

A Hospital's Guide to

Donor Human Milk



MOTHERS' MILK BANK
CALIFORNIA



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Advancing
health and
wellness
with safe donor milk

A LETTER FROM MMBCA'S CEO:

Welcome to *A Hospital's Guide to Donor Human Milk*, a publication by Mothers' Milk Bank California (MMBCA), the oldest operating accredited nonprofit milk bank in the U.S. In 2025, MMBCA drew upon our 50 years of experience and the wide-ranging expertise of our esteemed healthcare partners to create the first comprehensive report on human milk banking in California, as well as a guide to donor human milk for families. Now, we have designed this guide to help hospitals safely and effectively incorporate **pasteurized donor human milk (PDHM)** into their processes.¹⁶

PDHM, colloquially referred to as donor human milk or simply donor milk, helps hospitals give newborn infants and their families the best possible care. Hospitals also play an important role in normalizing breast milk donations. As a mother who received donor milk for my own child, I experienced firsthand how life-changing milk donations can be, and I joined MMBCA because I believe wholeheartedly in **our mission to advance health and wellness with safe donor milk**. As the CEO of MMBCA, I have worked with hospital partners to incorporate PDHM into patient care, and I have heard countless stories from families who received life-changing milk donations and were moved to later give back to other families by donating their own milk.

We created this guide to provide hospitals with information on:

- How PDHM usage in hospitals saves infant lives and supports breastfeeding to improve long-term infant health
- How MMBCA's rigorous standards and longstanding expertise ensure PDHM safety and efficacy and support hospitals' patient care goals
- How hospital partnerships with MMBCA support efforts in spreading awareness of and ensuring equitable access to PDHM

Access to breast milk impacts an infant's entire health trajectory and is therefore one of the most cost-effective ways to improve overall public health at a foundational level. By working together to strengthen the availability of PDHM, we can help improve the health and well-being of future generations.

Jennifer Benito-Kowalski

Chief Executive Officer, [Mothers' Milk Bank California](https://www.mm-bank.org/)

Why use pasteurized donor human milk?



► PASTEURIZED DONOR HUMAN MILK SAVES LIVES.

Breast milk is an optimal food source associated with years of health benefits for both infant and mother.

The [World Health Organization \(WHO\)](#), [American Academy of Pediatrics \(AAP\)](#), and other prominent health organizations recommend that infants be exclusively breastfed for the first 6 months after birth, and then continue breastfeeding until 2 years of age or longer.^{1,2,3} Breast milk is an optimal food source that adapts in real time to an infant's needs and is associated with many health benefits for both the infant and mother.^{1,4} For infants, breastfeeding is associated with a lower risk of several acute infections and chronic illnesses such as asthma, even into adulthood.^{1,4} For mothers, breastfeeding is associated with a lower risk of conditions such as breast and ovarian cancer, Type 2 diabetes, and high blood pressure.^{1,4}

When breastfeeding isn't possible, health organizations recommend the use of pasteurized donor human milk (PDHM) as the best alternative.^{5,6,7} PDHM is milk expressed by healthy lactating women who have a surplus supply and a desire to help other families and babies in need. PDHM contains many nutrients, antibodies, and other bioactive components found in breast milk, strengthening an infant's immune system and promoting healthy growth and development.⁵⁻⁹

► PDHM SAVES LIVES IN THE NICU AND BEYOND.

The accredited nonprofit milk bank [Mothers' Milk Bank California](#) (MMBCA) collects breast milk donations, pasteurizes and processes the donated milk to ensure safety and nutritional composition, and then distributes the pasteurized milk to hospitals and individuals in a safe and regulated manner.^{2,3} The immunity boost provided by PDHM is especially important for very low birth weight (VLBW) and premature infants, who are at risk of life-threatening complications like necrotizing enterocolitis (NEC).^{1,7,8,9}

Incidents of deadly NEC are decreased by more than 50% in infants fed PDHM compared with infants fed formula.



NEC is a serious disease in which infants experience severe intestinal tissue inflammation that can lead to fatal intestinal perforation and sepsis.^{9,10} NEC affects 2–5% of all premature infants and is the cause of 8% of all NICU admissions in the U.S., disproportionately impacting Black and Hispanic infants.^{10,11,12} An analysis of California state health data found that NEC impacted 1 per 1,000 live births in 1999–2004, with a mortality rate of 12.5%, but total NEC-related mortality rates may be as high as 50%.^{10,12} In a study of NEC survivors, 89% reported long-term complications negatively impacting their lives well into adulthood.¹³

Several studies have shown that the incidence of deadly NEC is decreased by more than 50% in infants fed PDHM compared with infants fed formula when sufficient maternal milk is not available.^{7,8,9,14,15} In a randomized clinical trial across 15 hospitals, NEC occurred in only 4% of preterm infants fed PDHM vs. 9% of infants fed formula.¹⁵



► PDHM SUPPORTS BREASTFEEDING AFTER DISCHARGE.

Providing PDHM after delivery shows that the medical team values human milk, which can help new parents be motivated to breastfeed.

In addition to saving lives in the NICU, PDHM can help support breastfeeding overall when parents need more time to establish their milk supply, especially for preterm and NICU infants.^{14,16} Providing PDHM for a short period right after delivery shows families that the medical team values human milk, which can help new parents become or stay motivated to breastfeed. Compared with infants who receive formula, those who receive PDHM are both more likely to be breastfed at discharge and up to 5 times more likely to be exclusively breastfed at 6 months of age.^{16,17,18} By encouraging breastfeeding and supporting NICU infants and families transitioning home after discharge, PDHM plays a valuable role in public health, and is an important node in the circle of care.

Hospitals and healthcare providers play a critical role in providing PDHM to infants in need, as well as normalizing and encouraging milk donation so that PDHM can be accessible to all infants and families. From 2007–2013, milk bank services and PDHM availability in California hospitals doubled, and this was associated with a 3% decrease in NEC incidence and a 10% increase in breastfeeding at discharge.¹⁴ MMBCA's collaboration with hospitals makes it possible to reach more families, ensure equitable access to PDHM, and strengthen the entire care network for newborns.

Why work with MMBCA?



MMBCA HAS PROVIDED SAFE PDHM FOR 50 YEARS.



Founded in 1974 by Maria Teresa Asquith, Mothers' Milk Bank California (MMBCA), formerly San Jose Mothers' Milk Bank, is a charter member of the [Human Milk Banking Association of North America](#) (HMBANA) and is now the oldest operating nonprofit milk bank in the U.S. For the past 50 years, MMBCA has had a trusted role in supporting infant health in California and beyond.

In May 2025, newly declared California Human Milk Donation Month, MMBCA launched *The State of Milk Banking in California*, the first-ever comprehensive report on human milk donation and usage in California.¹⁹ Drawing upon 5 decades of experience and a network of esteemed healthcare partners and experts, this inaugural report provides an in-depth look at the trends, challenges, successes, and opportunities shaping the field of human milk banking in California. You can view and download this report, along with other [MMBCA publications](#) and resources, on [our website](#).

OUR PROCESS

As a charter member of HMBANA, MMBCA adheres to strict safety protocols and ethical standards that have been developed in collaboration with the U.S. Food and Drug Administration (FDA), ensuring that we provide hospitals and families with safe and nutritious PDHM.^{20,21} In addition, we work with and closely follow the recommendations of our medical director Dr. Rachel

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Land, the American Academy of Pediatrics (AAP), the California Department of Health, the World Health Organization (WHO), the Centers for Disease Control and Prevention (CDC), and many other reputable organizations. Our process is the gold standard for safe human milk donation.

SCREENING AND APPROVAL:

We work closely with carefully screened and approved donors to gather surplus breast milk. Prospective donors complete a comprehensive medical and lifestyle screening, including detailed health history and third-party blood testing. This ensures that donated milk is free from infectious diseases, medications, drugs, or other factors that could be harmful to fragile infants.

DONATION PROCESS:

Approved donors receive pumping and transport supplies, along with clear instructions. They may ship frozen milk (with all costs covered by MMBCA), schedule a home pickup, or drop off milk at a convenient collection site. Donors do not receive monetary compensation.

MILK HANDLING AND POOLING:

When milk is received, it is carefully thawed and prepared for processing. If the milk passes initial quality checks, it is pooled with milk from a minimum of 3 other donors in approximately equal volumes per donor, and milkfat may be added or removed to help standardize nutrient composition.

“We’ve used donated breast milk since the milk bank first opened on our campus, so they’re integral to our unit.”

— Dr. Sudha Rani Narasimhan,
neonatologist and Lactation
Director at Santa Clara Valley
Medical Center

PASTEURIZATION AND SAFETY TESTING:

The pooled milk is pasteurized using the industry-standard Holder method— heating to 62.5°C for 30 minutes—to destroy harmful pathogens while preserving as many of its nutritional and immunological properties as possible.^{20,22} The California Department of Public Health (CDPH) Laboratory



TABLE 1: Nutritional Composition of Pasteurized Donor Human Milk

MILK IDENTITY	TOTAL FAT (g/dL)	CRUDE PROTEIN (g/dL)	EST. GROSS ENERGY (kcal/ounce)
<i>Hospital</i>	3.2–4.2	0.9–1.2	19–21
<i>Outpatient</i>	≥ 2.2	≥ 0.8	16–18

then conducts microbiological testing to confirm that the pasteurized milk is safe for medically fragile infants.

NUTRITIONAL ANALYSIS:

The Miris infrared analyzer is used to measure Total Fat and Crude Protein values in the final pooled and pasteurized donor human milk, similar to USDA standards for bovine milk. Gross Energy ranges are estimated using the measured Total Fat values, defined minimum requirements for Crude Protein, a constant for Total Carbohydrates derived from historical data (7.5 g/dL), and standard Atwater factors (4 kcal/g protein, 4 kcal/g carbohydrate, 9 kcal/g fat).

STORAGE AND DISTRIBUTION:

After processing and analysis, the final PDHM is labeled according to its nutritional composition (see Table 1 above) to optimize nutrition for vulnerable infants. The PDHM is then frozen and can be safely stored in tamper-evident, BPA-free containers for several months until it is needed by hospitals or outpatient families.²²

Our rigorous protocols ensure that we always provide safe and high-quality PDHM for use in neonatal intensive care units (NICUs), medical facilities, and homes. We are committed to continue being a vital resource for infants and families in need nationwide.



How MMBCA works with hospitals to advance infant health

MMBCA

+ HOSPITAL PARTNERS

= ADVANCED INFANT HEALTH

MMBCA + HOSPITAL COLLABORATIONS ADVANCE INFANT HEALTH BY:

- effectively providing this lifesaving resource to infants in need
- spreading awareness of the value of human milk
- increasing milk donations to expand access to PDHM

MMBCA PROVIDES SUPPLY AND EXPERTISE

Partnering with a reputable nonprofit milk bank such as MMBCA helps hospitals ensure a reliable supply of donated breast milk and access to expertise in milk banking best practices. MMBCA developed a program called [Mothers' Milk Bank California Cares](#) (MMBCARES) to more effectively partner with hospitals to provide PDHM to as many infants as possible. MMB Cares has helped numerous hospitals, including Santa Clara Valley Medical Center (SCVMC) and Good Samaritan Hospital in San Jose, CA, transition to consistently providing PDHM to their infants in need, by providing a blueprint and hands-on support for setting up their own collection and distribution center.



PDHM plays a crucial role in providing optimal nutrition and health benefits to infants in hospital care. MMBCA provides hospital partners with comprehensive support in following best practices for handling, storing, thawing, and feeding PDHM to ensure its safety and efficacy. MMBCA also values patient education and support for both PDHM recipients and donors, including counseling and lactation support. We collaborate with numerous community partners who provide these resources and encourage healthcare providers to offer such resources to their patients.

MMBCA PROVIDES INFORMATION

For additional resources for hospital staff and patients, please visit our website mothersmilk.org, where you can find information from our [partners](#), as well as our original [publications](#), including:

- [The State of Milk Banking in California](#), the first-ever comprehensive report on human milk donation and usage in California
- [A Family Guide to Donor Human Milk](#), a comprehensive resource on incorporating PDHM into baby's feeding routine
- Informational brochures about the milk donation process that can be given to lactating parents upon discharge



It's our responsibility to improve education and visibility. Donor milk is not only a lifeline for the tiny patient, but also a powerful way for mothers to give back to their communities.

We need to actively increase awareness so that moms who can donate know it's an option.”

— Patrick Rohan, FACHE, CEO of Good Samaritan Hospital in San Jose, CA



HEALTHCARE PROVIDERS SPREAD AWARENESS OF LIFESAVING PDHM

Healthcare providers and hospitals play a crucial role in helping parents understand the importance of human milk. Not only does human milk feeding save lives and support infant health and well-being, but on a larger scale, providing infants with the best possible foundation has an outsized impact on broader public and societal health.

As more parents become aware of PDHM as an option for their babies, demand has increased for both medically fragile infants in the NICU and otherwise healthy infants who may need a small boost in the first days of life. MMBCA has seen a 30% increase in demand for PDHM in the past year and now distributes PDHM to 70% of NICUs in California, as well as select hospitals in other states.

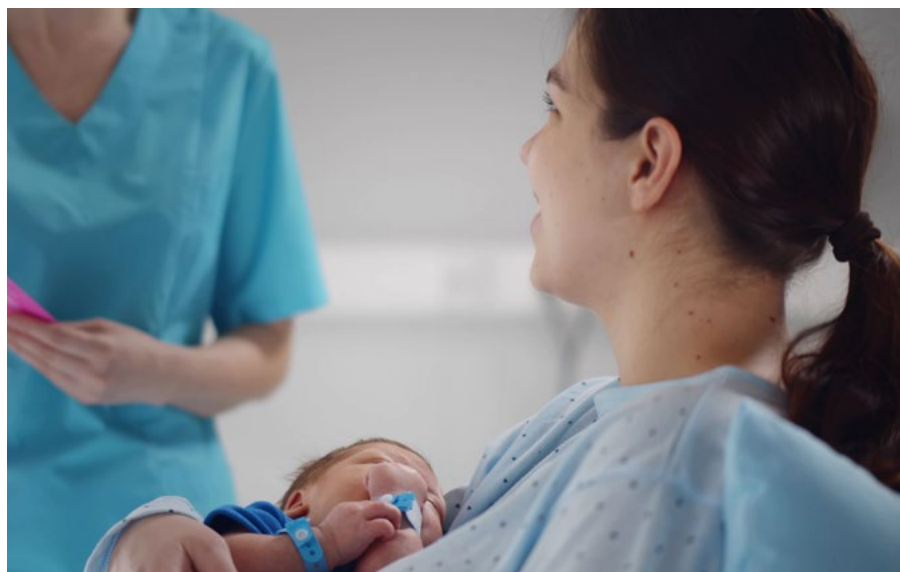
HEALTHCARE PROVIDERS HELP ENCOURAGE MILK DONATION

More infants consuming human milk is a good thing for public health, but it also means that there is a constant need for additional breast milk donors. Community participation is essential, and in addition to spreading awareness of the availability and benefits of human milk, healthcare providers play a vital role in normalizing and supporting milk donation. Partnerships between hospitals and Mothers' Milk Bank California helps continue this virtuous cycle, increasing awareness of both human milk usage and donation.

Many women report that the first time they learned about milk donation was when they received PDHM for their babies. Mothers who receive PDHM are often then moved to become donors for other families.

In a focus group conducted by MMBCA in January 2025, many women reported that the first time they learned about milk donation was when they received PDHM for their babies. Mothers who receive PDHM are often then moved to become donors and offer this resource for other families. When MMBCA donor Magali Hernandez gave birth to her son Franquito at 38 weeks, he was underweight and had a restricted airway. He was rushed to the NICU, where he received life-saving treatment, including PDHM. Hernandez said, "Franco was able to come home after 5 days in the NICU. I knew at that moment that I wanted to do the same for another child in need."

MMBCA's hospital partnerships make it possible to provide this lifesaving resource to more families, ensure equitable access to PDHM, and strengthen the entire care network for newborns. In addition to raising awareness, these partnerships help leverage hospitals' existing medical expertise and infrastructure to more efficiently distribute and collect PDHM. Since 2016, Good Samaritan Hospital has distributed nearly 40,000 ounces of PDHM provided by MMBCA. In addition to providing MMBCA with grants to continue their work, Good Samaritan also helps raise awareness and decrease logistical barriers to milk donation by providing patient education and hosting donor drives.



ACKNOWLEDGEMENTS

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OUR VISION

A world where
human milk
is accessible to all
from the very beginning,
ensuring every baby can thrive.

CONTACT US

MMBCA can help your hospital set up procedures to provide PDHM for the patients in your care. We also provide materials to give to lactating parents upon discharge.

CONTACT MMBCA TO GET STARTED TODAY.

For additional resources for hospital staff and patients, please visit mothersmilk.org.

To request additional support or copies of our publications, including [A Family Guide to Donor Human Milk](#) and other brochures that can be given to lactating patients upon discharge, please contact us.

To work together to supply PDHM to your patients, please connect with our staff to discuss further:

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Donor breast milk has been a game-changer. There are very few things that are as powerful as human breast milk in preventing onset of NEC, which can be deadly to preterm babies.”

— Dr. Rachel Land, neonatologist at Stanford Medicine Children's Health and Medical Director for MMBCA

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