

Delivery of Expressed Breast Milk (EBM)
Safety Checks

Full Name:
 Address:
 HCR:.....
 DOB: __/__/____

Addressograph

Milk safety checks can be performed by the following:

- a) First checker must be a registered nurse
- b) Second checker can be a parent, registered nurse, student nurse (Intern or PRCNS) or health & social care professional

- ⚠ Order of Use of EBM ⚠**
1. Colostrum Day 1-5
 2. Fresh expressed milk
 3. Frozen EBM using oldest date first

Please follow these instructions when removing EBM from the fridge:

- ✓ Two checkers check: name & date of EBM bottle at fridge
- ✓ If EBM needs fortification/ additions – 2 checkers must ensure details on patient’s diet sheet match directions on sachet/ label on bottle containing product from formula room; check expiry date
- ✓ Two checkers perform safety checks at the patient’s bedside
- ✓ Two checkers date & sign the below sheet

- ⚠ Checks Required ⚠**
- Baby’s name
 - HcRN
 - Date of birth
 - Date & time milk expressed
 - Date & time if milk decanted / defrosted
 - ID band at bedside

Date	Time	Checked at Fridge						Additions/ Fortifier <i>If yes, add initials</i>	Checked at Bedside				
		1 st Checker			2 nd Checker				1 st Checker	2 nd Checker			
		Nurses Signature	Nurses Grade	NMBI	Signature	Grade/ Title/ Parent	NMBI/ Corú/ Medical No		Nurses Signature (Grade & NMBI as at fridge)	Signature	Grade/ Title/ Parent	NMBI/ Corú/ Medical No/	

