

## Purpose

This document provides information about safe bottle handling and formula preparation in infant care settings. It includes steps to take for storage of formula and breast milk, bottle preparation, bottle warming, bottle cleaning and purchasing formula.

## Procedure

### Storage of Bottles

#### Formula:

- Prepare bottles of formula daily for each child.
- Label all bottles with infant's **full name and date** at time of preparation.
- Cap and refrigerate filled bottles upon arrival (breast milk) or after preparation, unless it's fed to an infant immediately.
- Store bottles in the coldest part of the refrigerator, not in the refrigerator door.
- Keep the refrigerator thermometer in the warmest part of the refrigerator (usually the door) at or below 40 degrees F at all times. Log the temperature daily using the [Daily Refrigeration Temperature Record](#).
- **Unused bottles of formula must be discarded at the end of the day.**

#### \*Breast milk:

- Bottles or containers of breast milk may be brought into the center and stored.
- Containers of breast milk must be labeled with the child's full name and the date the breast milk is brought to the center. Breast milk may be stored in the freezer compartment of a refrigerator at 10 F or less, for no longer than 2 weeks.
- Thawed breast milk may be held in bottles clearly labelled with the child's name and date for up to 48 hours in the refrigerator. If a container of breast milk is moved from the freezer to the fridge, add the date of the first day of storage in the fridge.
- Return bottles of thawed breast milk that have been stored in the fridge and not used within 48 hours to the parent/guardian, or discard.

\*If a child is mistakenly fed another child's bottle of expressed human milk, the incident should be treated as an exposure to a body fluid:

1. Inform the mother who expressed the human milk about the mistake and when the bottle switch occurred.
2. Inform the parent/family member of the child who received the milk.
3. Tell them both to contact their primary health care providers.
4. Complete separate [Medication Administration Error Records](#) for each child and have the parents/family member sign it and provide each with a copy to bring to the primary health care provider.
5. Place the documentation in the child's file and notify the Health, Nutrition and Safety Consultant or Coach
6. Evaluate why the mistake occurred and what changes need to be made to prevent future mistakes.

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7. If the medical provider recommends testing of human immunodeficiency virus (HIV), cytomegalovirus (CMV), human T-lymphotrophic virus (HTLV), hepatitis A, hepatitis B, and hepatitis C, make arrangements for the EL program to pay the medical costs.

(See reference - <http://www.consumermedsafety.org/medication-safety-articles/item/752-breast-milk-mix-ups-at-daycare-facilities>)

### Bottle Preparation

- Staff, not parents, must prepare all bottles.
- Maintain a minimum of eight feet between the food preparation area and the diapering area. (If this is not possible, a moisture-proof, transparent, 24-inch high barrier – such as Plexiglas - must be installed.)
- Clean, rinse, and sanitize preparation surfaces before bottles are prepared.
- Staff must wash hands in the hand-washing sink before preparing bottles. The food preparation sink may not be used for hand-washing or general cleaning.
- Staff involved in food preparation should not change diapers. Bottle preparation should be completed before or after diapering NOT during. If a staff person changes diapers and prepares bottles, careful handwashing is critical.
- Wear gloves when scooping powdered formula from a can. Gloves used for food preparation must be readily available in food preparation area.
- Prepare bottles of formula with cold water from the cold water tap or other safe and credible water source. Do not use water from a hand-washing sink for bottle preparation. (Hot tap water can be contaminated with lead. Only cold water should be taken from the tap for cooking or drinking.)
- Mix formula as directed on the can.
- Record the date on cans of formula when they are opened and use within 30 days. Do not use past expiration date.
- Use only BPA-free plastic, #1, #2, # 4 or # 5, or glass bottles.
- Keep a list of the formula each child receives in a visible place where the formula is mixed. Clearly print the names of each child receiving formula on each open can. (More than one name may be included on each can).
- Label bottles with infant's full name and date of preparation. Cap and refrigerate bottles if they are not immediately used. Cover bottle nipples at all times, except during feeding, to reduce the risk of contamination.
- Store powdered formulas in a closed, dry cabinet, with the lid on.

### Bottle Cleaning

- Do not store used bottles and dishes within eight feet of the diapering area or place them in the diapering sink.
- Bottles can be re-used during the day (or from day to day without sending them home). Between uses, bottles, bottle caps, and nipples are placed in a tub for dirty dishes (or directly into dishwasher), then washed in a dishwasher with a sani-rinse; or they may be washed, rinsed, and boiled for one minute.

### Purchasing Formula

- The EHS center is responsible for purchasing formula for all enrolled babies aged 12 months and younger. Parents should not provide or purchase any formula.
- For babies receiving WIC services, centers must offer the same iron fortified milk- and soy-based formulas approved by the WA State WIC program: Currently approved WIC formulas are Similac Advance and Gerber Good Start Soy.
- For babies not receiving WIC formula, the center must provide the same type of formula the baby gets in the home. All formula provided by any EHS program must be FDA approved. Contact your PSESD Health, Safety and Nutrition Consultant if unsure.
- EHS programs must purchase therapeutic formulas for a child with a documented medical condition. A *Child Health Plan and Provider Orders Form-Dietary Accommodations-Food Allergies/Intolerances* must be completed.
- WIC approved therapeutic formulas can be found at:  
<http://www.doh.wa.gov/Portals/1/Documents/Pubs/960-007-WICApprovedFormulas.pdf>

### Bottle Warming

- **Do not** warm bottles in a microwave.
- Thaw frozen containers of breast milk in the refrigerator or swirl under cool, running tap water and then warm as needed before feeding. Do not refreeze thawed breast milk.
- Warm up bottles by using one of the following methods:
  - Place bottle in warm water (<120°F) or place bottle under warm running tap water (<120°F)
  - Use a bottle warmer that is secured to the counter or wall. Clean, rinse and sanitize daily.
  - Bottles of formula or breast milk should not be held in warm water for more than 5 minutes.
- Check the temperature before the bottle is fed to an infant (use wrist method). Formula or breast milk should never reach over 98 F.
- Do not reheat bottles of breast milk or formula. Discard bottles that are left at room temperature for an hour or more.

### Resources

*Caring for Our Children and Stepping Stones to Caring for our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs, Third Edition, American Academy of Pediatrics,*  
<http://www.cfoc.nrckids.org>

Public Health Seattle King County Child Care Health Policy template: [www.kingcounty.gov/health/childcare](http://www.kingcounty.gov/health/childcare)