



Guidelines for Breastmilk in Child Care

Prepared by the Health Consultant Team at Child Care Aware® of North Dakota

1. All bottles or storage containers of breastmilk should be labeled (with water resistant ink) with the child's name, when it was collected, and when it was thawed if it was initially frozen. If breastmilk is transferred from a storage container to a bottle, the bottle should be labeled with child's name and time heated/offered.
2. Since breastmilk is a body fluid, it is very important to make sure that the right breastmilk is given to the right child. Always double check label before serving and do not leave bottles within reach of children unattended. If breastmilk is mistakenly given to the wrong child, a provider should follow these steps:
 - Notify the child's parents right away and encourage them to notify their child's health care provider of the exposure
 - Inform the child's parents that, depending upon the results from the mother whose milk was given mistakenly, their child may soon need to undergo a baseline blood test for hepatitis B, hepatitis C, or HIV.
 - Notify the mother who expressed the breastmilk and ask when the breastmilk was expressed and how it was handled, and if she has been tested for hepatitis B, hepatitis C, and or HIV. If she has been tested, ask if she is willing to share her results. If she has not been tested, recommend that she contact her health care provider right away.
 - Fill out incident report and notify licenser.
 - Assess why the wrong milk was given and develop a policy/procedure to prevent the mistake from occurring again. Share policy/procedure with parents and staff.
3. Bottles or containers of breastmilk should be immediately stored in the refrigerator or freezer if they have been previously refrigerated or frozen. Freshly expressed breastmilk can be stored at room temperature for 6-8 hours. A thermometer in the refrigerator should be checked daily to be sure the temperature is 39 degrees F or below. Bottles and containers of breastmilk should not be kept in the door of the refrigerator because the temperature of the liquid will not stay as stable as it would on an inner shelf.
4. Bags of breastmilk should be stored separately for each child. Bags of breastmilk for each child should be placed in a separate labeled sealed plastic bag or in a separate hard-sided container as bags tend to leak or spill.
5. Unused breastmilk should be discarded after 3 days if refrigerated; by 2 weeks if frozen (5 degrees F) and stored in a small dorm fridge freezer compartment; by 3-6 months if frozen (0 degrees F) and stored in a freezer compartment of refrigerator with separate doors; by 6-12 months if frozen (-4 degrees F) and stored in deep freezer. Unused frozen breastmilk which has been thawed should be used within 24 hours. Never refreeze breastmilk.
6. Thaw frozen breastmilk in the refrigerator or under cold water. Thawing breastmilk at room temperature can allow unsafe levels of bacteria to develop.
7. If breastmilk is stored in storage bag, the bag should be checked for holes or leaks before placing in container of water for thawing.
8. Fat is present in breastmilk and has a tendency to separate and rise to the top or stick to the sides of collection bags or containers. It is important to mix any fat that may have separated by gently swirling the container or kneading it in the bag.
9. Breastmilk should be heated in an individual container of warm water separate from other bottles. Fresh water should be used each time a serving of breastmilk is heated. Breastmilk should never be heated in hot water, on the stove, in a crockpot, or in a microwave. High heat and radiation destroy the precious components in the breastmilk. Microwaving can also cause "hot spots" that can cause burns.
10. Breastmilk only needs to be heated to body temperature (98.6 degrees F). Test contents of bottle on top of the hand, without touching the nipple. Liquid should feel undetectable or slightly cool. If it feels warm, it is too hot.

11. Gloves are not required when handling breastmilk. However, if providers have open wounds on their hands, they should be protected by waterproof bandages or disposable gloves
12. Prepare a clean work space to make a bottle by cleaning and sanitizing the counter or by placing a clean paper towel on the counter.
13. Always wash your hands with soap and water before and after preparing or feeding an infant a bottle at a “clean sink”. A clean sink is a sink that has been disinfected or a sink where no washing after diapering or toileting takes place.
14. Keep nipple covered and place on the counter cover down. If there is not a cover, place ring on counter upright, so that the nipple is not touching anything.
15. If you need to mix the breastmilk in a bottle, the cover should be on the bottle. If no cover is available, cover nipple with clean paper towel or washcloth. Don't use your bare finger to cover nipple. It is also important not to vigorously shake breastmilk. Excessive shaking may damage some of the valuable cells in the breastmilk. Gently swirl the contents in the bottle or rock back and forth.
16. Glass bottles can be used in child care, but they can be a safety hazard. Glass can break and glass conducts heat easier than plastic, thus increasing the possibility of burns. If you use glass bottles, handle/heat them very carefully to prevent burns and breaking. Consider using protective covers for bottles or shatterproof glass bottles.
17. A bottle that has been fed over a period that exceeds one hour from the beginning of the feeding should be discarded for best practice, but is required by the food program. Once an infant has nursed from a bottle, germs from their mouth are introduced into the breastmilk. Neither refrigeration nor reheating will prevent these germs from growing. Label bottle with time the bottle was heated or offered to an infant to ensure that a bottle is not fed past one hour. If parents are upset that their child's breastmilk has to be discarded, explain that even though you aren't allowed to serve it after one hour you can store it in the refrigerator and send it home with them at the end of the day.
18. The same bottle should not be used for two feedings. A clean bottle should be used for each feeding.
19. Breastmilk that is in an unsanitary container, is curdled, smells rotten, and/or has not been stored correctly, should not be served and returned to the child's mother.
20. Infants should be fed on demand unless the parent and child's health care provider gives written instructions otherwise. Breastmilk is easier to digest, so breast fed infants commonly eat less, but eat more frequently, than formula fed infants.
21. Never prop a bottle or put an infant in a crib/playpen with a bottle. These practices can lead to choking, increased tooth decay and a greater chance of infection. They are also a licensing violations. Hold infants upright when feeding a bottle. If infants can hold their own bottle, keep head elevated and stay within arm's reach.
22. If parents of older children request that breastmilk is served to their child at the table during meals, it needs to be served in a controlled manner to prevent an exposure incident. Breastmilk should be served in a sippy cup and placed out of reach of the children. The cup should be directly handed to the child and immediately returned to the place out of reach when finished drinking.

Sources:
Academy of Breastfeeding Medicine
CDC
USDA
CFOC, 3rd Edition, 2011
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