

INFORMATION FOR PATIENTS

Donor milk



What is donor milk?

Donor milk is recommended if you currently do not have enough expressed breast milk for your baby.

Donor milk is breast milk that has been kindly donated by other parents, who have more milk than their baby needs. Parents who donate milk have blood tests. Their milk is then carefully tested, heat-treated (pasteurised), and stored by NHS milk banks to make sure it is safe. It is used when a baby needs breast milk, but their own parent's milk isn't available yet, and is especially for babies born early or very small.



All donor milk used has tracking numbers and expiry dates, which are all checked by staff on the neonatal unit.

Donor milk may be labelled as premature (P) and mature (M). Premature milk comes from parents who expressed milk for one month and had babies born three weeks early or sooner. Mature milk comes from parents who had babies born around their due date and/or after one month of expressing.

Premature milk has more protein than mature milk. Some babies who are given mature milk may also need extra protein to help their brain and bones grow. This can be given by adding a special protein powder (human milk fortifier) to milk. The ward doctors and nurses can explain this more if it is needed.

Why would my baby need donor milk?

Your baby might need donor milk for a short time while your own milk supply is building up. If you start to express more milk this will always be given first, before donor milk. Please speak to the midwifery and/or nursing team for more support with expressing milk.

Donor milk is available for:

- Babies born before 32 weeks gestation.
- Babies weighing less than 1.5kg.
- Babies born between 32 and 34 weeks gestation where you plan to breastfeed exclusively.

Sometimes donor milk is offered outside these criteria. The nurses and doctors will explain if that applies.

Your own milk is always the first choice. Donor milk is just a temporary support until your milk is available. Staff will not give donor milk to your baby until you have told us you are happy with this plan. They will then write this in your baby's records.

What are the benefits of donor milk?

Compared to formula, donor milk:

- Is easier for tiny tummies to digest.
- Helps protect against infections, especially serious bowel infections like necrotizing enterocolitis (NEC), a serious and potentially life-threatening condition in newborn babies where the bowel becomes inflamed and the tissue dies.
- Contains natural immune-boosting properties.

Donor milk has similar properties to your own breastmilk.

What are the differences between a woman's own milk and donor milk?

Your own milk is made just for your baby. It's fresh, full of live antibodies, and changes to meet their needs. Donor milk goes through freezing and heating steps to make it safe, which means some of those live components are reduced. It is still a great option, but not a replacement for your own milk.

Premature donor milk (from parents of early babies) has more protein than mature milk. If mature milk is used, nurses may add a fortifier (with your permission) to help your baby grow strong.

How long can donor milk be used for?

Donor milk can usually be used for up to three weeks, or until your milk supply increases. Your team will talk to you about next steps, which may include switching to formula if needed.

Your first milk (colostrum) is the preferred milk to give to your baby in the first few days because it has lots of nutrients and antibodies. First milk is usually only small amounts, but we will still give this your baby. We can also mix your milk with donor milk if needed.

To help increase your milk supply, you can hand express or express by pump. To help expressing milk:

- Try to express within 1-2 hours after birth.
- Aim to express 8-10 times a day (including overnight.)
- Be close to your baby.
- Using bonding items (like photos or clothing) can help boost your milk hormones.

There is an expressing log leaflet with more information. Please ask a member of the team for support.



What safety checks are completed by the neonatal team?

Every bottle of donor milk is:

- Tested, tracked, and labelled with batch numbers and expiry dates.
- Double-checked by two staff members before being given.
- Recorded in your baby's medical notes for full traceability.

Your verbal consent is always needed before donor milk is given.

If you'd like help with expressing, understanding milk fortifiers, or anything else—just ask your nurse or doctor. They're here to support you every step of the way.

Further sources of information

NHS Choices: www.nhs.uk/conditions

Our website: www.sfh-tr.nhs.uk

Chester Milk Bank: www.milkbankchester.org.uk

Patient Experience Team (PET)

PET is available to help with any of your compliments, concerns, or complaints, and will ensure a prompt and efficient service.

King's Mill Hospital: 01623 672222

Newark Hospital: 01636 685692

Email: sfh-tr.PET@nhs.net

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email sfh-tr.PET@nhs.net.

This document is intended for information purposes only and should not replace advice that your relevant health professional would give you. External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them. If you require a full list of references (if relevant) for this leaflet, please email sfh-tr.patientinformation@nhs.net or telephone 01623 622515, extension 6927.

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