



Mothers' Milk Bank
Colorado Based. Nationwide Impact.

a program of Rocky Mountain Children's Health Foundation

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At a glance

A nonprofit program of Rocky Mountain Children's Health Foundation, Mothers' Milk Bank (MMB) collects, processes and provides donor human milk to infants across the country. Infants who receive the milk may be premature or have severe illnesses and need donor human milk to thrive. MMB consistently provides more milk to neonatal intensive care units (NICUs) than any other nonprofit milk bank in North America and adheres to the strict guidelines set forth by the Human Milk Banking Association of North America (HMBANA). National and international organizations, as well as many medical professional groups, acknowledge and support donor human milk as the first choice for all infant feedings in the absence of a mother's own milk.

Donor qualifications*

Mothers' Milk Bank follows the strict guidelines set forth by HMBANA. Acceptable donors are healthy lactating women with surplus expressed milk who pass the following requirements:

- Donors must not be users of tobacco or nicotine products.
- Donors must not be users of illicit drugs, including marijuana for medicinal or casual use.
- Medication usage must be approved before donation. Mega dose vitamins and/or herbal products are not acceptable. Products with fenugreek are not acceptable for donation.
- Donors must not be at risk for Creutzfeldt-Jakob disease based on travel and/or family history.
- There is a waiting period if the donor has received blood or blood products in the past six months.
- There is a waiting period if the donor has undergone an organ or tissue transplant, had body piercings, tattoos, or intimate contact with anyone at risk for HIV within the past 12 months.

*Not all requirements are listed.

Donor screening

- Prospective milk donors undergo a thorough lactation assessment and medical history screening by trained MMB personnel to determine if they meet the health requirements.
- A donor's healthcare provider gives information regarding hepatitis, medications, use of blood or blood products, tuberculosis and herpes history. Signed forms must be obtained from the healthcare providers of both the donor mother and her baby.
- Blood from prospective donors is tested for Hepatitis B and C, HIV 1 & 2, HTLV 1 & 2 and syphilis at no cost to the donor.

Donor human milk processing

- Approved milk donations from typically three to five donors are pooled together to ensure consistent nutrient content.
- Pooled milk is poured into two or four ounce glass bottles.
- Milk is pasteurized using the Holder method, which eliminates viruses and bacteria but preserves the milk's unique immune properties.
- Pasteurized milk is cooled, labeled and frozen for storage.

Donor human milk approval

Before dispensation, processed milk is tested to confirm acceptability.

- Milk is cultured in a microbiological laboratory and must have no bacterial growth.
- Milk is analyzed using a human milk analyzer, which reports information on fat, protein, lactose and calorie content.
- Drug testing is performed on all donor human milk for the major drugs of abuse, including amphetamines, cocaine, opiates, PCP and THC. The test is performed via immunoassay and milk must pass with no drugs detected before dispensation.

Distribution of pasteurized donor human milk

The majority of the donor human milk dispensed by MMB goes to premature, sick infants in NICUs across the country. This milk is often provided as part of the cost of care. For outpatients, donor human milk is dispensed only when prescribed by a healthcare provider with prescriptive privileges. A tissue processing fee is assessed to the recipient. Additionally, the cost of shipping (if necessary) is covered by the recipient facility or individual. However, charity care is available for families with an infant who has a significant medical need for donor human milk.

Indications for use

Donor human milk is the first choice for infant feedings in the absence of a mother's own milk.

Many medical conditions imperatively warrant the use of donor human milk, specifically:

- any medically indicated supplementation situation, particularly if the mother desires to breastfeed.
- hypoglycemia.
- jaundice.
- prematurity to reduce the incidence of necrotizing enterocolitis (NEC).
- gut priming/trophic feeds, mouth care and others.
- family history of dairy/soy allergies.
- failure to thrive.
- feeding intolerance/gastrointestinal (GI) issues.
- short gut/post NEC.
- late preterm infants.
- pre- and post-surgical nutrition.

should be used include:

- mothers who adopt or have a surrogate.
- mothers whose milk has not come in yet.
- mothers who have low milk supply.
- mothers who are taking certain medications that could be harmful to the infant.
- mothers who have had mastectomies.
- mothers who have multiples.

Alternate situations in which donor human milk Compliance

MMB adheres to and often exceeds the strict guidelines set forth by the Human Milk Banking Association of North America ("Guidelines for the Establishment and Operation of a Donor Human Milk Bank," reviewed annually), created in accordance with the Food and Drug Administration, Centers for Disease Control and Prevention and American Academy of Pediatrics.



Mothers' Milk Bank

For more information about MMB, visit milkbankcolorado.org, call 303.869.1888 or email mothersmilk@rmchildren.org.



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