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Parental consent form for the use of donor milk

Name tag	This consent form should be scanned in to the child's journal.
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Consent for use of donor milk

Breast milk is the best nutrition for all children, with a unique and ideal composition of nutrients. Breast milk is uniquely adapted to the newborn baby's metabolism and intestines. At the same time, the milk supplies substances that promote the development of the gut, antibodies and other components that directly counteract infections.

For almost all premature babies, we start to give breast milk in the first day of life. In addition, most children with birth weight less than 1200 g and seriously ill full term children will also receive intravenous nutrition. Often the baby will therefore receive a combination of nutrition intravenously and breast milk in the stomach. Those children who are not able to suck and swallow the milk will receive the milk via a thin soft plastic tube into the stomach.

In Norway, there is a long tradition of giving breast milk to sick newborn and preterm children. It is of great importance that breast milk is available, especially to premature and sick children whose mother has not started breastfeeding or cannot or will not breastfeed. The hospital is self-sufficient with breast milk from its own breast milk bank. Of this excess milk that healthy women provide, your child will be able to get breast milk. The women who give milk are healthy women who have undergone various tests to see if they have infectious disease. The tests include examination of HIV, hepatitis B and hepatitis C status in donors. The milk is bacteriologically tested and approved. There are also strict hygiene rules for all the procedures in the breast milk bank.

The requirements for a breast milk donor are similar to those of a blood donor. Whoever gives milk should not be able to know who receives it. Conversely, the individual recipient (children / parents) cannot know who the milk comes from. The breast milk bank, on the other hand, has such an overview. We can trace the milk from donor to recipient and vice versa. The milk is used primarily for newborns, maternity wards and other wards where premature or sick children are treated.

Thus, breast milk will have a number of nutritional, immune-stimulating and anti-infection benefits that factory-produced substitutes do not have. Alternatives to breast milk from donors would be cow's milk-based breast milk substitutes, which are mixed in water.

Information has been provided to parents similar to the above described.

Ward:

Date: Nurse's signature:.....

Date: Parents signature:.....