

IDENTIFICATION OF PARTICIPATING MOTHER

Last name: _____
First name: _____
Date of birth (dd-mm-yyyy): _____

IDENTIFICATION OF CHILD

Last name: _____
First name: _____
Date of birth (dd-mm-yyyy): _____

HEALTHCARE PROFESSIONAL AUTHORIZATION

Héma-Québec manages the Québec Public Mothers' Milk Bank. The safety of donor mothers and their children is of the utmost importance to the organization. Moreover, Héma-Québec is solely responsible for determining donor eligibility.

Donor mothers must be in good health and non-smokers. They must be nursing and be able to produce surplus milk. The donor qualification process consists of:

- A telephone interview during which the mother will be asked to answer a health questionnaire;
- A series of blood tests and
- Follow-ups on the mother's lifestyle habits every two months.

Héma-Québec asks for the opinion of a healthcare professional to ensure that the act of donating milk will not hinder the child's development or the mother's well-being. The donated milk must be surplus milk so as not to interfere with the child's growth.

Based on my observations, the mother and child identified above do not show any sign or behaviour indicating that milk donation would be harmful to the child. Accordingly, I do not have any objection to the mother's inclusion in Héma-Québec's qualification process to donate her surplus milk to the Héma-Québec Public Mothers' Milk Bank.

Name of healthcare professional (in block letters) and professional licence

Professional's signature

Date (dd-mm-yyyy)

* Only the members of the following professional orders are authorized to sign this letter:
- CMQ (doctors)
- OIIQ (nurses)
- OSFQ (midwives)