# Newborn Tests and Procedures

_____
MRN

## Newborn Exam

Within a couple of hours of birth, usually after the first feeding, a head-to-toe exam is done of your baby. He or she is measured and weighed. The heart and lungs are listened to, and the baby is checked for any abnormalities from the ears and mouth, to the number of toes. Normal newborn reflexes are checked for - their absence could mean a problem with the central nervous system. Anything unusual is referred to a pediatrician. Feel free to ask questions during the exam, and to touch your baby and talk to him/her. The midwife prefers to start when the baby is calm and is as gentle as possible, but some babies object to the necessary handling and will cry.

## Eye Prophylaxis

Erythromycin, an antibiotic ointment, is routinely applied to babies' eyes within an hour of birth. Gonorrhea and chlamydia can infect the eyes and cause blindness if untreated. They can be present with no symptoms in the mother, and lab tests occasionally have false negatives.

You have swabs done during pregnancy to look for gonorrhea and chlamydia, and are treated if either is present. Some parents choose not to expose their newborns to antibiotics. If this is your choice you will need to sign the release below.

I, _____, choose to use / not use Erythromycin eye prophylaxis.

Parent signature_____ date_____

Parent signature_____ date_____

## Vitamin K

Vitamin K is important in blood clotting. It is manufactured in the intestines by bacteria. Babies need to be colonized by the bacteria from their parents and start making their own Vitamin K as soon as possible. A baby with insufficient Vitamin K may develop neonatal hemorrhagic disease - which can range from bruising with normal handling to fatal bleeding. Brain damage can result. Research shows an incidence from 1/500 to 1/1,500. Statistically, breastfed babies have a higher rate of hemorrhagic disease.

It is state law to have your baby receive Vitamin K by a single injection (IM) within 6hours of life. If you choose otherwise you may purchase oral Vit K which baby will receive in three doses. The first is done within a few hours of birth, the second at 4 -10 days and the third at 4 - 6 weeks. Conversely, baby may receive one two drop dose after birth, then one drop dose daily for 6-9 weeks. Research supports the effectiveness of injectable Vitamin K. However, some research also suggests a link to childhood leukemia with its use. Oral Vitamin K appears to work, but doesn't have extensive research to support it. If you choose not to give your child injectable Vitamin K, an informed choice release is needed, affirming your understanding of infant risk of vitamin K deficiency bleeding of the newborn.

I, _____, choose to use / not use Vitamin K IM for my baby.

I, _____, choose to use / not use Vitamin K oral for my baby.

Parent signature_____ date_____

Parent signature_____ date_____

## Neonatal Metabolic Screen

This is a blood test that checks for metabolic problems which could permanently damage your baby, among them: phenylketonuria (PKU), hypothyroidism, galactosemia and MCAD. If these problems are caught early and treated your baby can avoid harm. The test also checks for HIV, Sickle cell and many other disorders (brochure available).

Phenylketonuria is an inability to metabolize a protein. Abnormal amounts build up in the body and can damage the brain. The incidence in B.C. is 1/18,000 live births. Treatment is a special diet low in phenylalinine. Your baby may be able to receive some breast milk, depending on the severity of the disease.

Hypothyroidism is an abnormally low production of thyroid hormones. These are important for normal brain development. The incidence in B.C. is 1/3,000 births. Treatment is a daily dose of thyroid medication.

Galactosemia is an inability to break down the milk sugar galactose. Galactose builds up in the body causing failure to thrive, jaundice, vomiting, diarrhea, liver damage, hypoglycemia, cataracts and mild to moderate brain damage. The incidence in B.C. is 1/25,000 newborns. It is treated by a special diet with no lactose.

Medium Chain Acyl-CoA Dehydrogenase Deficiency (MCAD) causes problems with fat metabolism. It can cause hypoglycemia and sudden unexpected death. It is found in 1/20,000 infants. Treatment is a special diet and supplements.

The test is done by warming the infant's foot (to bring blood close to the surface) and then pricking the heel. Sometimes the baby must be pricked more than once to get enough. Blood is collected in five circles on blotter paper. The paper is dried and sent to a lab in Albany for testing. There is not an alternative test and once symptoms of these diseases are noticeable irreversible damage may have been done.

The best time to do these tests is 3-5 days after the birth. A test done before 24 hours will need to be repeated. You can hold and comfort, or nurse, the baby while the test is being done.