Injecting Vitamin K (Vitamin K-1 or phytonadione) one-half to one milligram intramuscularly into the thigh within one hour after birth is recommended by the American Academy of Pediatrics to prevent Vitamin K Deficiency Bleeding (VKDB) in infants. VKDB was previously known as Hemorrhagic Disease of the Newborn. All newly born babies normally have prolonged blood clotting times, but this abnormal condition of VKDB occurs in only 0.01% to 1.5% of newborns who have not received prophylactic Vitamin K at birth. Life threatening incidence is estimated to be 5 to 50 per 100,000 newborns when no Vitamin K (VK) is administered. A diagnosis of VKDB is nearly confirmed when a bleeding infant has a prolonged prothrombin time (PT) together with a normal fibrinogen level and platelet count. Rapid correction of the PT and/or cessation of bleeding after Vitamin K is administered confirms the diagnosis. The wide statistical range of how often VKDB occurs in newborns is due to different feeding patterns and risk factors. In many national surveys of millions of babies conducted since 1980 almost all the babies who had VKDB were breastfed. By far, the vast majorities of breastfed infants who do not receive Vitamin K at birth have an adequate vitamin K supply and do not develop VKDB. Most formulas have Vitamin K added to them.

can occur early, within 24 hours after birth. All countries recommend giving a Vitamin K injection if the birth has been unusual or traumatic in any way or if certain maternal drugs have been given in pregnancy. Known drugs of concern are anticonvulsants, cephalosporin antibiotics, tuberculostatic agents and Vitamin K antagonists such as phenprocoumon and warfarin. A reported link between intramuscular Vitamin K and childhood cancer prompted a number of studies, which have yielded inconsistent results. Most studies have been reassuring, but the possibility of a small risk remains. Many countries have found that giving oral Vitamin K, one milligram, soon after birth and weekly, or giving one milligram after birth and 25 micrograms (not milligrams) every day may be equally effective as the intramuscular dose in preventing VKDB. Some countries recommend a two-milligram initial oral dose. However, prophylactic oral Vitamin K is not recommended for newborns in this country at this time.

Breastfeeding mothers who External visible bleeding as evidence by skin bruising or blood seepage from any body opening, may be the first warning sign of VKDB. This can quickly lead to serious internal bleeding. In 30 to 60% of the time unseen, internal bleeding from fragile capillaries in the brain may lead to severe developmental delays or even death. If such bruising or bleeding occurs, a health care professional needs to be contacted immediately. Medical intervention with Vitamin K is needed swiftly before seizures occur. Internal bleeding may also occur without any visible outward signs of bleeding.

When an infant is circumcised he must be carefully observed for any signs of hemorrhage. Baby girls may have an occasional spot of vaginal bleeding due to a transfer of maternal hormones while in the womb. A few drops of blood from an infant's umbilicus just after the cord has detached is also normal, as long as it doesn't continue to bleed.

VKDB are taking medications need to check with their midwives to discern the importance of giving Vitamin K to their newborns or supplementing with Vitamin K during their pregnancies. If Vitamin K prophylaxis is desired, this can be arranged with your pediatrician or medical back-up physician during your pregnancy or in the first 24 hours after your child's birth. If you would like additional information, please ask the midwives.

Client’s Informed Consent

I have read the above and the midwives have answered all my questions regarding Vitamin K prophylaxis for my newborn.

☐ I would like prophylactic Vitamin K administered to my newborn. I understand I will need to get a prescription for the Vitamin K (neonatal concentration) from the baby’s pediatrician and have it filled prior to the birth.

☐ I do not want prophylactic Vitamin K administered to my newborn.

Signature of client: ________________________________ Date: ________________