milk bank hours are on the back of this brochure. If urgent, ask to speak to the Neonatal Unit ACNM on (03) 364 4699, who will contact the Milk Bank Manager.*

## **Frequently asked questions for human milk donors**

### **Who can donate human milk?**

Any breastfeeding parent who wishes to provide the gift of human milk for the Human Milk Bank is invited to complete the lifestyle questionnaire and screening blood tests. Any milk provided is in excess of her own baby's needs.

### **Why should I donate?**

A key concern for premature babies is a serious gut infection called NEC (Necrotising Enterocolitis). Human milk is associated with lowering the risk of contracting NEC. Breast milk is designed for babies. It digests easily. Has no preservatives. Breastmilk also builds the immune system and helps babies fight infections. Donating to a milk bank ensures screened and pasteurised donor milk is available for these premature and other vulnerable babies.

### **What steps are required to be a donor?**

You will be requested to complete a lifestyle or general health questionnaire and sign a Consent to donate form. Following this you will be asked to have a blood test to screen for common infections of the blood that can be transmitted through breastmilk.

### **What are the blood tests I will consent to?**

The screening blood tests will include HIV 1 & 2, Hepatitis B and C, HTLV 1 & 2. HTLV 1 & 2 are risk factors for the onset of adult leukaemia and lymphoma. ***The blood tests are FREE (Te Whatu Ora labs and SCL – Canterbury(North and South, Ashburton and Timaru-Med Labs).***

### **How much do I need to donate?**

Keep freezing and storing your breastmilk until you have approximately 1 litre of milk to donate.

### **What happens to my milk if it is not used?**

There are a variety of reasons why your milk may not be suitable for use by the Human Milk Bank although acceptable for your own baby. We will contact you to discuss this if it is the case. Milk that has been donated but cannot be dispensed can be used for research offered to research groups and your permission is requested as part of the consent process.

## **What happens if I take medications, drink alcohol and/or smoke?**

Most prescribed medications are compatible with breastfeeding your own baby. All medication use needs to be discussed when donating milk for the milk bank (for instance blood pressure medications, antibiotics, or even herbal remedies). We would also like to discuss if you have had recent vaccinations or travelled/lived overseas. We discourage breastfeeding or expressing for the milk bank directly after you have had an alcoholic beverage. Wait at least 2 hours are 1 standard drink. We also support a smoke and vape free policy. It is important that you provide accurate details regarding your prescribed and social drug use, alcohol intake and smoking habits.

## **What happens if I am unwell?**

You should continue to breastfeed your baby as usual and express milk for comfort as necessary. You may use this expressed milk for your own baby. This milk will contain additional antibodies to build your baby's immune system. If you have a fever or are unwell we advise you not to donate your milk to the Human Milk Bank until your symptoms have subsided.

If you feel unwell, place a 'U' on the donation bottle at that time so it can be identified in the future. Place an 'M' on the bottle if you take any medications in the 24 hours before expressing for the milk bank.

## **Will you accept my stored frozen milk?**

We generally accept milk that has been frozen up to 4 months from the date it was expressed. We are also able to accept older milk under special circumstances. The milk bank likes milk to be as fresh as possible. Please ask the milk bank for advice before discarding your milk. You must, however, meet the donor criteria.

## **What happens to the milk before it is given to the babies?**

Initially you freeze your milk at home and it will remain there until you have used up all your bottles or accumulated at least 1 litre of milk to donate. On arrival at the bank, your milk is given a unique number and remains frozen until required for pasteurisation. After pasteurising a sample is checked for bacterial levels. This ensures a quality product. Only heat-treated milk is given to babies in the NICU.

## **Will I be paid?**

No. All our donors are volunteers.

### **What equipment will I need?**

The milk bank will supply you with supplies which include sterile single use only bottles, expressing labels, a plastic storage bag, bag tag, zip tie and a donor card. It is assumed you will already be using a breast pump.

### **Will I be able to meet the babies who are receiving my milk?**

No. Your contact will be with the Milk Bank staff, only. In the future, we plan to organise yearly meetings where donors get to meet other donors and Milk Bank staff as a way of thanking you for your contribution.

### **Are my details confidential?**

Yes. All information collected in relation to your donation will be shared with Te Whatu Ora Waitaha Canterbury staff as appropriate. This information, except personal information about the recipients of your milk, will be placed on your general medical record and shared with your GP as appropriate. Your details will not appear on the pasteurised milk.

### **I am unable to supply milk but wish to support the milk bank**

Donations to the Canterbury Neonatal Unit Trust Fund (**Westpac Papanui Branch, 030854 0584185 00**), who funded the establishment of the Milk Bank, are appreciated from those who wish to contribute financially to maintain this service. This may be a one off or in the form of ongoing fundraising. Details can be found on our website.

## **Human milk storage information**

This applies to breastfeeding mothers who are storing their expressed milk at home.

***Good hand hygiene and cleaning of the breast pump parts are very important***

### **Storage guidelines**

- Collect milk in the single sterile containers supplied by the Human Milk Bank.
- Milk can also be stored in double walled milk bags.
- Ordinary Ziploc bags are unreliable for ensuring contamination free milk. These are also more inclined to split resulting in loss of precious breast milk.
- Store milk from each expression in separate bottles.

- **Milk expands when frozen. Leave a gap of 2 cm** at the top of each bottle to allow for expansion when the milk freezes. 100ml volumes are a good amount to freeze.
- Use the labels provided to label each container with the date of milk expression.
- Place the labelled containers of milk in the plastic storage bag provided.
- Enter date and amount of milk on bag tag. Store tag with milk.
- Freeze expressed milk for the Human Milk Bank as soon as possible after each expression – immediately is best.
- The milk bank does accept fresh milk donations less than 96 hours old please.

If you do not have a freezer, please ask for advice from the Human Milk Bank staff.

### **How long can I store frozen expressed breastmilk?**

- 2 weeks in the freezer section located inside a bar refrigerator
- 3 months in a separate door refrigerator/freezer
- 6 to 12 months in a deep freeze or chest freezer at -20 degrees Celsius

### **Door-to-door pick-up service for your milk donations**

The Human Milk Bank offers a weekly door-to-door milk pick-up service for your donations.

### **Dropping off your milk or making milk deposits at the milk bank**

You can arrange to drop off your milk donations or make your milk deposits directly to the Milk Bank. Drop off point is at NICU reception, 4th floor, Christchurch Women's Hospital. Please bring your donor card.

## **General hygiene when expressing at home**

Routine hand washing decreases the risk of contamination of pumps, pump parts, storage containers and expressed milk.

### **Hand hygiene**

Before expressing milk or handling expressing equipment:

1. Wash your hands by lathering with soap and warm water. Wash hands for at least 20 seconds. Most bugs are found between index finger and thumbs. Use an alcohol-based hand rub (these can be purchased from a supermarket) as needed.
2. We encourage you to keep your finger nails short.

3. Dry hands with disposable paper towels. Use the towel to turn off tap.
4. Daily washing/showering is sufficient for breast hygiene purposes.

### **Pump hygiene**

Keep the outside of the breast pump and tubing clean and wipe away any milk spots or spills:

1. Ensure your hands are clean and dry.
2. Dismantle and wash the breast kit parts after each pumping session.
3. A separate bowl or container should be used to wash the milk collection kit to avoid contamination from the sink.
4. Rinse breast kit parts in cool water to remove any residue, then wash all parts in hot soapy water (washing-up detergent) to clean. Use a designated toothbrush or bottle brush for removing any solidified milk.
5. Rinse in hot water to wash off detergent residue.
6. Shake off excess water.
7. For mothers staying in the Neonatal Unit who already use tablet disinfectant please continue to use that method.
8. For mothers at home place the milk collection kit between dry paper towels to air dry and place in a zip lock bag when fully dried. Alternatively, boil the parts for 5 minutes or use a microwave/steam sterilising unit.

The Neonatal Unit will provide additional labels for you on request.



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Human Milk Bank  
Christchurch Women's Hospital, Level 4, Neonatal Unit  
2 Riccarton Ave, Christchurch.  
Office: Christchurch Women's Hospital, Level 1, 2  
Riccarton Ave, Christchurch

Milk bank opening hours: Monday to Friday  
8.00am to 3.00pm

Email: [milkbanknicu@cdhb.health.nz](mailto:milkbanknicu@cdhb.health.nz)

Mobile: Milk Bank Manager: 021 190 5008

Phone: (03) 364 4344 (with answering machine)

website: Google – CDHB Human Milk  
BankAcknowledgments

Canterbury Neonatal Unit Trust Fund, Chair: Paul McEwan

## **References**

Robyn Noble, DMLT, BAppSc(MedSc), IBCLC Guidelines for Establishment and Operation of HMBs in UK.

Frances Jones, Mary Rose Tully, Best Practice for Expressing, Storing and Handling of HM. 2nd Edition, 2015.