Mother’s Milk for the Hospitalized Baby

If your baby is in the hospital, you can still collect and store your milk so you can feed it to your baby. This is a very good thing to do for your baby and can help them stay healthier in the hospital. This handout will tell you about the positive benefits of feeding your milk to your baby, the best diet for you, and how to store your milk. You should start pumping as soon as you can after your baby’s birth.

What are the benefits of mother’s milk?

Benefits of mother’s milk are immediate and can last a long time, too. Pre-term babies who get mother’s milk for the first month can have half as many infections as those who do not get mother’s milk. Pre-term milk gives your baby more protection than milk from mothers whose babies were born at term. It also has more protein, calories and extra vitamins and minerals your baby needs.

Babies who receive mother’s milk have fewer ear and lung infections. They also have less diarrhea, less constipation, fewer respiratory infections, and fewer urinary tract infections.

What is colostrum?

Colostrum is the golden yellow milk you pump the first days after your baby’s birth. It is packed with everything your baby needs to grow and provides extra antibodies (disease-fighting substances) that help your baby fight infections and other complications. After the first few days, your milk will become thinner and less yellow until it becomes mature milk. Mothers who deliver pre-term infants produce colostrum longer. This gives their baby more antibodies and extra protection for a longer time.

How should I store milk?

- Always label the container using a printed hospital ID label with your baby’s name. Write the date and time you pumped on the label.
- Milk can be kept at room temperature for 4 hours.
- Mother’s milk can be kept in your refrigerator for 2 days. Always place it in the back area of your refrigerator, not in the door.
- Stored mother’s milk will last for 3 months in the back of your freezer or up to 6 months in a deep freezer.
- Milk from each pumping should be stored separately. Never add warm milk to milk that is already cold.

How should I warm milk?

- Use the oldest milk first (as long as it’s not too old to be used).
- Defrost or warm milk by placing the container in warm (not too hot) tap water.
- Allow 12 hours if you defrost milk in the refrigerator, so that it defrosts slowly.
- Never use a microwave to thaw or warm milk.
- Shake thawed milk gently to blend in the fat layer.
- Once thawed, use mother’s milk within 24 hours.
- Do not refreeze thawed milk.
- Throw away remaining milk if your baby does not finish the bottle of breast milk.

What about medications I take?

Most medicines you take are safe for your baby. Let your doctor know you are breastfeeding or providing milk for your baby before they prescribe medicine. This way, your doctor can recommend the best one for you that won’t affect your baby.
If you have questions about a medicine, it is best to pump and store your milk until your questions are answered. If you have questions about medicines you are taking, call the Pregnancy Risk Line at 801.328.2229.

**What should I eat and drink?**

What you eat and drink is important when you’re breastfeeding. You can produce good milk for your baby even if you don’t have a perfect diet. Have your partner or a parent prepare food ahead of time for you. Then sit down and eat at least three balanced meals and two healthy protein snacks every day. A plate of sliced apples, cheese, and a few crackers in the refrigerator is easy to take out and eat. There are no forbidden foods unless you have a history of food allergies.

Continue taking your prenatal vitamins, which will provide extra nutrients you may need. If you have special nutrition needs or questions, tell your nurse or dietician. Once you have a full milk supply (25–35 ounces each day), gradual weight loss should not interfere with breastfeeding. However, keep in mind that diets less than 1,800 calories per day are often low in vitamins, minerals and iron and often lead to fatigue and low milk supply.

Drink 6–8 full glasses of water each day. If you are thirsty, drink more fluids. However, drinking fluids beyond your thirst will not increase your milk supply.

**Skin-to-skin (kangaroo care)**

Ask your nurse or doctor if your baby is healthy enough to be held skin-to-skin. Then hold your baby so your bare skin touches your baby’s bare skin. Snuggling skin-to-skin feels great to a baby and it’s nice for mom and dad as well. It also helps your baby keep a normal temperature and can help you increase milk production.

If you are only pumping, skin-to-skin touch is very important. Through this contact, you will make specific antibodies against the bacteria and organisms in your baby’s environment. These antibodies are then in your breast milk and help your baby.

**Mother’s milk safety**

The hospital staff carefully checks mother’s milk to make sure they only give your milk to your baby. To help protect your child, only give your baby milk after a nurse checks it and hands it to you. Hospital staff will verify your baby’s name and hospital number at these times:

- When you bring your milk to the hospital
- When a nurse is preparing to feed your milk to your baby
- Before you take your milk home

**Our thanks**

Thank you for providing us with your special milk.