

If you have any questions, call your health care provider or lactation specialist at:

Mease Countryside Hospital – (727) 725-6821

Morton Plant Hospital – (727) 462-7749

St. Joseph's Women's Hospital – (813) 872-3932

St. Joseph's Hospital-North – (813) 443-7350

St. Joseph's Hospital-South – (813) 302-8338

South Florida Baptist Hospital – (813) 757-8343

Winter Haven Women's Hospital – (863) 294-7068

Breast Pumping and Storage Guidelines for The Hospitalized Infant



Helpful Tips for Getting Started

- Begin pumping or hand expression as soon as possible after your baby is born. “Pump early, pump often.”
- Pumping within the first few hours after birth helps to achieve an adequate milk supply after delivery.
- Make yourself comfortable before pumping.
- Relax to help your milk “let down” or begin to flow.
- Look at a picture of your baby or hold a piece of your baby’s clothing.
- Gently massage your breasts before and during pumping.
- Stay well hydrated when you pump (water is best).
- Get plenty of sleep, and nap when your baby is sleeping.
- If your baby is in stable condition, skin-to-skin/kangaroo care may be initiated.

Pumping Technique

- Wash your hands thoroughly using soap and water.
- Center the breast shields over the nipple and maintain a good seal around the shield.
- Start the pump and make sure your nipple moves evenly through the center of the breast shield.
- Pumping should feel comfortable. If you feel any pain, stop the pump and ask for help.
- Initially pump each breast for 15-20 minutes whether any milk comes out or not.
- As flow of milk increases after a few days, pump until each breast feels softer and at least two minutes after the last drop in order to obtain the higher fat “hindmilk.”
- Pump every two to three hours, for a total of 8-12 pump sessions each 24 hours, including at night.
- Keep a daily log of expressed milk to monitor your milk supply.
- After completing each pump session, stop the pump first and then remove the shields.
- Clean pump kit parts as the manufacturer directs (see pump-specific instructions).
- Note that in the early days of pumping, it’s normal to express only a few drops of milk, but every drop is worth saving.
- Hand expression is another method to express colostrum and may also be done after pumping.

Collecting, Labeling, Storing and Transporting Expressed Milk

- Containers and labels for milk storage are to be obtained from your baby’s nurse. Verify that the information is correct on all labels.
- All expressed milk must be properly labeled with mother’s initials, date and time expressed or it will be discarded.
- Pump into a clean collection bottle every time.
- Leave some space at the top of the container to allow for expansion when freezing.
- Keep expressed milk cold when transporting to and from the hospital. An insulated carrying case with cooler packs is recommended.
- A team member will verify that all expressed milk containers received are properly labeled.
- A team member will place expressed milk containers in the hospital refrigerator or freezer for storage.
- Ask a team member for additional collection bottles and labels, as needed.
- Prior to feeding your infant, verify that the container is labeled with your infant’s name.
- In the hospital, the freezer unit has limited space so you may need to take some of your expressed milk home to store. Your baby’s nurse can assist you in determining the amount of milk needed.
- If your baby isn’t getting oral feedings, you may need to freeze your pumped milk in the containers provided and store in your home freezer until needed. A thermometer is recommended for temperature control.

Expressed Milk Storage Guidelines for Hospitalized Infants

	Room Temp.	Refrigerator	Home Freezer	-20°C Freezer
Freshly expressed breast milk	4 hours	96 hours (4 days)	3 months	12 months
Refrigerator or cool water-thawed breast milk (previously frozen)	Do not store	24 hours	Never refreeze thawed milk	Never refreeze thawed milk