Newborn Eye Prophylaxis

Ophthalmia neonatorum, or newborn conjunctivitis (“pink eye”) is usually a mild illness that involves temporary eye irritation and swelling of the eyelids. However, one type of newborn “pink eye,” gonorrheal conjunctivitis, can lead to blindness if untreated.

Gonorrheal conjunctivitis in the newborn is caused by exposure to the gonorrhea bacterium during childbirth. Gonorrhea is a sexually transmitted infection (STI) that often has no symptoms. It can cause serious reproductive health concerns, such as infertility, pelvic inflammatory disease, ectopic pregnancy and preterm birth. Gonorrhea and chlamydia screening is routinely offered in pregnancy; infection can be treated with a course of antibiotics.

In the United States, the antibiotic ointment erythromycin is used routinely after birth to prevent nearly all (99.005%) cases of newborn gonorrheal eye infection. Without prophylaxis (prevention), 30-40% of babies born to mothers who have gonorrhea will also become infected during childbirth.

Washington law requires erythromycin to be administered to newborns in the first hours of life unless declined in writing by the parents. Administration involves gently applying a thin ribbon of ointment to each eye. Risks to the antibiotic ointment include temporarily blurred vision and potential irritation.

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I have read all of the above and have had the opportunity to ask questions. I understand the benefits and risks to my/our baby of choosing the eye ointment (erythromycin) as well as declining it.

I also understand that I may choose to be screened at this time for gonorrhea and chlamydial infections. I understand that successful treatment of a gonorrhea infection prenatally will prevent newborn exposure to gonorrhea—and possible conjunctivitis that leads to blindness—at birth. My choice is indicated below.

___ I/we consent to eye ointment (erythromycin) to my/our newborn.

___ I/we refuse eye ointment (erythromycin) for my/our newborn.

Signed: _____________________________________________  Date: ____________________________

References: UpToDate (2013), CDC (2014)
Updated: January 2014 (Wilcox)