

Neonatal Medication Guideline

Clinical Guideline

Cyclopentolate

Policy developed by: SA Maternal, Neonatal & Gynaecology Community of Practice

Approved SA Health Safety & Quality Strategic Governance Committee on: 6 October 2017

Next review due: 6 October 2020

Summary The purpose of this guideline is to guide nursing, medical and pharmacy staff in the dosing and administration of cyclopentolate eye drops for mydriasis or cycloplegia

Keywords cyclopentolate, neonatal medication guideline, eye, eye drop, eye exam, mydriasis, cycloplegia, NEC, necrotising enterocolitis,

Policy history Is this a new policy? **Y**
Does this policy amend or update an existing policy? **N**
Does this policy replace an existing policy? **N**
If so, which policies?

Applies to All SA Health Portfolio
All Department for Health and Ageing Divisions
All Health Networks
CALHN, SALHN, NALHN, CHSALHN, WCHN, SAAS

Staff impact All Clinical, Medical, Midwifery, Nursing, Students, Allied Health, Emergency, Mental Health, Pathology, Pharmacy

PDS reference CG270

Version control and change history

Version	Date from	Date to	Amendment
1.0	6 October 2017	Current	Original version

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cyclopentolate

0.5% eye drops

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Note

This guideline provides advice of a general nature. This statewide guideline has been prepared to promote and facilitate standardisation and consistency of practice, using a multidisciplinary approach. The guideline is based on a review of published evidence and expert opinion.

Information in this statewide guideline is current at the time of publication.

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Health practitioners in the South Australian public health sector are expected to review specific details of each patient and professionally assess the applicability of the relevant guideline to that clinical situation.

If for good clinical reasons, a decision is made to depart from the guideline, the responsible clinician must document in the patient's medical record, the decision made, by whom, and detailed reasons for the departure from the guideline.

This statewide guideline does not address all the elements of clinical practice and assumes that the individual clinicians are responsible for discussing care with consumers in an environment that is culturally appropriate and which enables respectful confidential discussion. This includes:

- The use of interpreter services where necessary,
- Advising consumers of their choice and ensuring informed consent is obtained,
- Providing care within scope of practice, meeting all legislative requirements and maintaining standards of professional conduct, and
- Documenting all care in accordance with mandatory and local requirements

Dose and Indications

Mydriasis & cycloplegia

Topical

1 drop into the appropriate eye 30 minutes prior to eye examination.

Preparation and Administration

Topical

Neonates are particularly prone to systemic absorption; this can be reduced by applying finger pressure to the lacrimal sac for up to 2 minutes following application.

Avoid touching the conjunctiva with the tip of the dispenser and discard unused solution.

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Adverse Effects

Common

Stinging on instillation, transient intraocular pressure elevation (especially in pre-existing ocular hypertension).

Infrequent

Transient ileus/delayed gastric emptying apnoea due to systemic absorption.
Persistent ocular irritation

Rare

Necrotising enterocolitis (NEC) has been described rarely in case reports.

Monitoring

- > Preterm babies undergoing an examination for retinopathy should be monitored for at least 24 hours if less than 36 week post-conception or if they have reacted with apnoea to the previous examination. Babies >36 weeks post-conception do not require routine monitoring.

Practice Points

- > Maximal mydriasis occurs after 30-60 minutes; duration of action is 24 hours. Maximal cycloplegia occurs after 25-75 minutes; duration of action is 6-24 hours.
- > Mydriasis can precipitate acute angle-closure glaucoma (usually in those who are predisposed to the condition because of a shallow anterior chamber).
- > Assess for signs of ileus prior to feeding after eye examination.
- > A second application of drops may be required after 15 minutes if pupils have not started dilating, especially in babies with darker irides.
- > Usually used in combination with phenylephrine.
- > If multiple eye drops or doses are required, separate doses by 2-5 minutes to allow for absorption.

Version control and change history

PDS reference: OCE use only

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