

INFANTS EXPOSED TO DRUGS DURING PREGNANCY

And

NEONATAL ABSTINENCE SYNDROME (NAS)

A guide for Families





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Congratulations on the birth of your new baby!

This is a happy time for you, but all parents face many challenges during their baby's first year. Infants that are exposed to drugs during pregnancy need extra loving care as they may go through withdrawals that can develop after birth. This can occur when exposed infants are suddenly cut off from the medications or drugs that were used by the mother during pregnancy.

It is hard to know which infants will have withdrawal symptoms, also known as Neonatal Abstinence Syndrome (NAS). Some infants will have NAS even though their mothers only took small doses of medicines for a brief time during pregnancy. Others may show signs of withdrawal sooner if their mother took larger amounts of drugs for a long time during pregnancy. No matter what the reason, infants who have been exposed to drugs during pregnancy will need to be observed for at least 96 hours following birth. This is a very critical time when withdrawal symptoms may begin to show.



This guide will help you to learn more about NAS and how to help your infant through the process.

WHAT IS NEONATAL ABSTINENCE SYNDROME?

Neonatal Abstinence Syndrome (NAS) refers to symptoms that babies may have

if their mothers used certain during pregnancy. These symptoms are called withdrawal symptoms.

If your baby develops symptoms of withdrawal, you and your family can help by comforting your baby. Comfort measures can reduce the symptoms of withdrawal. This booklet will provide you with guidelines and recommendations that will help you to support your infant during this time.



When will my baby show signs of NAS?

Most infants will show signs of withdrawal, or NAS, between 24-96 hours after birth. This can also depend on whether or not the baby's mother used other kinds of substances as well, such as alcohol, tobacco or additional medicines. Any infant who is exposed to drugs during pregnancy will remain in the hospital for at least 96 hours for observation.

It is very important to tell your infant's doctor or nurse about all medications or drugs used during your pregnancy both prescribed by a doctor or any other drugs. This information will guide the healthcare team in providing the best treatment for you infant.

What will happen if my baby is in withdrawal?

Beginning soon after your infant's birth, within 24 hours, the nurse will evaluate your infant based on the Eat, Sleep, Console Approach (ESC) depending on which NAS signs and symptoms are present. It is important to provide loving care to your infant in a calm and gentle manner. The staff caring for your infant can also show you ways to help comfort your infant. YOU are the TREATMENT for your baby. Your baby needs to be close to you to feel the most secure during the withdrawal process and beyond.

What is the EAT, SLEEP, CONSOLE (ESC) APPROACH?

The eat, sleep console approach evaluates if an infant is able to:

- **Eat** to a goal that has been set by the doctor for age OR at least 1 ounce per feed or breastfeed well
- Sleep for at least 1 hour undisturbed
- Console (be comforted) within 10 minutes

When the ESC approach is used to guide treatment, mother and babies are kept together whenever possible so that the mother is able to respond to her baby's needs.



Will my baby be given medication for NAS?

The first line of treatment is YOU, the parent/family. If you and the nursing staff have optimized all comfort measures and interventions and your infant is still unable to be feed well, sleep longer then an hour at a time, and/or be consoled, then it is at this time that your infant will may be given a small dose of Morphine. This medication will only be given on an as needed basis. This medication is given by mouth. When medication is given it will be important to monitor your infant's heart rate, respiratory rate and oxygen level continuously. Your baby will be completely off of medication prior to being discharged.

What Medication will my baby be put on if needed?

Medications like Methadone or Morphine may help your infant be more calm and comfortable if all other non-medication interventions are not helping.

What are the signs of NAS?

- High-pitched cries or crankiness
- Stiff arms, legs, and back
- **❖** Trouble sleeping
- Shaking, jitters
- ❖ Not eating well or problems with sucking
- Vomiting
- **❖** Fast Breathing
- Stuffy nose, Sneezing or Yawning
- Irritation on the diaper area due to loose, watery stools
- ❖ Irritation on the face, back of head, elbows, chin, knees due to restlessness and rubbing on the blanket
- ❖ Poor weight gain after a few days of life
- ❖ Possible seizure activity
- Elevated Temperatures
- Sweating







WAYS TO CARE FOR AND SUPPORT YOUR BABY

BEHAVIOR	CALMING SUGGESTIONS				
Prolonged Crying (May or may not be high pitched)	 Hold baby close to your body Decrease loud noises, bright lights Humm, sing or talk softly Gentlly sway or rock from side to side 				
Difficulty Sleeping	 Reduce noise, bright lights, lower TV volume Soft, gentle music Gently rock or sway Keep diaper dry- check for diaper rash or skin iritation Use diaper rash creams as prescribed Feed on demand 				
Difficult or Poor Feeding	 Feed small amounts often Feed in quiet and calm surroundings with minimal noise and disturbance Allow time for resting between sucking 				
Loose/Watery Stools	 Use ointment or cream to prevent diaper rash 				
Sneezing, Stuffy Nose	 Keep baby's nose and mouth clean Avoid overdressing or wrapping baby too tightly Feed baby slowly, allowing for rest periods between feeds Keep baby in a semi-sitting position while feeding. Do Not PROP the bottle Do Not place baby to sleep on tummy 				

BEHAVIOR	CALMING SUGGESTIONS				
Vomiting	 Burp the baby each time he/she stops sucking and after the feed Support the baby's cheeks and lower jaw to help with sucking/swallowing (ask for help with this) Keep baby clean and clothing and blankets free of vomit 				
Trembling/Jitteriness	 Keep baby in a warm, quiet room Swaddle infant Provide skin-skin contact Keep room darkened or shield infant's eyes from the light 				
Reddened areas on the knees, elbows,chin,and tip of the nose	Use clear transparent dressings over the reddened areas				

There may be times when you have tried everything and nothing seems to work to calm your baby. Remember, the safety of your baby is most important, it is ok to step away and ask for help.



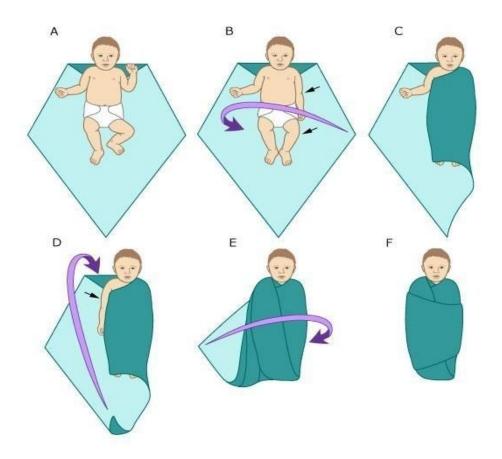
HOW TO SWADDLE YOUR INFANT

If your baby is showing signs of withdrawal, the best medicine is your closeness. During withdrawal symptoms it is important to keep your infant close to you to help them feel secure and loved.

Swaddling your baby is an important technique you can learn to help your infant feel more secure. Remember to use the following techniques that will also help with withdrawal symptoms:

- Stay close to your baby
- ❖ Hold and swaddle your baby
- ❖ Skin to Skin contact
- ❖ Feed your baby whenever he or she is hungry
- * Keep the environment quiet and calm (few visitors, minimal noise, dim lights)

Use the pictures below to help you learn to swaddle your baby.



CUDDLER PROGRAM

Welcome to the St. Luke Community Healthcare Cuddler Program. This Program has been available to families of infants hospitalized on the Pediatric and Women Services units for over 8 years. **The cuddlers' sole responsibility is to hold and possibly feed your infant while you are away.** All of our cuddlers have to go through an extensive acceptance process. This process includes an application, background check and medical testing necessary to work/volunteer in a hospital.

We as staff truly value the time and energy they dedicate to this volunteer program. We highly encourage the use of our cuddlers during times that you may need to leave your infant to attend appointments. It is very important that your infant have someone with them during these times when you need to leave. Though it is preferable to have family, we understand that this may not always be possible. Therefore, we will suggest the use of a cuddler. Each volunteer cuddler has a different time of availability, so it is very important to communicate with the nursing staff when you may anticipate the need for a cuddler.

We have a consent form for you to sign if this program is something that you may want to utilize sometime during your infant's stay.

Thank you for entrusting the care of your infant with us. Please do not hesitate to ask any further questions that you may have regarding this program.

CUDDLER PROGRAM PERMISSION SLIP

I,	give permission to
have an approved volunteer from the Cuddle	
newborn during the time I am away from the	OB Unit at St. Luke
Community Healthcare. I understand that ea	ch volunteer has been
screened through the Risk Management Offic	e and has had a criminal
background check as required to be a volunte	er with this program.
Name of Infant (Print):	
value of mant (1 mit).	
Name of Parent/Guardian (Print):	
Signature of Parent/Guardian:	

PARENT/CAREGIVER EXPECTATIONS

During your baby's stay to observe for withdrawal symptoms and possible treatment, it is extremely important for you to actively participate in the care of your infant. Here is a list of expectations that will help us work together to care for your newborn during his/her hospitalization. Our goal is to work together for the best outcome for your family.

- It is requested that the parent/caregiver be present at all times. In those times when you need to leave, please communicate with the nursing staff and try to schedule another family member or cuddler to be available.
- It is recommended that you provide your infant with a comforting and quiet environment. A loud environment can over stimulate your baby, worsening symptoms and prolonging the hospitalization.
- It is recommended that you limit visitors to 2 at a time.

Thank you for assisting us in caring for your newborn. We hope you will join us in creating an environment of compassion and mutual respect.

FEEDING/ SLEEPING/DIAPERS RECORD

		FEEDING		DIAPER		SLEEP		NOTES
DATE	TIME	BREASTFEED HOW MANY MINUTES OR BREASTMILK ML	FORMULA ML	POOP ✓	WET 🗸	TIME BABY FELL ASLEEP	TIME BABY WOKE UP	