Storing and handling expressed milk

Colostrum room temperature: up to 12 hours

Colostrum refrigerator: up to 8 days

Colostrum hospital refrigerator: enquire about hospital guidelines

Fresh human milk room temperature: up to 8 hours

Fresh human milk refrigerator: up to 8 days

Fresh human milk hospital refrigerator: enquire about hospital guidelines

Human milk refrigerator, freezer compartment: up to 2 weeks **Human milk** freezer that is opened regularly: up to 4 months

Human milk stand-alone freezer kept at a constant -18°C: up to 12 months

Thawed human milk refrigerator: up to 24 hours

Thawed human milk room temperature: use as soon as possible

Room temperature: 19 tot 22° C Refrigerator temperature: 0 tot 4° C

Storing milk in the refrigerator

Milk portions with similar temperatures may be combined. For combined portions use the use-by date for the older portion. Whenever possible place expressed milk in the fridge directly after expressing. Milk that has been kept at room temperature for a few hours before storing in the fridge has a shorter shelf-life than milk that is refrigerated immediately after expressing. Place the expressed milk away from the refrigerator door to avoid temperature changes from the door opening and closing.

Storing milk in the freezer

Let the milk cool in the refrigerator before freezing. Separate portions, once cooled to similar temperatures, can be combined and frozen together. Refrigerated milk can also be added to frozen milk to measure out a full portion, as long as there is more frozen than refrigerated milk in the mix, to prevent the frozen portion from (partly) thawing. Refrigerated milk should ideally be put in the freezer within 24 hours. Portions not frozen within 24 hours may have a shorter than average storage life.



Drinking from a bottle

Milk intake

On average, a baby needs 100-150 ml of milk per kilogram of body weight per day. As the baby grows, the amount of milk needed per kilogram of body weight gradually decreases.

You can use the formula below as a guideline for the average amount of milk your baby needs daily, divided by the baby's average number of feedings per day.

1st mth: 150 ml x body weight in kg/no of feedings 2nd mth: 140 ml x body weight in kg/no of feedings 3rd mth: 130 ml x body weight in kg/no of feedings 4th mth: 120 ml x body weight in kg/no of feedings 5th mth: 110 ml x body weight in kg/no of feedings 6th mth and onwards: 100 ml x body weight in kg/no of feedings (human milk and solids combined)

For example: For a six weeks old baby weighing five kilograms, 140 ml times 5 comes to a daily intake of 700 ml. For a baby taking ten feeds a day on average, this would amount to 70 ml per feeding. With most babies, the milk intake varies from one feeding to the next. Storing and freezing smaller amounts of milk allows for more flexibility in portion size. Previously warmed milk left over from a feeding is safe to offer again to a maximum of one hour afterwards.

Bottle-feeding

Expressed milk can be offered to your baby in all kinds of ways, for instance from a (sippy) cup, a bottle, a spoon or a syringe. The bottle is the most widely used. Drinking from a bottle calls for a different drinking technique compared to breastfeeding. That is why it is important to wait with introducing the bottle until the baby has been nursing at the breast successfully for at least a couple of weeks.

Bottle feeding tips

- Use the smallest size flow nipple available.
- Hold the baby as upright as possible.
- Allow the baby to take the bottle nipple in their own time.
- Let the baby just hold the nipple in their mouth or suck without extracting any milk by holding the bottle horizontally, not tipped up at an angle. Then tip the bottle up just enough to let the milk flow into the baby's mouth, avoiding too strong a flow.
- Allow the baby to pause as needed.
 Withdraw the nipple from the mouth,
 resting it on the lower lip. Wait for the
 baby to latch on to start drinking again.
 When the baby refuses to let go of the
 nipple, lower the bottle until the milk
 flow stops, tipping it up again once the
 baby starts suckling again.
- Be sensitive to signs of stress from your baby: splaying fingers or toes, milk spilling from the corners of the mouth, frowning, attempts to turn the head or push away the bottle, guzzling, panting, shortness of breath or wheezing. Allow the baby a break from drinking when you see these signs and try for a more paced style of feeding.