

# BREAST MILK MANAGEMENT

## Indications

- To outline safe practices for the handling, thawing, storage, verification, and administration of expressed breast milk (EBM)

## Key points

- Breast milk is a **body fluid** that may contain potential pathogens, therefore routine infection control precautions and practices should be used when being handled.
- Care must be taken to ensure that the correct breast milk is fed to the correct infant.
- If an infant receives breast milk from someone other than their mother, follow the procedure outlined in the management of breast milk errors protocol.
- **Mothers** intending to breast feed should **receive teaching about unit's policies** related to the handling, thawing, storage, verification and administration of expressed breast milk.

## Labelling of EBM

- All expressed breast milk must be labeled using **standardized labels**.
- Mothers should be instructed to write the **date and time** the breast milk was expressed **on the label** prior to storage
- Labels are available in labels binder at the nursing stations.

## Storage of EBM

- Expressed breast milk must be **stored in patient specific bins in the refrigerator or freezer** (located in the milk room) identified using the standardized labels for breast milk identification.
- Fresh breast milk should be refrigerated or frozen **as soon as possible after being expressed**.
- **Discard leftover EBM after feeding**. Do not re-refrigerate leftover EBM that has been at room temperature.

## Conservation of EBM on the unit

Product status	Time before product expiration
Fresh breast milk at room temperature	4 h
Refrigerated fresh breast milk	48 h
Thawed breast milk kept in the refrigerator	24 h
Thawed breast milk at room temperature	4 h
Fresh or thawed breast milk that has been warmed	1 h
Frozen breast milk in hospital	up to 1 year or depending on available space in freezer

- **Breast milk that has exceeded the recommended conservation times described above must be discarded**

## Verification of EBM

- An **identification bracelet** must be placed on the baby.
- The use of **two patient identifiers** assists in preventing administration errors.
- Verification of breast milk is required in the following instances:
  - When breast milk requires **enrichment**. Verify prescription for enrichment, recipe, product used for enrichment and the label on the container of breast milk
  - When breast milk is **transferred into a syringe or bottle** from another container. Verify that the syringe or bottle is correctly labeled and matches the label on original container
  - **Before administration**. Verify the label on the container with the infant's identification bracelet using 2 patient identifiers
- A nurse, a nursing assistant or a parent/guardian may perform the verification of breast milk. The verification **must be documented** on the Breast Milk Verification Form.

## Administration of EBM

- **Frozen breast milk should be thawed in the refrigerator or in a bowl of warm water, usually by the RNAs in the milk room.** The time and date of the transfer to the fridge must be noted on the container. It is recommended to estimate the quantity required for a 12 - 16 h period to meet the infant's requirements based on feeding history and begin the thawing process at the beginning of the shift to ensure a sufficient supply.
- Sealed containers of EBM **should be placed in a plastic bag** and the plastic bag should then be sealed **when thawing or warming in a bowl of warm water**. This is to avoid contamination of the EBM should water seep under the lid.
- Sealed containers of thawed or fresh breast milk may be **warmed using the Waterless Milk Warmers** in each patient room. See the Quick Reference for instructions on how to use them.
- Each patient should have **their own** waterless milk warmer.
- **Microwaves or hot water should never be used to warm or thaw human milk.**
- **Do not re-freeze thawed EBM.**
- **Choose the oldest** frozen or thawed product to administer first.