

Center for Natural Birth
4135 54th Place, San Diego, CA 92105
Ph. 619-814-0567, Fax 169-814-0569

Mother _____ Date of birth _____

Neonatal Prophylactic Eye Treatment Consent/Refusal

Erythromycin antibiotic eye ointment is recommended by the State of California to be administered to all newborns after birth. This treatment is considered effective in preventing bacterial eye infections or blindness that may occur if the mother is infected with gonorrhea or chlamydia. The ointment may temporarily cloud the baby's vision. While frequent antibiotic use may increase individual resistance to antibiotic effectiveness, there are no known long-term detrimental effects to babies with this treatment.

We are prepared to administer Erythromycin to your baby's eyes shortly after birth, but it is your legal right to refuse this procedure. Please authorize or refuse such treatment below with your initials. By signing below, you agree to take responsibility for your decision and to hold harmless Center for Natural Birth, or her agent(s) for any complications that may result from that decision.

As undersigned below, we are the parent(s) of newborn,
_____, *born on this date* _____, *and*

_____ *I/we authorize* _____ *or its agents to administer Erythromycin antibiotic eye ointment to our baby.*

_____ *I/we refuse Erythromycin antibiotic eye treatment for our baby.*

Mother's Signature

Partner's Signature

Date

Witness's Signature