In late pregnancy, over **450 ml (15 ounces)** of blood passes through the placenta per minute.

At birth, a typical umbilical cord holds **60–80 ml (2–2.7 ounces)** of blood.

The goal of Delayed Cord Clamping is for some of the cord blood to transfuse into the newborn.

If all the blood in the umbilical cord entered the baby, it would add **20%** to the baby’s blood supply.

Delayed Cord Clamping is not possible for all births and does not ensure the infant will receive extra blood.

Full term babies benefit from Delayed Cord Clamping with higher iron levels for up to **6 months**.

Premature babies benefit from Delayed Cord Clamping with reduced complications from prematurity.

Delayed Cord Clamping has become the standard of care, but no one agrees how long to delay.

There is a trade-off between Delayed Cord Clamping and collecting umbilical cord blood.

Preserving umbilical cord blood can give lifelong access to stem cells for future medical use.

References: