

# Newborn Eye Prophylaxis

## Informed Consent

### ***What is Ophthalmia Neonatorum?***

Ophthalmia Neonatorum (ON) and Conjunctivitis of the newborn are terms used to describe inflammation of the conjunctiva, usually accompanied by a purulent appearing discharge, in an infant that is less than one month old.

### ***What causes ON?***

There are several possible causative organisms including Staphylococcus Albus, Escherichia Coli, Bacillus Proteus, Pseudomonas Aeruginosa, Chlamydia Trachomatis and Neisseria Gonorrhoeae, but the most common cause in the United States is Chlamydia Trachomatis with an incidence of 8 in 1,000 live births. Gonococcal Ophthalmia Neonatorum has an incidence of 0.3 in 1,000 live births.

### ***Is ON dangerous for my baby?***

Left unchecked, Gonorrhea or Chlamydia bacteria can cause permanent visual impairment, including blindness and can spread to other parts of the body such as the lungs, causing pneumonia in the newborn.

The use of a prophylaxis against ON is mandated by Colorado Revised Statute 25-4-303, which states: *"It is the duty of any physician, nurse, or other person who assists or is in charge at the birth of any infant or has the care of the same after birth to treat the eyes of the infant with a prophylaxis approved by the department of public health and environment. Such treatment shall be given as soon as practicable after the birth of the infant and always within one hour. If any redness, swelling, inflammation, or gathering of pus appears in the eyes of such infant, or upon the lids or about the eyes, within two weeks after birth, any nurse or other person having care of the infant shall report the same to some competent practicing physician within six hours after its discovery."*

(<http://www.michie.com/colorado/lpext.dll?f=templates&fn=main-h.htm&cp> )

Although this statute requires the use of prophylaxis, parents still have the option to refuse the treatment.

### ***What agents are used to treat ON and how effective are they?***

Currently, the prophylaxis of choice is either 0.5% Erythromycin ointment or 1% Tetracycline ointment. If either you or your husband have an allergy to Erythromycin or Tetracycline, please let us know so an alternative can be obtained before your baby's birth.

### ***How is Erythromycin ointment administered?***

Erythromycin ointment is instilled as a narrow ribbon or strand, ¼ inch long, along the lower conjunctival surface of each eye, starting at the inner canthus. It is instilled only once in each eye.

### ***Are there any side effects?***

There may be a sensitivity reaction to Erythromycin. The ointment may interfere with the ability to focus and may cause swelling and redness. The side effects usually disappear in 24-48 hours.

### ***What are the signs and symptoms of ON?***

Watch the baby's eyes for redness, discharge and swelling. Gonorrhea symptoms will usually appear in the first three days of life. If symptoms develop, a culture of the eye discharge is highly recommended.