

Eyes and Thighs: A Guide for Healthcare Professionals



STEP FOUR: HELP MOTHERS INITIATE BREASTFEEDING WITHIN ONE HOUR OF BIRTH.



Newborn care can be performed while mom and baby are skin-to-skin or breastfeeding. This allows necessary medical procedures to occur without interrupting normal maternal-infant bonding and the resulting physiological benefits that lead to optimal health. Close observation, including normal protocols for checking breathing and other vitals, should remain in place when mother and baby are skin-to-skin.

Vitamin K Injections for Newborns

Health organizations recommend administering vitamin K to prevent unexpected and/or excessive bleeding because newborns are born vitamin K deficient. Many healthcare providers have requested clarification about requirements for administration of vitamin K. Currently there are no federal statutes requiring the administration of vitamin K. The American Academy of Pediatrics (AAP) and the American Academy of Family Physicians (AAFP) recommend administration after the first feeding is completed but within six hours of birth. Some states have statutes or policies in place addressing time frames for administration, but they are highly variable.

Newborn Eye Prophylaxis

The US Preventative Services Task Force (USPSTF) maintain a recommendation that all newborns receive topical eye medication to prevent gonococcal ophthalmia neonatorum. According to the Centers for Disease Control and Prevention (CDC), this prophylaxis is required by law in most states. The CDC guidelines suggest instilling Erythromycin (0.5%) ointment into both eyes of all neonates as soon as possible after birth. The eye prophylaxis can be done with mother and baby skin-to-skin. The AAP recommends that routine procedures including eye prophylaxis can be delayed until the first feed is completed. If prophylaxis is delayed (i.e., not administered in the delivery room), a monitoring system should be established to ensure that all infants receive this eye care.

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