



Coordinating a Safe Discharge

SUGGESTED GUIDELINES FOR DISCHARGE PLANNING

Discharge planning should ideally begin during the antenatal period. Safe discharge will focus on child vulnerability, adult protective capabilities, and safety factors. If withdrawal signs or symptoms are minimal, then a comprehensive discharge plan that addresses maternal substance abuse treatment, a safe environment for both mother and baby, and parenting and community supports is essential.

DISCHARGE CRITERIA

- ❑ 4-7 days of inpatient monitoring for infants who do not require pharmacotherapy
- ❑ 48 hours of inpatient monitoring after pharmacotherapy for infants who require pharmacotherapy
- ❑ The infant should feed well and gain weight over two consecutive days
- ❑ Consultation with social work completed
- ❑ Coordination and clearance with Illinois Department of Children and Family Services (DCFS) completed
- ❑ Communication and coordination with primary care provider completed:
 - Discussion of medical and social information, including infant custody
 - Description of hospital course
 - Plan for outpatient medication wean, if applicable
 - Heightened need for vision screening for refractive errors/strabismus
 - Appointment scheduled for 24-48 hours after discharge
- ❑ Medication dispensing schedule and demonstration of ability to dose the infant, if applicable

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- Developmental follow-up appointment scheduled
 - Referral to Early Intervention completed
 - Women, Infants, and Children (WIC) appointment scheduled, if applicable
 - Home nurse visit scheduled including weight check scheduled for 1-3 days following discharge, if applicable
 - Additional follow up appointments scheduled, including physical or occupational therapy
 - Hepatitis B/Hepatitis C/HIV exposed infants – Pediatric infectious disease appointment scheduled or if preference is to follow infant in primary care, please refer to 2018 American Academy of Pediatrics Red Book for current recommendations.
 - Education provided regarding:
 - Importance and benefits of breastfeeding, unless contraindicated
 - Early Intervention
 - APORS
 - Increased risk of visual problems including strabismus
 - Developmental follow-up
 - Safe sleep practice
 - Non-accidental trauma
 - CPR
 - Neonatal Abstinence Syndrome: What you need to know- A Guide for Families (booklet)
 - What to expect at home
 - How to soothe the baby
 - What to do if caregivers are stressed or need a break
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