Group Beta-strep Informed Consent and Plan of Care

**Group B Streptococcus (GBS):** Is a naturally occurring bacterium in the bodies of 10-35% of all healthy adults. GBS can cause illness in newborn babies, pregnant women, the elderly and adults with other illnesses. GBS is the most common cause of life-threatening infections in newborns.

**National Standard of Care-per Center for Disease Control 1996 (CDC):**

CDC recommends the use of one of the two following GBS prevention strategies:

1. Screen all pregnant women between the 35th and 37th week of pregnancy by collecting a swab from the rectum and vagina. Women with GBS found in prenatal cultures are offered antibiotics during labor.
2. Treat women with antibiotics during labor based on obstetric risk factors, without collection of prenatal screening cultures. Women with the following conditions are given antibiotics during labor:
   - Fever during labor
   - Rupture of membranes 18 hours or greater prior to delivery
   - Labor or rupture of membranes prior to 37 weeks gestation.

In both strategies, women with the following conditions should receive antibiotics during labor:
   - Previous baby with GBS disease
   - Urinary tract infection due to GBS

**Revised Guidelines from CDC (August 16, 2002)** indicate that the risk-based approach is no longer an acceptable alternative except for circumstances in which screening results are not available before delivery. CDC currently recommends that all pregnant women should be screened at 35 – 37 weeks’ gestation for vaginal and rectal GBS colonization.

*CDC Group B Streptococcal Disease website: http://www.cdc.gov/ncidod/dbmd/gbs/

**Local Standard of Care:**

If you have had one positive growth culture in pregnancy, standard of care dictates that you are treated as positive and are to be given IV antibiotics during labor.

I / We have read and understand the Group Beta-Strep Infections Brochure (Center for Disease Control) and have exercised our right to decline testing and/or treatment during pregnancy and labor.

Initial_____________     Initial_____________
I / We have read and understand the risks and benefits of antibiotic treatment vs. non-treatment for a positive Group Beta-Strep culture. Our plan of action / care is as follows:

Prenatally: __________________________________________________________
___________________________________________________________
___________________________________________________________
___________________________________________________________

Labor without early rupture of membranes:
___________________________________________________________
___________________________________________________________
___________________________________________________________
___________________________________________________________

Labor with early rupture of membranes:
___________________________________________________________
___________________________________________________________
___________________________________________________________
___________________________________________________________

Newborn with signs and symptoms of GBS:
___________________________________________________________
___________________________________________________________
___________________________________________________________
___________________________________________________________

Signed______________________________________
(Mother of Baby)                                        (Date)

Signed______________________________________
(Father of Baby)                                        (Date)