Human milk makes all the difference for premature infants. Prolacta Bioscience offers guaranteed supply* of quality donor human milk to supplement mother's own milk.

Donor Human Milk Pasteurized. Standardized. Quality Assured.

The benefits of breastfeeding are well established and highly recommended by healthcare professionals and the U.S. Department of Health and Human Services (HHS).¹ Mother's own milk (MOM) and donor human milk (when MOM is not available) are rapidly becoming the standard of care for feeding all premature infants. Your neonatal intensive care unit (NICU) can depend on Prolacta for the safest, highest-quality donor human milk—with no supply shortages.

- "Breastfeeding and human milk are the normative standards for infant feeding and nutrition."
- "The potent benefits of human milk are such that all preterm infants should receive human milk."
- "If mother's own milk is unavailable ... pasteurized donor milk should be used."
 - —American Academy of Pediatrics (AAP) Policy on Breastfeeding and the Use of Human Milk²



Prolact HM® Human Milk (Human, Pasteurized) 20 kcal/fl oz PremieLact® Human Milk for Trophic Feeds (Pasteurized) 20 kcal/fl oz

0 ml (0.34 fl.oz)

0 mL

PremieLac

Lower pricing options with committed purchase agreements.



*With a committed purchase agreement

Prolacta is the industry leader in providing standardized human milk.

Standardized nutrition

- The first donor human milk formulated to deliver an average of 72 kcal (at least 20 kcal/fl oz) and 1.0 g of protein per 100 mL 3
- Labeled in accordance with U.S. Food and Drug Administration (U.S. FDA) food labeling requirements
- Two-year shelf life supported by real-time stability studies³
- Should be administered within 48 hours once the thawing process begins³

Industry-leading quality and safety

- Donor human milk verified by deoxyribonucleic acid (DNA) matching to the donor
- Each donation tested for common drugs of abuse, nicotine, and adulteration
- Each donation tested using nucleic acid amplification testing (NAT) for pathogenic viruses and bacteria listed below:
 - -Human immunodeficiency virus type 1 and type 2 (HIV-1/HIV-2)
- —Zika virus (ZIKV)
- —Treponema pallidum
- —Human T-lymphotropic virus type I and type II (HTLV-1/HTLV-II)
- -Mycobacterium tuberculosis
- -Hepatitis virus type B and type C (HBV/HCV)
- Each donation processed in a pharmaceutical-grade manufacturing facility

Guaranteed supply*

• Prolacta offers a guaranteed supply of donor human milk based on your NICU's usage forecast—that means no more donor human milk shortages

Available in two sizes for flexibility in feeding your premature infants:





Prolacta is committed to raising the bar on quality and safety.

	Prolacta Donor Milk Banks	Non-Prolacta Donor Milk Banks ⁴
Donor Selection Procedure		
Donor Screening		
Written health screenEducational material provided	\checkmark	✓
Serological Blood Test		
• HIV-1/HIV-2, HTLV-I/HTLV-II, HBV/HCV, and syphilis	v	V
Healthcare Professional Medical Release Forms		
 Donor Infant[†] 	\checkmark	\checkmark
Donor Identification Test	./	Not Poquirod
 DNA profile created when donor applies 	V	
Donor Freezer Qualification	./	Not Required
 To determine adequate storage temperature at home 	V	1 tor Required
Donated Raw Milk Is:		
Tested for adulteration, nicotine, and drugs of abuse	\checkmark	Not Required
DNA matched for assured donor identification	\checkmark	Not Required
 Each donation is tested using NAT to screen for pathogenic viruses and bacteria listed below: HIV-1/HIV-2, HTLV-I/HTLV-II, HBV/HCV, ZIKV, Treponema pallidum, Mycobacterium tuberculosis 	\checkmark	Not Required
Processed Milk Is:		
Screened for aerobic count, <i>B. cereus, E. coli, Salmonella, Pseudomonas,</i> coliforms, <i>S. aureus</i> , yeast, and mold	Complete microbiological screen on representative samples	One randomly selected aliquot of processed milk from each batch is cultured for bacterial contamination
Nutritionally standardized to 20 kcal/fl oz	\checkmark	Not Required

"There are significant risks involved in the collection, processing, and distribution of donor milk-based products. The behaviors of the donors, biochemical and genetic screening, and milk processing are critical to mitigation of these recognized risks. Testing at this level of rigor appears to be justified."

-Bloom Report on Safety of Donor Milk⁵

†Exception if baby is not in their care, such as the baby has died or been given up for adoption

3 Data on file.

4 Guidelines for the establishment and operation of a donor human milk bank. 10th ed. Human Milk Banking Association of North America. 2018:15-16,43-44,47.

5 Bloom BT. Safety of donor milk: a brief report. J Perinatol. 2016;36(5):392-393. doi:10.1038/jp.2015.207



U.S. Food and Drug Administration. Use of donor human milk. https://www.fda.gov/science-research/pediatrics/use-donorhuman-milk. Updated March 22, 2018. Accessed April 6, 2020

² American Academy of Pediatrics. Breastfeeding and the use of human milk. Section on Breastfeeding. Pediatrics. 2012;129(3):e827-e841. doi:10.1542/peds.2011-3552

Prolact HM donor human milk (118 mL) and PremieLact donor human milk (10 mL) Nutrition Information.

The nutrient values are provided for general reference only. They are based on median values derived from multiple lots. Always use the nutrient values on the product label when making feeding calculations.



NUTRIENTS*	Unit	Prolact HM	PremieLact
Volume	mL	100	10
Calories	kcal	71.6	7.16
Macronutrients			
Protein	g	1.0	0.10
Carbohydrate	g	7.6	0.76
Fat	g	4.1	0.41
Vitamins			
Vitamin A	IU	103.0	10.30
Vitamin D	IU	**	* *
Vitamin E	IU	0.5	0.05
Vitamin K	mcg	* *	* *
Biotin	mcg	* *	**
Thiamine (Vitamin B ₁)	mcg	5.9	0.59
Riboflavin (Vitamin B ₂)	mcg	7.0	0.70
Vitamin B ₆	mcg	* *	* *
Vitamin B ₁₂	mcg	* *	* *
Niacin	mcg	70.0	7.00
Folate	mcg	* *	* *
Pantothenic Acid	mcg	210.0	21.00
Vitamin C (Ascorbic Acid)	mg	* *	**
Minerals			
Sodium	mg	8.9	0.89
Potassium	mg	42.9	4.29
Chloride	mg	29.5	2.95
Calcium	mg	26.2	2.62
Phosphorus	mg	13.0	1.30
Magnesium	mg	3.1	0.31
Manganese	mcg	* *	* *
Copper	mcg	20.4	2.04
Zinc	mg	0.1	0.01
lodine	mcg	12.8	1.28
Iron	mg	* *	* *
Selenium	mcg	1.5	0.15
OSMOLALITY	mOsm/kg	290†,1	290†,1

*Nutritional values are median values derived from multiple lots.

**Not a significant source of this nutrient

†Referenced osmolality value for human milk.

ISapsford A, Smith C. Enteral Nutrition. In: Groh-Wargo S, Thompson M, Cox JH, eds. Academy of Nutrition and Dietetics Pocket Guide to Neonatal Nutrition. 2nd ed. Chicago, Illinois: Academy of Nutrition and Dietetics; 2016:88-89.

