The Bridge Program for Exclusive Breastmilk Feeding in the Healthy Term Breastfed Neonate

The New York Milk Bank (NYMB) offers breastfed infants an alternative to formula in the event that mother’s own milk is delayed or insufficient.

Why Breastmilk?¹
Breastfeeding and human milk significantly improve pediatric morbidity and mortality by reducing:

- Upper and lower respiratory tract infections
- Otitis media
- Sudden Infant Death Syndrome
- Gastroenteritis
- Celiac disease, inflammatory bowel disease
- Obesity, diabetes
- Childhood cancers
- Asthma, atopic dermatitis, eczema

Healthy People 2020 Breastfeeding Objectives²

- Increase duration of breastfeeding
- Increase exclusive breastfeeding
- Decrease supplementation of formula in the first 48 hours

Supplementing with donor milk has many benefits including:

- Preserving the gut microbiome and the integrity of the newborn's GI tract
- Avoiding unnecessary or unwanted formula supplementation
- Allows infants who receive donor milk to be included as "Exclusively Breast Milk Fed," which raises the Exclusive Breastfeeding Rate reported to the New York State Department of Health (NYSDOH) and The Joint Commission ⁴
- Emphasizes the importance of human milk, which has been shown to improve breastfeeding rates
- One bottle of 60 mL donor milk can be consumed by multiple infants

Average Reported Intakes of Colostrum by Healthy, Term Breastfed Infants³

<table>
<thead>
<tr>
<th>Time (hours)</th>
<th>Intake (mL/feed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>First 24</td>
<td>2-10</td>
</tr>
<tr>
<td>24-48</td>
<td>5-15</td>
</tr>
<tr>
<td>48-72</td>
<td>15-30</td>
</tr>
<tr>
<td>72-96</td>
<td>30-60</td>
</tr>
</tbody>
</table>

Medical Reasons to Supplement for Full Term Infants³

- Hypoglycemia
- Clinical or laboratory evidence of significant dehydration
- Weight loss ≥8-10%
- Intolerable pain unrelieved by interventions
- Hyperbilirubinemia
- Delayed lactogenesis
- Insufficient milk production due to primary glandular insufficiency, breast pathology, other medical issues

Reasons to NOT Supplement³

- Healthy term infant feeding well, urinating and stooling adequately
- Weight loss in expected range
- Bilirubin levels not of concern
- Infant who is fussy at night or constantly feeding for several hours (cluster feeding)
- Tired or sleeping mother

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Donor Milk in New York State

- New York State regulates breastmilk as a tissue, requiring special licensing for milk banks that supply donor milk and for hospitals that provide it to infants
- Hospitals require a license by NYSDOH to dispense donor milk
- NYMB’s Ten Steps to Using Donor Milk will assist you in the steps to obtaining a license
  - Samples of Forms 2973 and 2973C are available on our website
- Call NYMB to help you establish a Donor Milk Bridge Program for your hospital

The New York Milk Bank

*The New York Milk Bank serves the Tristate area of New York, New Jersey and Connecticut*

- Opened in 2016 and expanded in 2018 to a state of the art facility in Westchester County, New York
- Dispensed almost 600,000 ounces of pasteurized donor milk since opening
- Advocated and succeeded in the reimbursement of pasteurized donor milk for sick and premature infant in New York State
- Licensed by the New York State Department of Health and accredited by the Human Milk Banking Association of North America (HMBANA)
- NYMB is committed to providing the safest and highest quality pasteurized donor milk
  - Donor screening is a vigorous process that includes testing donors for infectious diseases
  - We follow the strictest safety guidelines and quality control
- Pasteurized donor human milk is the best substitute for moms' own milk when it is not available. NYMB encourages women to provide their own breast milk whenever possible. We support Baby Cafés, La Leche League Meetings, and other breastfeeding support groups for lactating women.

5. Tissue Bank License forms are available from NYMB or at this link: https://www.wadsworth.org/regulatory/tissue-resources

Get in Touch!

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