



Name: _____

DOB: _____

Infant Vitamin K Injection Consent

Giving a breastfed infant a **Vitamin K shot virtually eliminates the chance of life-threatening**

Vitamin K deficiency related bleeding. The only known adverse effects of the shot are pain, bleeding, and bruising at the site of the injection. Out of many millions of infections a person has, there has been only one report of an allergic reaction in recent history.

Recently, there has been misinformation on the I

and social media platforms about Vitamin K and infants. It is important that parents examine the facts, so their consent or refusal is well informed.

We invite you to read the article below from Evidence Based Birth regarding Vitamin K injections for newborns.

<https://evidencebasedbirth.com/evidence-for-the-vitamin-k-shot-in-newborns/>

Holy Family Birth Center recommends all infants receive the Vitamin K injection.

_____ I understand that Holy Family Birth Center will provide a preservative-free Vitamin K injection for a fee of \$75

I have read and understand this information and have had an opportunity to ask questions. I am aware of the risks of administering and not administering vitamin K, and choose to take the following action:

_____ I have chosen to have vitamin K administered.

_____ I decline vitamin K administration.



Holy Family
BIRTH CENTER

Birth as it was intended

Patients Signature

Date

CNM Signature

Date