Babies at risk for Neonatal Abstinence Syndrome will be continuously monitored using the Eat Sleep Console (ESC) method. The following will continuously be assessed:

1. Can the baby eat at least one ounce or breastfeed well?
2. Can the baby sleep for one hour undisturbed?
3. Can the baby be consoled within 10 minutes?

- **Yes**
  - Continue monitoring with the ESC method and utilizing non-pharmacological interventions

- **No**
  - A meeting with provider, nurse, and family should be arranged
    - Work together to maximize non-pharmacologic measures:
      1. Swaddling
      2. Holding (parent or cuddler as available)
      3. Rocking
      4. Pacifier
      5. Feed on demand (breast or consider formula if mom's milk hasn't come in)
      6. Dim lights
      7. Minimize noise
      8. Adjust temperature in room
      9. Other as deemed necessary
    - Reassess using ESC method
      - **Yes**
        - A meeting with team again and consider pharmacologic intervention (PRN morphine)
      - **No**
        - Following treatment with pharmacological intervention

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**Feeding/ special considerations**

- Consider offering formula or BM per bottle
- At a higher risk for increased calorie consumption—offer 24 kcal formula/breast milk per MD orders
- Lethargic or just not feeding well—may consider nasogastric feeds (NICU)
- At a higher risk of dehydration from loose stool/vomiting and poor intake—may need IV fluids (NICU)