

2. Hospital & QI Team Overview

QI Team: Natosha McEvers, Kelly Harre & Mona LeGrand

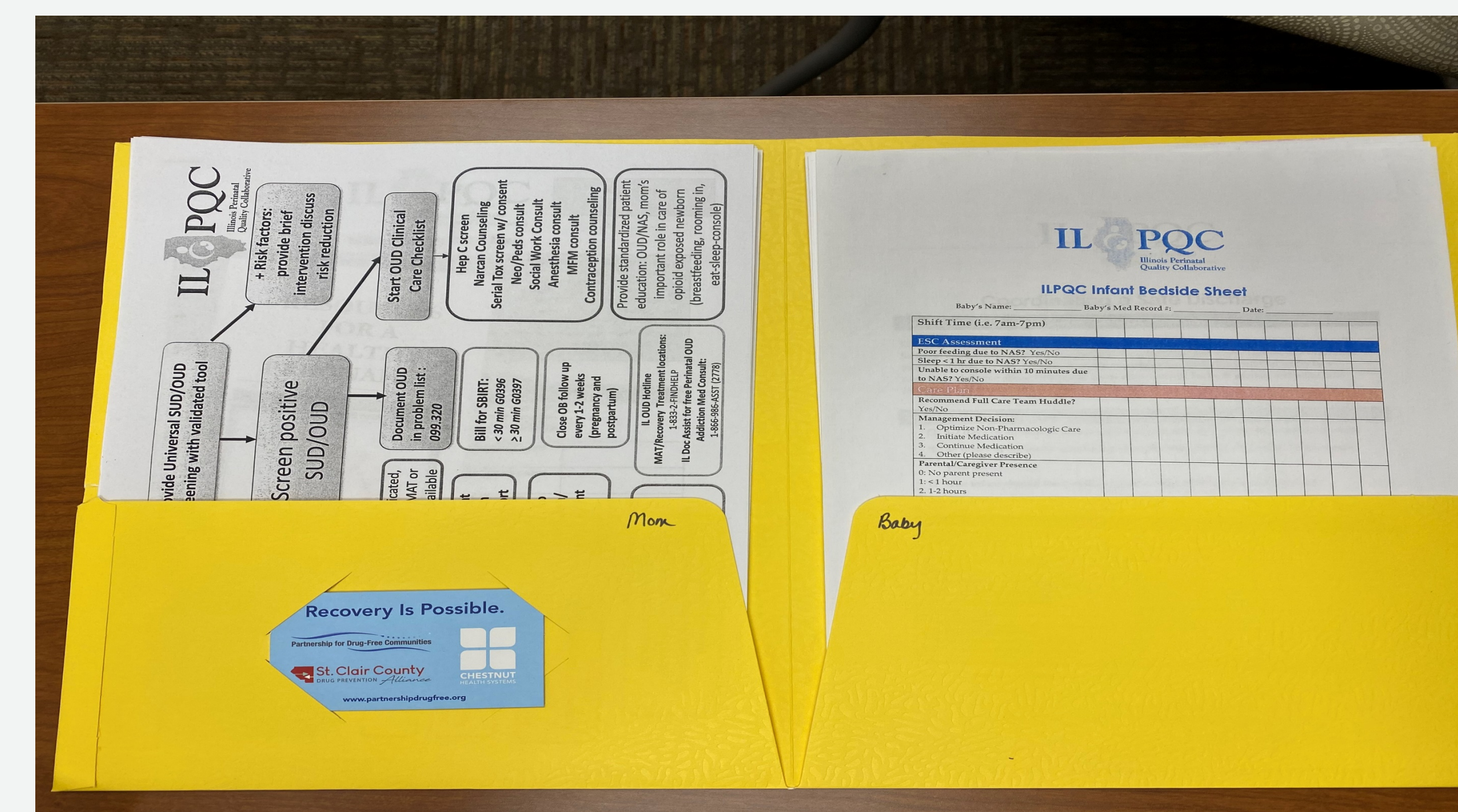


4. MNO-Neo Progress

NAS Assessment Tools

- Indications for scoring with Finnegan Neonatal Abstinence Scoring Tool (FNAST):
- Known or suspected exposure to opioids
 - Maternal and/or newborn drug test positive for opioids
 - Newborn's clinical presentation is suggestive of drug exposure which includes the following symptoms present without alternate explanation:
 - Neurological:** irritability, increased wakefulness, hypertonia, tremors, myoclonic jerks, seizures
 - Gastrointestinal:** vomiting, diarrhea/watery stools, poor feeding or uncoordinated suck
 - Autonomic:** diaphoresis, nasal stuffiness, fever, temperature instability, mild elevation in respiratory rate and blood pressure

MNO-Neo Folders



3. MNO-Neo Data

Supportive Care Measures:

- Environment**
- Decrease stimuli: quiet, dimly lit room
 - Cool temperature in room
 - Cluster care
 - Rooming in with mother if feasible and safe for newborn
 - Encourage active parental participation

Comfort Measures:

- Swaddling (avoid overheating)
- Holding, gentle rocking, patting infant's bottom
- Maximization of skin-to-skin with caregivers
- Observed use of swig with baby in recline position or means of vibration (bouncy seat, tool, or with hands)
- Use of pacifiers after 1st 24 hours of life
- Infant massage: slow downward strokes to extremities and across forehead
- Observed tummy time: allows hip/knee extension and weight-bearing on extremities
- Allow infant to push his/her feet against your hands
- Slow movements during position changes, diapers changes and transitioning to/from crib

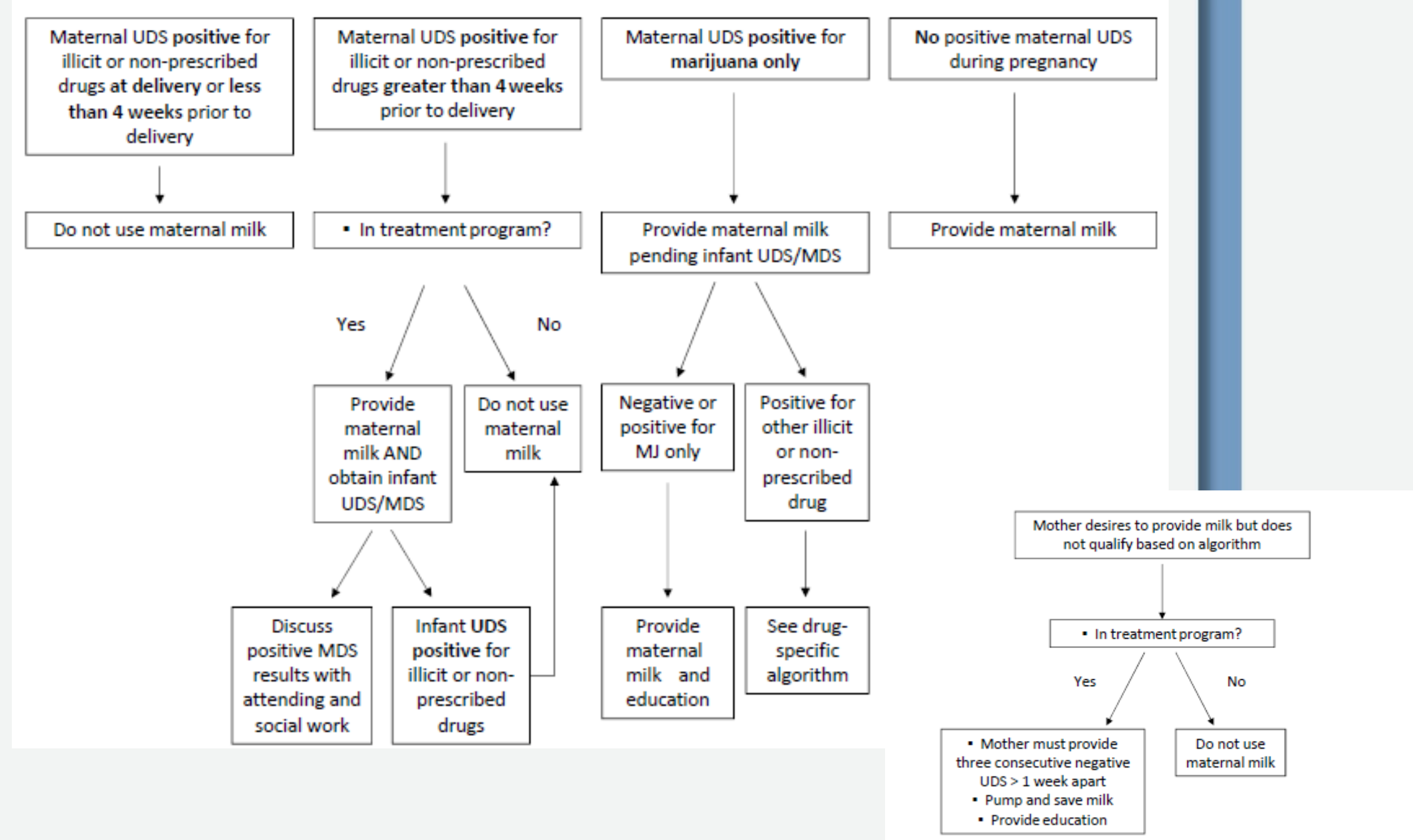
Feedings:

- Frequent small volume feedings (on demand); encourage frequent breastfeeding when appropriate
- Provide input to palate with pacifier if difficulty latching
- Provide tastes of breast milk or formula by pacifier or gloved finger
- Consider hypercaloric (22-24 kcal/oz) feeding when indicated

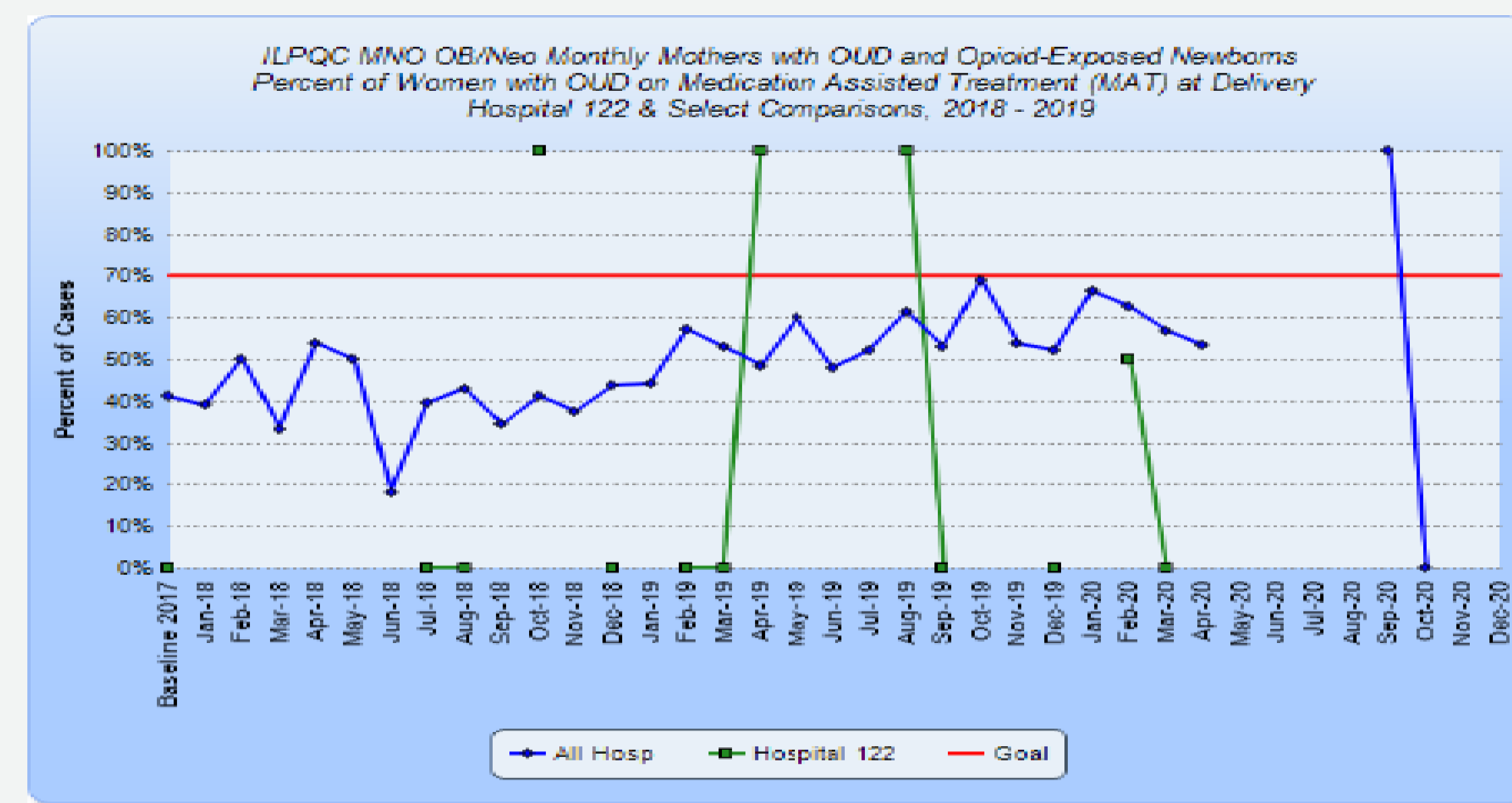
Consults:

- Consider occupational, physical, and speech therapy early in course
- Lactation for breastfeeding support and education

Use of Maternal Breast Milk in the Setting of Maternal Drug Use



Review of all NAS cases



5. Coordinated Discharge

Discharge requirements:

- Adequate feeding
- Consistently stable and decreasing Finnegan score (< 8)
- Follow-up appointment with PMD scheduled prior to discharge and to take place within 48 hours of discharge
- Ensure any home resources are set up prior to discharge
- Parent education completed

6. BASIC

Family Care Birthing Center Team

Director: Donna Stephens

Nurse Manager: Natosha McEvers

ANM: Kelly Harre & Alexis Deutsch

Educator: Angela Mann

QI: Natosha McEvers & Mona LeGrand

Donna Stephens, director of FCBC, did her doctoral project on opioid use disorder in pregnancy. She developed resources for the mothers, educated the nursing staff on these resources and how to care for the mothers and newborns affected by opioid use disorder. BJC's Center for Clinical Excellence workgroup developed algorithms and education for care and identification of newborns with NAS.

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Use this space for overflow and additional information your team would like to share.