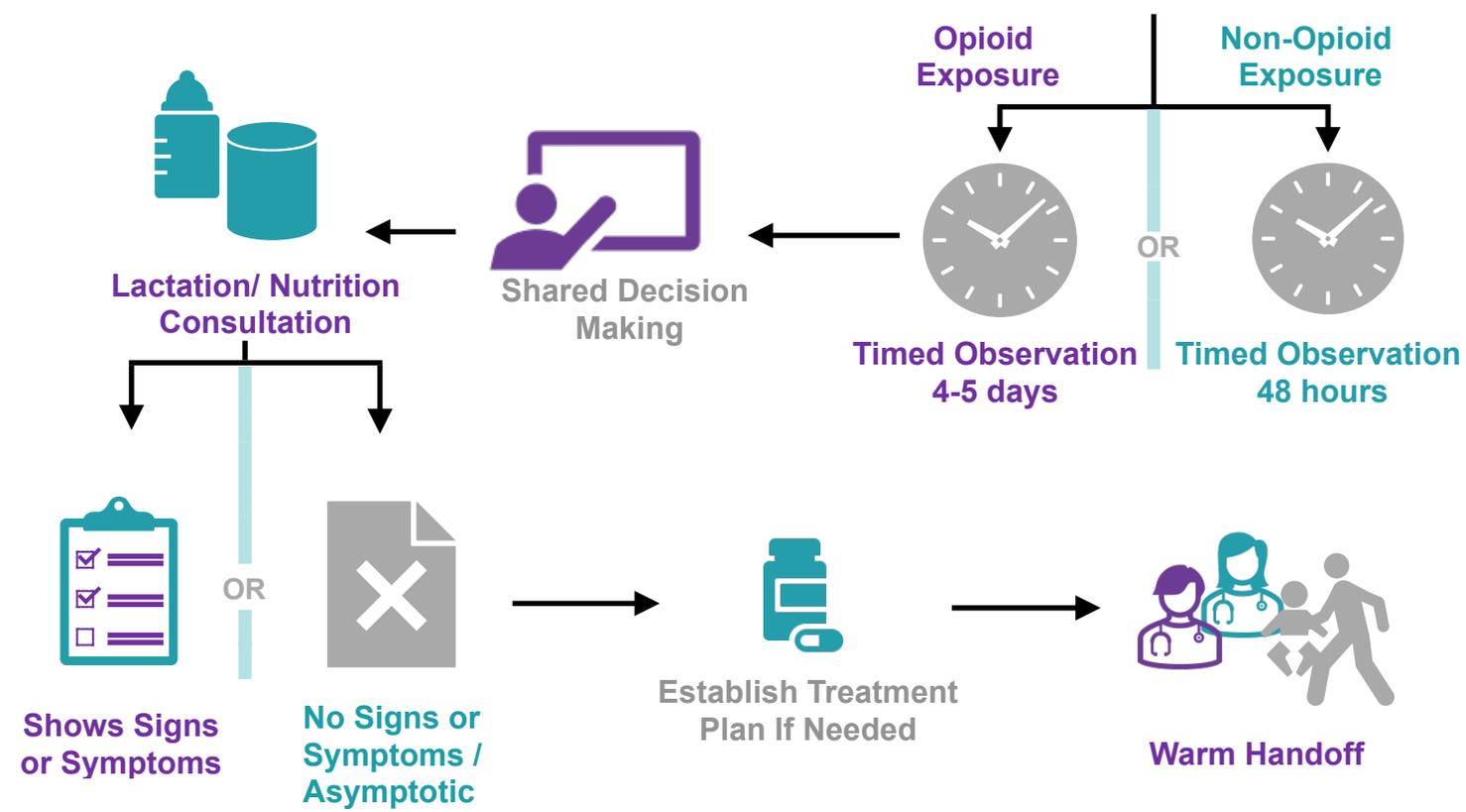
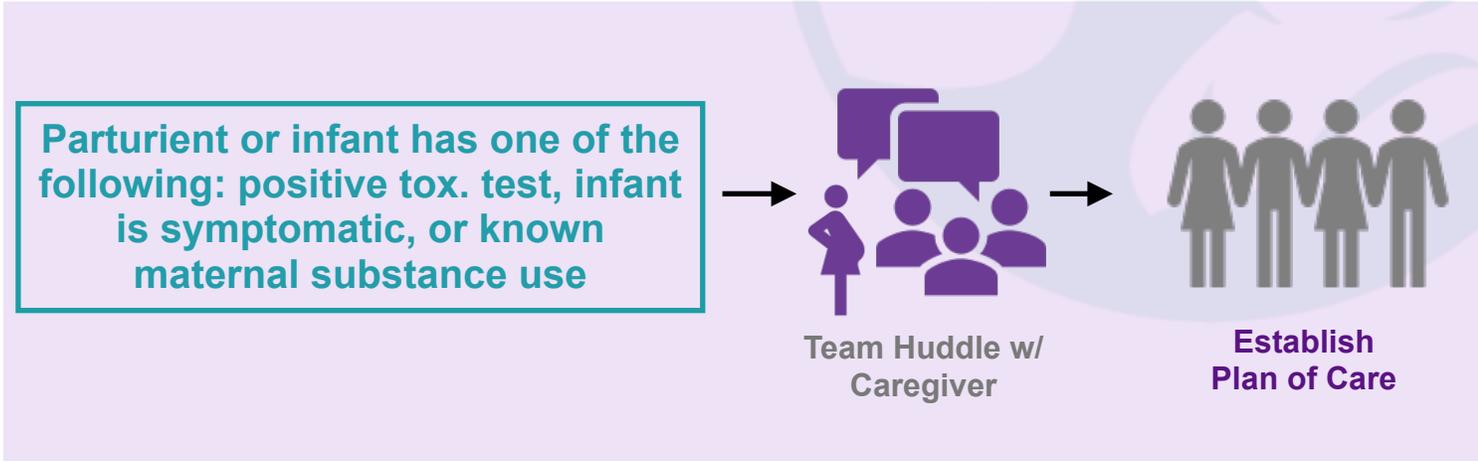


KyPQC's Neonatal Substance Exposure Diagram

Process Flow for Substance Exposed Newborns



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Glossary: POC - plan of care; CPS - Child Protective Services; NAS - Neonatal Abstinence Syndrome; MOUD - medications for opioid use disorder; PICU - pediatric intensive care unit; NICU- neonatal intensive care unit

Care Checklist	Clinical Team Initials/ Notes/Date
Parturient or infant has one of the following: positive tox. test, infant is symptomatic, or known maternal substance use. Immediately record the specific exposure diagnosis in maternal and infant(s) medical record and proceed to Team Huddle w/ Caregiver <i>*Please See ICD-10 Codes PDF</i>	
Team Huddle w/ Caregiver includes: Infant provider, maternal provider, social worker, caregiver of infant (or support team), charge & bedside RNs, PICU/NICU teams. During team huddle Establish POC that includes: <ul style="list-style-type: none"> • Counseling with hospital social worker and referral to community resources • Contact CPS (*may already have a case manager) • Explain Shared Decision Making moving forward with caregiver and medical team concerning infant 	
If infant has non-opioid substance exposure timed observation is required. AAP Guidelines recommend 48 hours for observation	
If infant has opioid substance exposure timed observation is required. AAP Guidelines recommend 4 to 5 days for observation	
Schedule Lactation/ Nutrition Consultation <ul style="list-style-type: none"> • Encourage breastfeeding if possible (situational) • Eat. Sleep. Console. 	
If infant is showing signs or symptoms, follow facilities protocol to determine if infant needs pharmacological treatment . Establish Treatment Plan <ul style="list-style-type: none"> • Pharmacological treatment for opioid exposure (if required) • Follow recommended guidelines 	
Provide additional patient education during Warm Handoff <ul style="list-style-type: none"> • Risk of continued substance use to mother and infant • Encourage family/designated person's involvement with caregiving during hospital stay • Importance of mom and family self-care • Caring for a baby with NAS • Mom's readiness for MOUD • Counseling on Naloxone 	
Prior to Discharge	Clinical Team Initials/ Notes/Date
CPS clears infant caregiver & plan of care is established	
Finish with Warm Handoff <ul style="list-style-type: none"> • Schedule initial well-child appointment with identified healthcare provider • Follow-up with infant as indicated (especially if pharmacological treatment is required) 	
Ensure medical record contains all information for NAS registry, such as any/all ICD-10 codes, treatment plan, type of exposure, etc.	

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