

Donor Milk in Your Neighborhood

Powered by Mid-Atlantic Mothers' Milk Bank

A Guidebook for working with
Mid-Atlantic Mothers' Milk Bank



Revised June 2025




Thank you for hosting a Donor Milk Depot and/or Dispensary through our Donor Milk in Your Neighborhood program!

Both Depots and Dispensaries provide important links to the local community while enhancing convenience for donors and access for recipient families. You are an important member of our team of facilities and community partners that are working together to improve health outcomes and breastfeeding success rates in our region.

This guidebook was developed to not only outline the logistics of hosting a Depot and Dispensary, but to also familiarize you with the general operations of our milk bank so that you are able to answer basic questions from families or clinicians.

We hope that this information is helpful. We are grateful for all that you do to serve the babies and families of our region and are so glad that you have partnered with us!

The Staff and Board of Mid-Atlantic Mothers' Milk Bank

A close-up photograph of a newborn baby's face, partially covered by a white cloth. A hand is gently holding the baby's head. The baby has a small, white, heart-shaped sticker on its nose. The background is a soft, out-of-focus yellow.

“All of us, at some time or other, need help. Whether we’re giving or receiving help, each one of us has something valuable to bring to this world. That’s one of the things that connects us as neighbors...in our own way, each one of us is a giver and a receiver.”

- Fred Rogers

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Contact Information

Facility Address

3127 Penn Avenue Pittsburgh, PA 15201

Email

General: info@midatlanticmilkbank.org

Ordering and Dispensary questions: orders@midatlanticmilkbank.org

Donor Screening and Depot questions: donate@midatlanticmilkbank.org

Phone: 412-281-4400

Fax: 412-281-4236

Web



midatlanticmilkbank.org

Social Media

Facebook: "Mid-Atlantic Mothers' Milk Bank"

Instagram: "midatlanticmilkbank"

Twitter: "PAMilkBank"

TikTok: "@midatlanticmilkbank"

Facility Portal

Scroll to the bottom of the homepage of midatlanticmilkbank.org and click "Portal Login"

Password: theperfectfood

On the portal you will find PDFs of guidebooks and other documents along with the milk bank's current licenses and accreditation certificates.



Direct link to the Portal

Definitions

Bridge Milk: Short term donor milk use, as an outpatient or inpatient, in the first two weeks of life while a mother works to establish a milk supply that meets all of their newborn's needs.

CICU: Cardiac Intensive Care Unit.

Depot: A community partner that collects raw milk for a milk bank. Donors who drop off milk to a depot have already been screened and approved by the milk bank. Depots may be hosted by a health system, pediatrics practice, lactation center, birth center, or another community organization.

Dispensary: A community partner that dispenses bridge milk and other small volumes of pasteurized donor human milk from to outpatients in the community. Dispensaries may be hosted by a health system, pediatrics practice, lactation center, birth center, or another community organization.

HMBANA: The Human Milk Banking Association of North America (hmbana.org). Accrediting body of the 33 non-profit milk banks across the United States and Canada. HMBANA accredited milk banks must strictly follow evidence-based guidelines for donor screening, milk testing, milk processing, and distribution and are frequently inspected.

Milk Bank: Human milk banks screen donors and process, test, store, and distribute donated milk to meet the specific needs of individuals for whom human milk is prescribed by licensed health care providers.

Mother Baby Unit: Inpatient unit where mothers and healthy newborns are cared for following delivery until discharge. Also may be referred to as a level I NICU.

NEC: Necrotizing Enterocolitis. An inflammation of the intestines. Significantly premature infants and those with certain congenital or acquired conditions are most at risk. NEC is a common emergency in the NICU setting and a major contributor to mortality and disability in the premature infant population.

NICU: Neonatal Intensive Care Unit. There are 4 levels of NICUs based on the severity of conditions they are able to treat. Level III and IV NICUs have the capability to care for critically ill infants and those born before 32 weeks gestation.

Pasteurization: A food manufacturing process involving the application of heat (under 100°C) to inactivate pathogens and extend storage life.

PDHM: Pasteurized Donor Human Milk.

VLBW Infant: Very Low Birth Weight infant. Neonate born weighing 1500g (3.3 lbs.) or less. VLBW infants are at greater risk for the complications of prematurity.

About Mid-Atlantic Mothers' Milk Bank (MAMMB)

Mission

The mission of Mid-Atlantic Mothers' Milk Bank is to improve the health and survival of medically vulnerable infants and young children through the safe collection, pasteurization, and provision of donor milk.

Mid-Atlantic Mothers' Milk Bank (MAMMB) is a 501(c)(3) nonprofit organization that provides hospitals, birth centers, and outpatients with pasteurized donor human milk (PDHM) from carefully screened volunteer donors. We are an independent nonprofit organization that is not affiliated with any health or university system. The self-defined focus area of MAMMB is Pennsylvania, West Virginia, Maryland, New Jersey, and Delaware.

As of early 2025, the organization serves 85 hospital units, distributing nearly 40,000 ounces of donor milk per month and growing. Approximately 80 percent of the donor milk processed by MAMMB is used by inpatients.

Donor Milk in Various Settings

In the Neonatal, Cardiac, and Pediatric Intensive Care Units

Human milk optimizes the health and well-being of all infants but is absolutely essential for infants born prematurely and/or with congenital or acquired cardiac, gastrointestinal, or other serious conditions. For these medically fragile infants, a human milk diet provides powerful, unparalleled protection against complications that can lead to longer hospital stays, multiple procedures, readmissions, life-long disability, or even death.

Unfortunately, up to 70% of mothers who have an infant in the neonatal intensive care unit (NICU) or cardiac intensive care unit (CICU) are unable to provide all of their baby's needs, at least initially, even with

adequate lactation support and effort. The use of PDHM for medically necessary supplementation is associated with decreased risks of necrotizing enterocolitis (NEC), sepsis, bronchopulmonary dysplasia, and retinopathy of prematurity along with shorter hospital stays



Bridge Milk in Both the Hospital and Outpatient Settings

Bridge milk refers to short term PDHM use as an outpatient or inpatient in the first two weeks of life as a mother works to establish a milk supply that meets all of their newborn's needs. In addition to promoting the development of a healthy microbiome and avoiding the risks of formula introduction,

the use of PDHM for necessary supplementation in well babies is associated with higher rates of later maternal breastfeeding success. The use of bridge milk may be initiated as an outpatient or be a continuation of use that began in the hospital.

Outpatients with Medical Needs

PDHM may also be used by infants cared for at home with a variety of conditions. These are typically children with complex medical needs, often unable to thrive on other forms of nutrition. Common diagnoses include cardiac conditions, gastro-intestinal conditions, immune disorders, inborn errors of metabolism, formula intolerance, malabsorption disorders, post-surgical nutrition, renal disease, failure to thrive, severe allergies, and organ transplantation.

Discretionary Outpatient Use

Discretionary use describes a situation where an infant does not have a documented medical indication for PDHM but has limited or no access to maternal milk. Such circumstances include adoption, surrogacy, insufficient supply, maternal illness or death, and maternal medication. Bridge milk would also be classified as discretionary use.

The Role of Dispensaries in Meeting the Needs of the Community

Dispensaries are intended for low volume temporary use, providing convenience and significant cost savings for families. Newborns and sick infants often need donor milk quickly. Shipping is overnight, but milk can only be shipped out Monday through Thursday. There are minimum costs associated with the overnight shipping of a frozen product which makes shipping a small number bottles disproportionately expensive, in addition to the increased likelihood of thawing associated with smaller volumes.

Most of the milk dispensed by a MAMMB Dispensary will be bridge milk. Outpatients with medical needs tend to be high volume users of donor milk and usually coordinate with MAMMB for shipments sent directly to their homes, but families may utilize a local MAMMB Dispensary for a starter supply or an emergency need.

“Wally and Charlie were born premature at 32 weeks. Both had extended stays in the Neonatal Intensive Care Unit, with Wally’s admission lasting 8 weeks and culminating in a diagnosis of a rare form of complex congenital heart disease...Wally will require open heart surgery, but only after he, his heart, and his blood vessels have as much time to grow as possible...

We knew Wally needed the antibodies that come from breastmilk to build up his immune system, but our supply was inadequate. When we tried formula, Wally would stop growing and get sick again...

For months after connecting with the Milk Bank, even during respiratory season, Wally remained out of the hospital and grew enough to make it onto the growth curve! He has grown so well that his surgery has been even further delayed, which will allow him that much more time to develop. Our family will forever be indebted to the wonderful people at the Mid-Atlantic Mothers’ Milk Bank and everyone whose hard work has ensured that babies like Wally are given every opportunity to thrive.”



Types of Milk Available at MAMMB

MAMMB offers a variety of specialty milks to fit the needs of inpatient and outpatient recipients. A color-coded round label is placed on the cap of each bottle to indicate milk type. Nothing is added to the donated milk. Nutrient content is the result of naturally occurring variation.



Term Milk- NICU (purple, pink, or black): Milk that is produced from 37 weeks gestation and beyond. Available in 20kcal (19.5 to 21.4), 22kcal (21.5 to 23.4) and 24 kcal/oz (23.5 to 25.4).



Bridge Milk and Outpatient (light blue): Milk that is produced from 37 weeks gestation and beyond. Meets all HMBANA requirements including macronutrient content but is not nutritionally labelled. Milk sent to hospitals will be 20kcal (19.5 to 21.4) or above. QR code on the top cap leads to a page on MAMMB's website which contains information for recipient families including safe storage/handling instructions, resources for lactation support, donor milk education, payment, and how to order additional milk. **This is the type of milk that is distributed by Dispensaries.**



Defatted Milk (green): Term milk that is manually skimmed to reduce fat content to 1% or less. Appropriate for babies who have developed a chylothorax. The increased price for this milk is due to the extra time involved in the skimming process.



Cream (white): The byproduct of skimming. This is not a standardized product and as such each batch varies with an approximate range of 11% to 16% fat. Macronutrient content is available for each batch. The increased price for this milk is due to the additional costs of processing in smaller (50ml) bottles.



Preterm Milk (blue): The first 4 weeks of milk produced on or before 36 weeks gestation. The increased price for this milk is due to the additional costs of processing in smaller (50ml) bottles.



Colostrum (orange): Milk from the first 4 days post-partum. The increased price for this milk is due to the additional costs of processing in smaller (50ml) bottles.



Restricted Diet (yellow): Milk that is donated by donors that follow a restrictive diet such as low dairy or soy. MAMMB cannot control the diets of donors so content is not guaranteed. A low dairy or soy diet is defined as one that avoids dairy (milk, cheese, butter, ice cream, etc.) and/or soy (tofu, edamame, miso, etc.) but may include incidental ingestion from processed foods such as baked goods.

Overview of Milk Donation

Nonprofit milk banks like MAMMB could not exist without the generosity of donors. They are our heroes!

Who are the Donors?

Donors are healthy, lactating parents who have more milk than their own baby needs. They come from many different backgrounds including:

- Any mother with an abundance of milk who wants to help
- Mothers whose own baby received donor milk while hospitalized
- Healthcare workers who know the importance of donor milk
- Bereaved mothers
- Surrogates

A Voluntary Act of Generosity

Donors are never paid. HMBANA strictly prohibits the remuneration of milk donors due to safety and ethical considerations. The nonprofit uncompensated donor model provides a safe donor pool without introducing scenarios that could affect the wellbeing of Recipients, Donors, and the babies of Donors. Donation does require time and work which is greatly appreciated by MAMMB and we strive to make milk donation a simple and rewarding experience. Donors are also acknowledged in many ways:

- A certificate of appreciation that lists the total number of ounces donated
- A special “One for Me, One for the NICU” baby t-shirt
- A copy of the children’s book *An Ounce of Sharing* written by Jan Mallak
- Social media posts and other public acknowledgements for Donors who share stories
- As feasible, an email is sent to Donors the first time that their milk is part of a distributed batch of milk.

“As a mother of two I was prepared and ready for the birth of our son but was shocked at 35 weeks when it was decided he would be coming early. He spent a few weeks in the NICU where we met amazing people and learned of this amazing organization to help all of life’s blessings. We were blessed with being able to have oversupply and instantly knew what to do with it. Even by putting aside just 5 ounces a day we know someone is being helped just like how we were.”



Donation After Loss and Resources for Bereaved Parents

For parents who have experienced a perinatal loss, donation can be a meaningful and comforting experience. We believe that lactation is an important but often overlooked topic following loss. Feelings surrounding lactation vary tremendously among bereaved parents and all need to be acknowledged and supported. Clinical support for lactation following the death of an infant is essential.

The perinatal loss programming that MAMMB has developed aims to provide needed information, support parents in their lactation goals (regardless of their interest in donation), identify resources, and educate the medical community.

The Donation Process

All Donors must complete the screening process, including bereaved Donors. Some aspects of the process are modified for parents who have experienced loss. Screening can begin while the parents are still in the hospital and milk can be shipped from the NICU directly to MAMMB. Mothers can be directed to midatlanticmilkbank.org to learn more about the process and set up a screening interview.

MAMMB Resources for Bereaved Families

Breast Milk and Bereaved Parents was written by the staff and Medical Advisory Board of MAMMB and addresses topics such as engorgement, discontinuation of lactation, and feelings about lactation. It includes quotes both from parents who did and did not choose milk donation as part of their journey. These booklets are provided to facilities, practices, and organizations free of charge. The PDF version of the booklet can be found and printed copies can be ordered, free of charge, at midatlanticmilkbank.org.



Memorial Tree Mural

A central feature at our facility is the "Ashton's Garden" mural which contains the Memorial Tree. The tree displays artist created ceramic leaves inscribed with the name and birth date of the baby of each Bereaved Donor.

Resource List

A list of web-based and local (PA, WV, NJ, MD, and DE) resources is maintained. The list is regularly updated.

Hand Expression Video

Breast massage and hand expression are important tools for the comfort of bereaved mothers. To provide a resource that is sensitive to the needs of mothers who have experienced loss, MAMMB collaborated with Breastfeeding Medicine of Northeast Ohio to develop the video “Breast Massage and Hand Expression Following Perinatal Loss”. A link to the video is on midatlanticmilkbank.org. Feel free to share the film for educational purposes.



“When Leni was dying, I remember begging to make the milk stop. It was such a painful reminder of something so intimately shared amongst my family. My body was aching as we cried innumerable tears for our poor baby. Leni was able to get some of the last of my milk (through a tube) as we thought it would make her happy.

In the month I pumped, we were able to store up 576 ounces of milk. We decided to donate the milk. There is now a Leni leaf on the memorial tree at the milk bank which honors the babies who have passed whose milk will go to nourish other babies... Leni is being remembered and we couldn't be more proud.”



Donor Screening Process and Requirements

Donor screening is a critical part of making donated milk safe for recipients. Some medications, supplements, and health circumstances that are acceptable for feeding a mother's own baby may not be compatible with donation due to the fragility of the population served by MAMMB.

The Screening Process

Screening is a straightforward but thorough process:

1. *Contact Form:* After clicking "Donate Milk" and "Milk Donation" at midatlanticmilkbank.org, potential donors can learn more about the process, answer prescreening questions and schedule an interview.
2. *Phone Interview:* During this 15-20 minute interview the mother is asked questions about medication/supplement use, risks for bloodborne pathogens, and relevant medical information. Education regarding milk collection and storage is provided and the potential donor can ask questions.
3. *Online Packet:* Potential Donors complete an online packet which contains a more detailed health questionnaire.
4. *Blood Screening:* Donors are screened for HIV, HTLV, Hepatitis B and C, and syphilis. MAMMB contracts with Quest Diagnostics, LabCorp, and CORE so there is a convenient option for all Donors.



All screening and shipping costs are paid for by the milk bank. Storage bags are available free of charge.

Why a Potential Donor May be Deferred or Ineligible

There are some circumstances that are compatible with a mother nursing or pumping for her own baby but not for donation. This is due to the fragility of the population that receives donor milk. The following is a list of the most common reasons for deferment. There are several reasons why a donor may not be able to donate milk and the list below is not exhaustive. However, many medications and circumstances are acceptable. To ask if a particular medication or situation is compatible, please contact us at donate@midatlanticmilkbank.org.

- Antihypertensives
- Certain antidepressants. All SSRIs are acceptable
- Mega-doses of some vitamins
- Consumption of caffeinated drinks that exceeds 24 oz. per day
- Daily consumption of alcohol (an occasional alcoholic beverage is permissible and Donors are asked to not share milk that was pumped within the 12 hours after consumption)
- A recent blood transfusion requires a temporary deferment

Collection, Hygiene, and Labeling

- Any commercially available bottle or bag designed for breast milk storage is acceptable
- Donor number and date pumped must be written on each bag or bottle
- Donors must thoroughly wash their hands and pump parts before each pumping session and sanitize their pump kits daily, according to manufacturer's instructions
- Milk that has been stored frozen up to 8 months can be donated
- A minimum of 150 ounces is requested over the entire donation period due to the costs of screening each individual donor

Dropoff and Shipping

Once the donor is approved, there are several options:

- Dropoff to our facility in Pittsburgh
- Dropoff to a local depot (for a complete list visit midatlanticmilkbank.org)
- Shipping: an empty box, label, and instructions are sent to the donor along with a phone number to call to arrange for FedEx or UPS to pickup the packed box at the Donor's home
- Shipped from a NICU: procedure similar to shipping from home



“My son had a tight tongue tie, which limited his ability to directly nurse so I began pumping. What I didn't know at that point was that I would pump myself into a massive over production. By the time I went back to work I had pumped more than 4000 ounces which is more than he would eat as we were able to start directly breastfeeding as well as bottle feeding while I went back to work. As a nurse, I work in a hospital that receives milk from Mid-Atlantic mother's milk bank. I knew that I could donate my supply and less somebody else in their breast-feeding journey so that they had a bridge from the time that they gave birth to the time that they were able to go home so that they did not have to supplement with formula if they didn't want to. I also know the value of human breastmilk being used for babies in NICU and I wanted to be able to help others on their journey.”

Beginning the Donor Screening Process

Donors find out about donation in many ways including from healthcare providers, birthing facilities, community organizations, social media, and word of mouth. Some Donors are the mothers of former recipients who now have a robust milk supply and want to give back. Bereaved mothers and surrogates can be donors too.

Helping to Spread the Word About Milk Donation

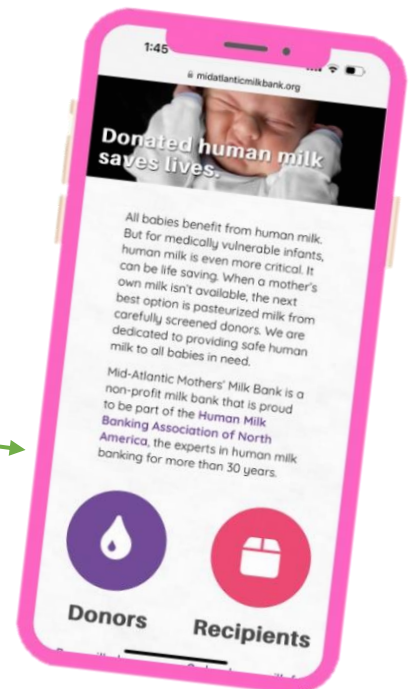
As a practice, health system, birth facility, lactation center, or other organization that interacts with young families, you are uniquely positioned to raise awareness about donor milk. Parents simply need to know that donation is an option if they have extra and if their baby requires some donor milk from a milk bank that it is very safe.

Here are some ways to raise awareness:

- Include information about donor milk in breastfeeding and prenatal classes.
- Display our materials. They are free and can be ordered on our website. More information on pages 32-35.
- Make sure that recipient families are aware of the milk bank: The mothers of most recipients go on to make enough milk and some want to pay that forward. Since feeds are not prepared bedside, parents often do not know where the donor milk came from.
- Include the milk bank's info cards in post-partum packets.
- Post about the milk bank on your social media and include info in your newsletters: More details on page 31.

Referring Mothers who are Interested in Milk Donation

Do you know someone who is interested in donation? The best place to start is to refer the parent to midatlanticmilkbank.org. By clicking "Donate Milk" they can learn more about the process and begin screening by answering a few online questions and scheduling the phone interview. If a parent is unable to complete an online process, they can contact the screening team at donate@midatlanticmilkbank.org or 412-281-4400.



Milk Pasteurization and Testing

Testing and pasteurizing donated milk are also critical safety procedures. MAMMB strictly follows HMBANA, state, and federal guidelines for safe milk processing and food handling. Drug testing and macronutrient analysis are two examples of additional measures that MAMMB takes beyond accreditation and licensure requirements.

Mixing and Bottling

The milk of 4-8 Donors is thawed, combined, and thoroughly mixed. Pooling the milk of multiple Donors evens out nutritional variations, increases the diversity of immunological factors, and dilutes the attributes of any single donor. The pooled milk is then poured into BPA-free bottles with tamper resistant caps.

Pasteurization

Donor milk must be pasteurized because bacteria and viruses that would be easily tolerated by full term and well babies could be devastating for premature or medically fragile infants.

The bottled milk is pasteurized in water baths using specialized equipment. All HMBANA accredited milk banks must use the Holder Method of Pasteurization which holds the milk at 62.5°C for 30 minutes. The efficacy of this method in inactivating a wide variety of bacteria and viruses is well established. Many of the bioactive components of milk, including secretory IgA, are very heat sensitive. Utilizing this low temperature method retains many of these important components which help to protect babies. After pasteurization, the bottled milk is rapidly cooled and then stored frozen.

For more information about types of human milk processing download our summary, *Processing Matters* at “Educational Materials” at midatlanticmilkbank.org.



Milk Testing

Testing is the final step to ensure that milk is safe for fragile recipients.

Bacteriological Culturing

After pasteurization, a random bottle from each batch of milk is sent to an independent CLIA certified laboratory for bacterial culturing.

Macronutrient Analysis

MAMMB performs nutritional analysis onsite in its milk lab using specialized equipment. This information is very useful for NICUs because it enables them to develop more customized nutrition plans for premature infants. The Miris Human Milk Analyzer, the first and only FDA approved medical device for measuring the macronutrient content of human milk, is used to quantify the calorie, protein, fat, and carbohydrate content. To date, macronutrient analysis is not required by HMBANA.

These Miris units are designed and approved for both in hospital bedside and milk bank use. If your hospital is interested in analyzing maternal milk at your facility, MAMMB staff are happy to answer questions and share our experiences with analysis.



Drug Testing

Each pool of milk is tested for a panel of 7 common drugs of abuse including opiates and THC. We are one of only a small number of nonprofit milk banks that test milk for drugs.



"I wanted to share how happy I am to be a milk donor! As a mother of a former NICU baby, I know how important and special it is to watch your preemie grow, and now I have the privilege to be a part of other NICU baby's journeys! I am fortunate to have been and continue to be an over-producer from the very start of my exclusive pumping journey, with the peace of knowing my baby will always have milk available for him any time he needs and a large stock in the freezer that grows day by day. It also gives me the opportunity to help other babies grow big and strong, just like Elias has!"

Depot and Dispensary Education

For the safety of the medically fragile infants that rely on donor milk to thrive, it is important that all staff that handle PDHM understand proper storage and handling. Basic knowledge about the Donor screening process and the testing and pasteurization of donor milk is helpful when interacting with recipient and donor families.

Guidebook

This guidebook is an important tool to inform the staff of MAMMB Depot and Dispensary hosts about procedures and general knowledge about milk banking. Both the guidebook and forms should be kept in a secure area that is easily accessed by relevant staff.

Inspection

In accordance with HMBANA Standards and the regulations of some states, MAMMB is required to provide training for Depot and Dispensary staff and conduct annual inspections. When an in-person visit is not feasible, this will be done virtually. These yearly check-ins are an opportunity to train new staff, answer questions, and collaborate to improve services to the community.

Depot and Dispensary Staff Education

Each MAMMB Depot and Dispensary host organization is asked to designate one or two staff members as the primary contacts for communication with MAMMB. In addition to these designated contacts, all staff members that will be working with PDHM and donor or recipient families must do the following:

- Read this Guidebook
- Attend, in person or virtual training session taught by MAMMB staff
- Attend HIPAA training organized by MAMMB or provide proof of such training from the host organization
- Optional: There are nuances to food handling that are not always part of medical training. It is important that those handling donor milk (and all human milk) are trained in food handling and safety. Such training is useful beyond the context of hosting a Depot or Dispensary. Most states have excellent programs for food handlers, such as ServSafe, and MAMMB is happy to absorb the costs of state sponsored training.

MAMMB is grateful for our Depot and Dispensary hosts and recognizes the time commitment that is being volunteered by each organization. Our training goals aim to provide adequate education to ensure the safety of donor milk and open a dialogue that helps us best meet the needs of the community together. MAMMB is a transparent organization and believes that there should be no mysteries surrounding milk banking. Questions are always welcomed and encouraged!

Milk Storage and Handling Instructions

A number of safety measures are used by MAMMB to ensure that donor milk is safe for the fragile infants that we serve. This special care must extend beyond the time that donor milk leaves our milk bank. Frozen or pasteurized human milk has decreased bacterial inhibitory factors and requires greater precautions. Following evidence-based food handling guidelines is critical.

We highly recommend the following publication for all settings that handle human milk or are caring for the families of breastfed infants:



Best Practice for Expressing, Storing, and Handling Human Milk in Hospitals, Homes, and Child Care Settings 5th Edition

Human Milk Banking Association of North America

Edited by Rebecca Mannel, MPH, IBCLC, FILCA and Sarah Taylor, MD, MSCR

May be purchased at hmbana.org

Milk Storage

Milk must be stored in dedicated freezers used for donor milk purposes only.

Ideally, raw and PDHM are stored in separate freezers. If this is not feasible, raw and processed milk may be stored in different sections of the same freezer as long as there is physical segregation. Bags or bottles of raw milk from donors must not touch bottles of PDHM or the same surfaces as PDHM. Storing bottles of PDHM in a bin with a lid is an easy way to separate raw milk and PDHM in the same freezer. Bins should be clearly marked as “Pasteurized Milk Only”. Before filling bins with a new shipment of milk, clean lids and bins with warm soapy water and sanitize with a bleach solution or sanitizing wipe and let air dry.



Freezer Requirements

A variety of freestanding freezers, both commercial and residential types found at national retailers, are acceptable. General requirements:

- The freezer must be able to achieve a temperature of -20°C (-4°F) or below. Most chest and upright style residential freezer get this cold. Be sure to check the specification of the specific model.
- Freezers must be locked or located in a secured area.
- The freezer's operation manuals must be accessible to the Depot/Dispensary staff. It is the Depot/Dispensary's responsibility to follow the maintenance instructions of the unit.
- Clean and defrost freezers according to the instructions and schedule recommended by the manufacturer.
- Sizes may vary according to available space.



Temperature Monitoring

- Freezer temperature is held no higher than -20°C (-4°F). Brief fluctuations in temperature due to self-defrosting cycles or door opening are acceptable.
- Freezer temperatures must be monitored using a thermometer and temperature log or by a temperature sensitive alarm/monitoring system.
- Freezer temperature is checked daily and recorded; it must be remedied if out of range.
- Ideally, temperature monitoring and logging are achieved by means of recording thermometers or temperature sensitive alarms that sound locally and remotely.
- Manual monitoring and logging are acceptable and must be done on a daily basis using the Temperature Log Form. When freezers are located where there is no weekend access, readings are done late in the day on Friday and early in the day on Monday.
- If the freezer is unable to maintain the proper temperature, milk is moved to another freezer until that freezer is repaired.
- Freezer temperature logs are kept for all milk storage freezers located at the Depot or Dispensary site for at least one year.
- In the event of a power failure or other unexpected event, partially defrosted milk may be refrozen if ice crystals are still present. In the event of an outage please contact MAMMB for further guidance.

Using Donor Milk

This information applies to donor milk used at home by recipient families and donor milk used at a practice or lactation center as part of care.

- Donor milk must be stored frozen until use. Freezer temperatures should be maintained at a temperature no higher than -20°C/-4°F.
- Frozen donor milk is best thawed in the refrigerator. Refrigerator temperatures should be maintained at a temperature no higher than 4°C/39°F. Bottles of donor milk can be thawed and warmed in a non-water warmer, but the bottles must be closely monitored. Bottles of milk may be rapidly thawed using a warm water bath. Care must be taken to make sure that water does not come into contact with the bottle lid. Water should not exceed 98°F.
- Do not microwave milk.
- Completely thaw bottles until liquefied to allow for thorough mixing of the entire bottle.
- Thawing just enough to pour off a single feed will result in uneven distribution of nutrients.
- Thawed milk must be refrigerated at all times and should be used within 48 hours (per HMBANA Best Practices). Adding anything to donor milk, including human milk derived and bovine milk derived fortifiers, alters storage times so it is not recommended to fortify donor milk until the time of feeding.
- Donor milk is not homogenized so fat will separate. Invert the bottle back and forth and gently swirl milk to distribute nutrients before feeding. Do not shake.
- Feeds for multiple infants may be poured from the same bottle as long as fed from a separate container.
- The batch ID number of the bottle (located on the bottle label) used for a feeding must be documented in the infant's health record.

Accepting Raw Milk Donations

Only raw milk from Donors fully approved by MAMMB with an assigned donor number may be collected. MAMMB donor screeners coordinate all drop-offs.

Depots choose when to accept donations. Approved Donors may drop-off at any time during hours set by the Depot or if desired, drop-offs can be by appointment only. The name and location of each Depot is listed on midatlanticmilkbank.org and the specific drop-off instructions for each Depot location are given to Donors.

General Information

- Only milk pumped 8 months or sooner may be accepted.
- All donations must be entered onto the Donor Milk Depot Log-in Sheet (see page 36). The date, donor name, donor number, and approximate number of ounces are recorded.
- Care must be taken to keep the donations from each Donor separated in the freezer. The donation of an individual donor (breastmilk collection bags or bottles) will be organized in plastic drawstring bags provided by MAMMB. A tag with the last name and donor number of the Donor will be attached to each bag.
- Collected milk is shipped to MAMMB via FedEx or UPS using boxes and labels provided by MAMMB.

"I gave birth to my daughter Kya in April. She was born at 37 weeks and struggled with hypoglycemia during our hospital stay. In order to help get her blood sugars up; I would nurse her, pump, and offer her a bottle. Once my milk came in, I had over supply. I didn't know about milk donation until one day, while checking my work email- I saw UPMC-Altoona opened a drop off location for this milk bank. I am an employee for UPMC at another location. I then reached out, went through the screening process, and became a donor. It was very easy to apply and the process went smoothly. I am so incredibly blessed to be able to donate and am humbled by this experience."



Provided by MAMMB

- Guidebooks
- Educational materials
- Drawstring bags and tags
- Forms- available on the portal for printing and a supply is sent : Temperature Log (for hosts without a temperature monitoring system), Depot Log-in Sheet, Shipping Instructions
- Shipping boxes
- Shipping costs
- Return labels
- Breast milk storage bags for donors that request them
- Training
- Availability to answer questions from staff, donors, and potential donors
- Marketing materials- wall clings, window clings, magnets, posters, stickers

Procedure for Accepting Milk

1. Donors will arrive with a cooler or bag(s) filled with bags or bottles of frozen raw milk.
2. Be sure to wash your hands before and after accepting milk donations. Wearing gloves is recommended to avoid cross contamination.
3. Check that bottles or bags are labeled with the Donor's ID number and the date of pumping. It is acceptable if individual bags/bottles are not labeled with the Donor ID number if they are placed together in a Ziploc type freezer bag labeled with the Donor ID number (done by the Donor).
4. Place the milk bags/bottles into the drawstring bags provided by MAMMB, using as many as needed. If the milk bags/bottles are arranged in labeled Ziploc type freezer bags place the freezers in the drawstring bag. If the bags/bottles are in unlabeled grocery type bags the whole bag can be placed in the drawstring bags.
5. Draw the drawstring bag closed and close using a loose slip knot as pictured on page 22. Do not make multiple knots as this makes opening very time consuming for MAMMB staff.
6. Attach a tag that contains the following info to each bag: donor last name, Donor ID number, bag number. For example, Donor #1523, Kristin Smith drops off a cooler full of milk that requires 2 drawstring bags: The first label would read (Smith #1523 1 of 2) and the second label would read: (Smith #1523 2 of 2). One Donor per bag- do not mix the milk of multiple Donors in one bag.
7. Place labeled bags in the freezer.
8. Document the drop-off.



Social Media

It is okay to ask a Donor if they are interested in having their photo taken or to encourage them to post about their donation. Donors can easily share their story and upload comments and photos at midatlanticmilkbank.org. If you post on social media, it is important to strictly follow the guidelines outlined on page 31.

Breast Milk Storage Bags

As a courtesy to our Donors, MAMMB provides donors with breast milk storage bags. Be sure to ask donors if they need more bags before they leave.

Documentation for Each Donation

Documentation is an important part of donor milk safety.

Donor Milk Depot Log-in Sheet: Be sure to fill in the date of the drop-off, the Donor's ID, date of the oldest milk in the donation, and the name of the staff member that accepted the donation.

Donors make Mid-Atlantic Mothers' Milk Bank possible and we are so grateful for their kindness, generosity, and commitment. Donation takes time and effort. Please tell donors THANK YOU from us and your community!

Shipping Raw Donor Milk to MAMMB

Milk should be shipped monthly or when the freezer is 75% full, whichever comes first.

Obtaining Boxes

Contact MAMMB at 412-281-4400 ext.103 or donate@midatlanticmilkbank.org to have shipping containers sent. Be sure to indicate the size box that you will need or the approximate number of ounces to help the Screeners determine the appropriate box size.

Having the milk arrive frozen requires that the boxes are packed very tightly with as little airspace as possible. Boxes have Styrofoam or insulated inserts and will contain return FedEx or UPS shipping labels along with replacement drawstring bags, tags, and breastmilk storage bags.

Scheduling a Pickup

Depending on where the Depot is located, FedEx or UPS will be used for overnight shipping, utilizing the services of the perishable items logistic companies PeriShip or UniShippers. **Only ship boxes Monday through Wednesday for arrival to MAMMB the next day.** No one is at the milk bank to receive shipments over the weekend. Not shipping on Thursday compensates for rare issues with a delayed delivery.

If you are instructed to use PeriShip (FedEx):

Shipment pickups can be arranged by calling PeriShip at 866-928-6428 Monday-Friday, 8am to 7pm. The pickup needs to be scheduled the business day before and you will be asked for the pickup location and number of boxes. You will be given a pickup window (typically two hours). Only ship milk out Monday through Wednesday.

If you are instructed to use UniShippers (UPS):

Shipment pickups can be arranged by emailing UniShippers at midatlanticmmb@unishippers.com Monday-Friday, 8am to 7pm. The pickup needs to be scheduled at least one business day before. You will be asked for the pickup location, number of boxes, and pickup time (4 hour window). Only ship milk out Monday through Wednesday.

Packing a Box for Shipment

1. Gather donations from a single donor together into the same box, if possible. If the donation from that donor is too large, use another box, but be sure to send all milk from that donor in the same shipment. Do not split a donation from a single donor between your depot and MAMMB.
2. Be sure that each drawstring bag is closed with a loose slip knot and tagged with the donor's name and ID#. It is critical that each draw string bag contain milk from only one donor! Be sure the bag is tagged with the donor's name and Donor ID #. The milk of each individual Donor is handled separately up to the point when it is selectively pooled with the milk of other Donors in MAMMB's lab.
3. Fill the boxes as tightly as possible. Fill empty space with newspaper or a similar material. Do not add cold packs or ice cubes bagged or loose, as their melting speeds up the thawing of the donor milk.



Too much space. Milk likely to thaw in transit.



Nearly full and open spaces are filled with material.



Box tightly pack. Ideal!

4. Close the inner lid and be sure to include the following forms on top of the Styrofoam insulated lid. Of note, instead of including paper copies, forms can instead be uploaded at midatlanticmilkbank.org. See page 36 for details.

- Donor Milk Depot Log-in Sheet from this current collection period. Keep a copy for your records.
- Temperature Log-in Sheet or printout from the temperature monitoring service.
- Medication and Illness Forms from contributing donors (unless the Donor submitted this online).
- If your facility also hosts a Dispensary, you can include the PDHM Shipment Inspection Sheets and Distribution Sheet in the shipment rather than emailing if you prefer.

5. Tape the box securely with packing tape and label with the return address label on top.

6. The shipment is now secure and ready for pickup by the shipping carrier (FedEx or UPS). Unless your facility has the room to store a packed box in the freezer, aim to prepare the box for shipping no earlier than an hour before the scheduled pickup window.



Dispensing Pasteurized Donor Human Milk (PDHM)

Per the guidelines of HMBANA and the Health Department of the Commonwealth of Pennsylvania, all donor human milk must be pasteurized before distribution.

Ordering PDHM for Dispensaries

- PDHM may be ordered by emailing orders@midatlanticmilkbank.org. Please include the following information:
 - Name of the dispensary
 - Number of 100ml bottles requested (maximum 78)
 - Day that you would like it to arrive. Milk is shipped out Monday to Thursday for arrival the next day. Shipping carrier pickups at the milk bank occur midafternoon so orders placed after 12pm will not be able to be shipped out until the next day.
- Milk is shipped via FedEx or UPS Priority Overnight. Shipments usually reach their destination by noon. If you have not received your delivery by 1:30pm please contact us.
- Unishippers and PeriShip are perishable item logistics companies that MAMMB uses to provide additional tracking of shipments and have access to lower shipping rates.
- MAMMB is closed on the following days:
 - New Year's Day
 - Martin Luther King Day
 - Memorial Day
 - Fourth of July
 - Labor Day
 - Thanksgiving
 - Day After Thanksgiving
 - Christmas Eve
 - Christmas Day
 - New Year's Eve

Receiving PDHM


- Upon receipt of a shipment of PDHM, open the box immediately and carefully. Should any dry ice remain, follow the instructions included with the shipment. DO NOT touch the dry ice because it will burn your skin.
- A Dispensary staff member must inspect each bottle, checking that the tamper resistant caps are intact and that the milk has arrived frozen. Sometimes, the tamper resistant rings are damaged when the bottles are removed from the pasteurizers. Bottles are acceptable if at least two tabs on the ring are intact. Bottles of milk are useable as long as the milk is slushy with ice crystals (determine by shaking). Receipt and bottle condition are documented through a form on midatlanticmilkbank.org. See page 36 for details.
- After inspection, immediately transfer the bottle of milk to the freezer for storage.

Reusing Boxes for Depot Shipments

If your facility also serves as a MAMMB Depot, the boxes that PDHM is shipped in can be used to ship raw milk back to the milk bank. A return shipping label will be included in each order for this purpose. Before reuse, the inside of the cooler box must be wiped down using a disinfectant wipe. The "dry ice" label and any other white or yellow destination sticker placed on the box by FedEx or UPS must be removed from the box before using for Depot return.

Dispensary Recipient Forms and Payment



 **Dispensary Order Form**
Powered by mid-atlantic mothers' milk bank

I would like to: *

☐ Pickup donor milk from the milk bank or a dispensary.

☐ My child is being discharged from the hospital and the unit is sending us home with bottles of donor milk.

☐ My child is still in the hospital, but does not meet hospital criteria so we are purchasing donor milk.

Name of the recipient child *

First Name Last Name

Recipient child date of birth *

MM-DD-YYYY

Date

Parent or Guardian name *

First Name Last Name

Address *

Street address

City State / Province

Postal / Zip Code

Phone Number *

(0000) 000-0000


Please enter a valid phone number.

Email *


example@example.com

☐ I have read the [Consent form](#) and agree to the terms and conditions. *

Signature *



Please use your computer mouse or finger to sign.



Number of 100ml(3.4 fl. oz. bottles) needed *

Recipient families are directed to the "Donor Milk in Your Neighborhood" page of [midatlanticmilkbank.org](https://midatlanticmilkbank.org/recipients/in-your-neighborhood/) to complete necessary forms and make payment. Both an order form and a payment receipt will be generated upon completion, and these are the documents that families will bring with them or show on their phone when they pickup PDHM from a dispensary.

Per MAMMB protocols and state regulations, no more than 40 ounces (12 bottles, 100ml) of PDHM can be dispensed per child, per lifetime, without a prescription. If a family orders more than 12 bottles online without a prescription, only the 12 bottles will be distributed and MAMMB will refund the purchase of the excess bottles.

Information about the storage, handling, thawing, and heating of donor milk for families is also included on this page. Families can visit the page through the found QR codes on the top cap of the bottles and MAMMB's information cards.

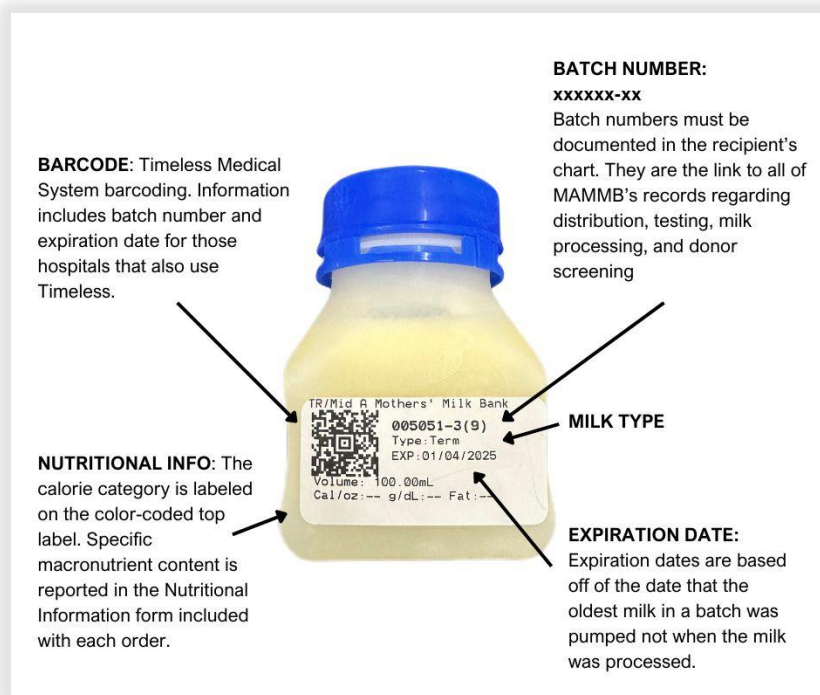
<https://midatlanticmilkbank.org/recipients/in-your-neighborhood/>

Materials and Forms

- *Safe Storage and Handling Cards* (see page 34)
- *PDHM Distribution Form*: Must be completed by the Dispensary Host staff and the family. The form documents the batch numbers and the receipt of the bottles of PDHM by the recipient family. A copy of the completed form must be forwarded to MAMMB. See page 36 for details

Procedure for Dispensing Milk to a Recipient


1. The family brings a printout (or shows on a phone), the order form and payment receipt.
2. A member of the Dispensary staff completes the PDHM Dispensing Form, documenting the batch numbers and expiration dates of the bottles along with the Order ID number located on the payment receipt. Both the staff member and the parent sign the form.




3. The Dispensary staff gives the family the *Safe Storage and Handling Card* and the bottles of PDHM.
4. The dispensing transaction is logged in the *PDHM Dispensing Log*. This log is kept by the Dispensary for its own record keeping.
5. The Dispensary faxes, securely emails, or uploads the *PDHM Dispensing Forms* to MAMMB. The forms can also be sent to MAMMB with raw milk shipments for those Dispensaries that are also Depots. See page 36 for details.

Tuesday, Nov 10, 2025

Dispensary Order Form

Your order number	PMSMU1
Name of the recipient	Test Purchase
Recipient date of birth	November 1, 2025
Parent or Guardian name	Denise OConnor
Address	1111 1111111111111111 Pittsburgh, Pennsylvania, 15111
Phone Number	(412) 491-9123
Email	denisewoconnor@gmail.com
Terms and Conditions	Accepted
Signature	



Number of 100ml/3.4 fl. oz. bottles needed	1
Terms and Conditions	Accepted
Your total:	14.00

Transaction Receipt

Nov 10, 2025
2:47:59 PM EST

\$14.00

Type	Card Sale
Transaction ID	5778078186
Auth Code	250558
Description	Mid-Atlantic Mothers Milk Bank Patient Web Payment
Order ID	5778078186

Billing Details
Denise OConnor

Pittsburgh, PA

denisewoconnor@gmail.com
4124919123

Shipping Details

Record Keeping and Other Considerations

- To ensure the safety of the donor milk itself and the efficient retrieval of important data in the event of a donor milk recall, it is imperative that all forms are completed and submitted as described in this guidebook.
- All forms must be stored in a secure space.
- Staff must complete yearly HIPAA training and confirmation must be sent to MAMMB. If a facility does not provide training to its staff, employees who will be interacting with donor or recipient families, handling donor milk, or have access to records must complete training through MAMMB.

Inspection

A staff member of MAMMB will visit each dispensary annually. If an in-person visit is not possible, there are virtual options.

Recalls

As apart of the requirements of the Human Milk Banking association of North America (HMBANA) and surrounding states that regulate milk banks, periodic (at least annual) mock recalls must be conducted. Dispensaries may be called upon to participate and must provide the necessary data in a timely manner (6 hours). Mock recalls are conducted during normal business hours.

Outpatients Ordering Directly from MAMMB

Approximately 25% of the donor milk collected and processed by MAMMB is distributed to outpatients. The vast majority of outpatient donor milk is used by children with significant medical issues. The remainder is discretionary use including bridge milk, adoption, and maternal illness/medication. In the event that a child requires volumes beyond the capabilities of a Dispensary, the family should be instructed to contact MAMMB directly.

The Scope of a Dispensary

Up to (12) 100ml bottles (40 ounces) of donor milk may be distributed to a single recipient (per lifetime, not per order) without a prescription. This policy eliminates delays for infants with immediate need. Dispensaries are intended for low volume, short term use such as bridge milk or a starter supply for outpatients requiring longer term use. MAMMB will always alert you if a family will be purchasing more than 12 bottles.

Prescriptions

Donor milk requires a prescription from the healthcare provider that has prescriptive authority and caring for the recipient child. MAMMB's prescription form which can be filled out online is strongly preferred but other prescription forms are acceptable. All must contain the following:

- Recipient child's full name
- Date
- Recipient child's date of birth
- Amount of milk needed per day or week (oz or ml)
- Period of time in which donor milk will be required (a new prescription is required after 6 months)

Visit "For Healthcare Providers Prescribing Outpatient Donor Milk" on the "Order Milk" page of midatlanticmilkbank.org to learn more and fill out or upload a prescription.

Insurance Coverage

Donor milk required for a documented medical need is likely to be covered by insurance. Bridge milk is typically not covered.

Pre-authorization, requested by the prescribing healthcare provider, is required by most plans. To avoid gaps in coverage and significant costs to the family, it is imperative that the request for pre-authorization is done prior to discharge or as soon as the need for donor milk is identified. Please note that insurers will not allow MAMMB to request pre-authorization, this must be done by the prescriber. MAMMB has information and tools on its website to facilitate pre-authorization including a fillable and downloadable letter of medical necessity that includes the information that health plans typically require.

In January 2024, Owen's Law became effective, mandating the Medical Assistance coverage of donor milk for babies with certain medical circumstances who reside in Pennsylvania. For infants without coverage that have a medical need for donor milk, MAMMB's charitable care sliding scale discount program can provide assistance.

Advertising and Social Media

In addition to providing an important convenience for donor and recipient families, Depots and Dispensaries raise awareness about donor milk. A Depot and/or Dispensary can also draw attention to the host facility. MAMMB encourages our partners to spread the word about donor milk but do ask that they use the following guidelines.

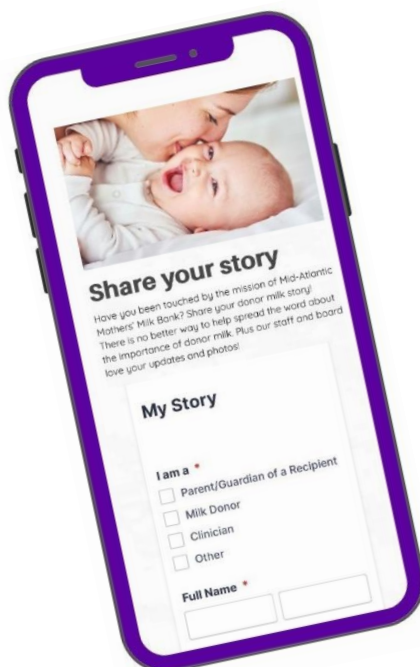
Advertising

All advertising and press releases involving MAMMB Depots and Dispensaries must be approved by both Mid-Atlantic Mothers' Milk Bank and the Depot/Dispensary hosting facility.

Social Media

Social media is a powerful tool to reach families, clinicians, and the general community. Great care must be taken to respect the privacy and wishes of both donor and recipient families. Donors are often eager to post about their donations and they should be encouraged to do so. Please follow these guidelines when posting about donor milk, donation, or dispensing:

- General information posts about the Depot/Dispensary such as photos of your setup, how to obtain donor milk, a link about becoming a donor, etc, are great.
- It's okay to politely ask a Donor if they would like to have their photo taken for social media. Be sure to follow your institution's policies regarding photo release permission.
- Only use names of Donors if they have given you permission to do so and only use first names.
- Do not post any images that contain identifying information. For example, a photo that shows a milk bank with a Donor's name and ID number.
- We avoid mentioning the specific volume of milk donated by a single Donor. Donation is not a competition and every donation, no matter the size, is so impactful.
- Do not tag any families on social media.
- Remember to tag Mid-Atlantic Mothers' Milk Bank! A list of the milk bank's social media pages can be found on page 3.



Family stories have the power to comfort, educate, and inspire! Quotes, stories, and photos can easily be submitted at midatlanticmilkbank.org

Here's a direct link to the form:



Awareness Materials for Depots and Dispensaries

MAMMB provides Depot/Dispensary hosts with a number of marketing and awareness materials including wall clings, window clings, freezer magnets, and stickers. Additional quantities can be order from the Donor Milk in Your Neighborhood page of midatlanticmilkbank.org.



Window Cling



Wall Cling Poster



Stickers for Donors and their Children



Magnets

Educational Resources for Families and Clinicians

MAMMB provides educational materials to hospitals, practices, and community organizations free of charge. To request materials, and to view PDF versions of materials, click “Educational Materials” on the homepage of midatlanticmilkbank.org. All cards and booklets are available in both English and Spanish.



Inpatient Recipient Family Information Stickers

1.5 X 2 inch stickers. QR code leads to inpatient information on midatlanticmilkbank.org including the Meet Nico video.

Inpatient Recipient Family Information Cards

Provides a basic and brief overview of donor milk and MAMMB. For NICU, mother/baby unit, and outpatient use. Available in English and Spanish.



“Meet Nico” Video

2.5 minute animated video for Recipient families available in 7 languages: English, Spanish, Arabic, Chinese, Haitian Creole, Nepali, and Russian. Explains why donor milk is used, milk testing, pasteurization, and donor screening. Access on midatlanticmilkbank.org and via QR codes on various materials.



At home with pasteurized human milk

With the right nutrition and antibodies, pasteurized human milk may be just what some babies need to thrive at home.

- A prescription from the child's healthcare provider is required
- The cost of medically needed donor milk may be covered by insurance (pre-authorization required)
- Donor milk is carefully processed in the lab at the nonprofit Mid-Atlantic Mothers' Milk Bank following state and FDA guidelines



The mother of all nutrition

Pasteurized human milk can be a big help for babies who are struggling. It can also provide immunological support and even be a bridge to a parent's breastfeeding success.

State-of-the-art safe

Milk from the Mid-Atlantic Mothers' Milk Bank is carefully processed and pasteurized in the lab using the latest technology to ensure that critical nutrients remain while bacteria and viruses are destroyed. The milk is tested for bacteria, drugs, and nutrition before it goes to the hospital in specially prepared bottles.

Parents helping parents

Milk comes to the milk bank from unpaid volunteers, who are healthy and have more milk than their own baby needs. Only after a parent is thoroughly screened, including blood testing, can they donate milk.

Mid-Atlantic Mothers' Milk Bank

Proudly inspected and accredited by the Human Milk Banking Association of North America.

Ask your baby's health care provider if donor milk is right for your child.




midatlanticmilkbank.org
(412) 281-4400
info@midatlanticmilkbank.org

Mid-Atlantic Mothers' Milk Bank, a 501(c)(3) non-profit organization, serves hospitals and families in Pennsylvania, West Virginia, New Jersey, Delaware, and Maryland.

Safe use of donor milk

Storing Donor Milk

Donor Milk is stored frozen until use. Frozen milk is safe to use until the expiration date listed on the bottle.

Thawing Milk

Ideally, milk should be thawed in the refrigerator overnight. If you need to rapidly defrost it, place the bottle in a bowl filled with warm water, making sure that the water does not come in contact with the lid. Do not use water that is above 98°F. Do not use a microwave to defrost milk.

Gently swirl the bottle occasionally and just prior to feeding, as this will mix any fat that has separated. Pour the desired amount of thawed milk into a bottle, cup, or supplementer for feeding. Thawed milk may be warmed to feeding temperature using the same procedure of placing the container in a warm water bath. Once a feeding is completed, unused milk left in the feeding container must be discarded.



Special notes

- Completely thaw the bottle to allow the milk to be swirled to distribute nutrients. Do not just thaw enough to pour off a feeding.
- Milk is safe to use up to 48 hours after it is thawed.
- It is important to keep thawed milk refrigerated at all times.
- Never refreeze thawed donor milk.

Things You May Notice

The appearance of milk can vary quite a bit. Some milk looks "thin" while other milk appears "thicker." Milk can also be many different colors, from pure white to pale yellow to white with a bluish or greenish tinge. These variations are perfectly normal and do not indicate differences in quality or nutrition. Depending on your child's previous diet, you may notice a change in his/her stools and stooling patterns. Typical breast milk stools are yellow/golden, loose, and seedy. If you have any questions regarding changes for your child after receiving donor milk, please contact your healthcare provider.




Want to learn more about donor milk and milk banking? Visit us at MidAtlanticMilkBank.org

Proudly accredited by HMBANA



Outpatient Recipient Family Information Cards

Basic and brief overview of using donor milk in the outpatient setting. For community use.

Safe Use of Donor Milk Cards

Outlines safe donor milk storage and handling practices in the home setting. For outpatient use only. Used by Dispensaries and units that send patients home with donor milk at discharge.



Join us and change lives, one ounce at a time. Be a milk donor.

All babies benefit from human milk. But for medically fragile or premature infants, breast milk is even more critical. It's life saving.

When mother's own milk is unavailable, the next best option is pasteurized milk from carefully screened donors.

Donate your breast milk.

Want to help hospitalized babies and outpatient infants with medical needs right in your community? Talk to us about getting screened to be a donor.

Contact us.



Web: midatlanticmilkbank.org
Phone: (412) 281-4400
Email: donate@midatlanticmilkbank.org
Visit: 3127 Penn Ave
Pittsburgh, PA 15201

Proud to be a non-profit milk bank and part of the Human Milk Banking Association of North America (HMBANA)



How to become a donor:

1. Setup a phone interview with one of our screening nurses.
2. Complete the application packet about your medical history, medications, habits, and general health.
3. Get Bloodwork. We have a number of convenient locations close by to every donor.
4. Drop off your frozen milk at our lab, a local depot, or ship it to us.

All costs for screening and shipping are paid by the milk bank.

Considering donation? Please visit us at midatlanticmilkbank.org to see our eligibility requirements.

midatlanticmilkbank.org




Breast milk and bereaved parents.



Donor Information Cards

Information about how to become a Milk Donor.

Bereavement Brochures

Booklet that contains information about lactation after loss. Topics include discontinuing lactation, engorgement, and comfort measures.



Inpatient Wall Cling

11 X 17 inch wipeable, repositionable wall cling. QR code leads to inpatient information on midatlanticmilkbank.org including the Meet Nico video.

Clinician and Student Education

MAMMB believes clinicians can best inform and care for both recipient and donor families when they have an understanding of how milk banking works. To meet the educational needs of the facilities that it serves, MAMMB provides in-person and virtual in-services and presentations at no cost. To schedule an in-service or a tour of the milk bank's facility in Pittsburgh, contact us at info@midatlanticmilkbank.org.

Documentation of the collection and distribution of donor milk is an important part of milk banking. Necessary forms shown below can be downloaded from the Facility Portal accessed as follows:

On the portal you will find PDFs of guidebooks and other documents along with the milk bank's current licenses and accreditation certificates.



Forms may be faxed (412-282-4236), securely emailed (orders@midatlanticmilkbank.org), or a copy included in shipments to MAMMB. Alternately, the information may be submitted through the Depot and Dispensary Forms and Materials link on the Facility Portal.

36

DEPOT NAME: _____



DONOR MILK DEPOT LOG-IN SHEET

Start Date (first donation to an empty freezer): _____ End Date (picked up/shipped): _____

DATE OF DROPOFF	DONOR NAME	DONOR #	DATE OF OLDEST MILK	NOTES	STAFF NAME

Contact us at donate@midatlanticmilkbank.org or 412-281-4400 when your freezer is 75% full or no later than one month from the first drop-off to receive labeled shipping containers. Please include this form when you make your shipment and make a copy for your records.

Name of Staff Member logging out donor milk (shipping) _____

Signature _____

Date _____



RECEIPT OF PASTEURIZED HUMAN DONOR MILK SHIPMENTS

Each shipment of PHDM must be inspected upon receipt. Check the condition of each bottle and document below. Scan and return this form to orders@midatlanticmilkbank.org. Retain a copy for your records.

Date: _____ Total Bottles: _____

BATCH NUMBER	EXPIRATION DATE	NUMBER OF BOTTLES	CONDITION OF BOTTLES
			<input type="checkbox"/> frozen <input type="checkbox"/> cap intact
			<input type="checkbox"/> frozen <input type="checkbox"/> cap intact
			<input type="checkbox"/> frozen <input type="checkbox"/> cap intact
			<input type="checkbox"/> frozen <input type="checkbox"/> cap intact

Staff (print) _____

Staff (signature) _____

Date: _____ Total Bottles: _____

BATCH NUMBER	EXPIRATION DATE	NUMBER OF BOTTLES	CONDITION OF BOTTLES
			<input type="checkbox"/> frozen <input type="checkbox"/> cap intact
			<input type="checkbox"/> frozen <input type="checkbox"/> cap intact
			<input type="checkbox"/> frozen <input type="checkbox"/> cap intact
			<input type="checkbox"/> frozen <input type="checkbox"/> cap intact

Staff (print) _____

Staff (signature) _____

A copy of this form was emailed to the milk bank ☐

3127 Penn Ave. Pittsburgh, PA 15201 / p: 412-281-4400 / f: 412-281-4236 / e: orders@midatlanticmilkbank.org

The information for the Receipt of Pasteurized Donor Human Milk Form can be directly entered on the facility portal instead of using the form, if desired.

DISTRIBUTION OF PASTEURIZED DONOR HUMAN MILK TO RECIPIENT

Milk banks are required to track batch numbers used by recipients. Bottles cannot be distributed until this form is signed and completed. Scan and send completed forms to orders@midatlanticmilkbank.org

Recipient Name: _____ Today's Date: _____

Batch Number

Expiration Date

of Bottles

[illegible]

Age Group	Percentage
18-24	10%
25-34	20%
35-44	25%
45-54	20%
55-64	15%
65-74	10%
75-84	5%
85+	5%

Order Number
(on Credit Card Receipt)

I have received the bottles of donor milk listed above:

Parent, Guardian, or Family Member (printed)

Signature

[Staff \(print\)](#)

3127 Penn Ave. Pittsburgh, PA 15201 / p: 412-281-4400 / f: 412-281-4236 / e:orders@midatlanticmilkbank.org



PDHM Dispensing Log

[illegible]

Please keep this log for your records