



Antibiotic Eye Ointment Information, Authorization, and Waiver

According to Utah Law, we are required to administer an antibiotic to your baby’s eyes.¹

Why is this required?

The sexually transmitted diseases chlamydia and gonorrhea are the major causes of neonatal eye infections acquired during the birth process. These infections can be very serious and may cause blindness. Women (and men) who have these diseases may not have any symptoms.

What if I am not at risk for gonorrhea or chlamydia?

Even though the code does not state that parents can refuse the ointment, it is well known that parents have the right to refuse any medical procedure for their child. Therefore, we feel that it is your choice.

Benefits of eye ointment:

- Will usually prevent gonorrhea and chlamydia infections in newborn’s eyes, and thereby prevent the blindness which may result from neonatal eye infections.
- Will also prevent other incidental eye infections which do not cause blindness.

Risks of eye ointment:

- There are three kinds of ointment, erythromycin, tetracycline, and silver nitrate. Erythromycin and tetracycline are not painful to the baby, but do blur the vision. Blurred vision can interfere with bonding. Silver nitrate irritates the newborn’s eyes and burns the cornea slightly. We do not use silver nitrate.
- Allergic reaction to eye ointment is possible, but extremely rare. If it occurs, the ointment can be washed out. The most frequent adverse reactions are minor irritation, redness, and hypersensitivity reactions.

If you want your baby to have the eye ointment:

Your midwife will administer Erythromycin ointment to the baby within 3 hours of birth.

If you do not want your baby to have the eye ointment:

Watch for symptoms of infection, and treat if they develop. The most common symptoms are: lots of mucous discharge from the eyes, and swelling and redness of the eyelids. Newborns may also develop minor eye infections from contact with siblings or others. These are not related to sexually transmitted infections and are easily treated.

<input type="checkbox"/> I would like my baby to have the eye ointment. I understand that there are known and unknown risks with the eye ointment, and I release and hold harmless my midwife and BetterBirth _{llc} , from any complications that may occur. _____ signature _____ date _____ witness	<input type="checkbox"/> I do not want my baby to have the eye ointment. I accept the risks and release and hold harmless my midwife and BetterBirth _{llc} from the consequences of this decision. _____ signature _____ date _____ witness
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¹ Utah Administrative Code section R386-702-9 entitled Special Measure for the Control of Ophthalmia Neonatorum states: “Every physician or midwife practicing obstetrics or midwifery shall, upon the birth of a child, instill or cause to be instilled in each eye of such newborn one percent silver nitrate... or tetracycline ophthalmic preparations or erythromycin preparations as these are the only antibiotics of currently proven efficacy in preventing development of ophthalmia neonatorum... A maximum delay of three hours shall be allowed between the time of birth and the administration of an approved prophylactic agent.”