Written Case Example

- 40 week healthy baby boy born by c-section after a difficult labor and failure to progress.
- Mom is 31 years old, on Prozac for depression. In buprenorphine treatment for 3 years, doing well in recovery. No other medication or substance exposures.
- Her 2 year old was transferred to the NICU on DOL 1 and started on morphine due to concerns for NAS. Mom smoked at that time, but did not smoke this pregnancy.

DOL 1

- Baby with problems staying latched due to spitting up. Does not seem interested in feeding much. Mom doing skin-to-skin.
- Has increased tone and difficulty staying asleep for more than one hour due to tremors when disturbed.
- Last 3 assessments: Taking 10-15 minutes to calm with swaddling and holding. Being passed around between both grandparents (very excited about baby's birth). They talk a little loudly due to hearing problems. Family member holding baby swaddled all of the time.

DOL 2

- Mom keeping baby with her in room all the time, doing as much as she can to keep room calm and quiet.
- Last feed was just 15 minutes ago; baby now breastfeeding well for 15-20 minutes both sides. No longer spitting up.
- Since baby's last assessment, he slept for about 2.5 hours after feeding. When he awoke, he was very fussy but able to calm down after a few minutes of skin-to-skin and feeding.

DOL 3-4

- Baby taking 20 minutes to settle with maximal support and has problems staying latched due to excessive suck, tremors, and increased tone. Mom doing lots of skin-to-skin and trying to feed baby every 2-2.5 hours to avoid him getting too hungry.
- Continuously rooming-in; calm room, no visitors, holding lots.
- Baby gets fussy as soon as he is put down in bassinet, unable to stay asleep, and now can't even settle despite being held.

TIME	D 1	D 2	D 3			
EATING						
Poor eating due to NAS? Yes / No						
SLEEPING						
Sleep < 1 hr due to NAS? Yes / No						
CONSOLING						
Unable to console within 10 min due to NAS? Yes / No						
Soothing support used to console infant:						
Soothes with little support: 1						
Soothes with some support: 2						
Soothes with much support or does not soothe in 10 min: 3						
PARENTAL / CAREGIVER PRESENCE						
Parental / caregiver presence since last assessment:						
No parent present: 0						
1 - 59 minutes: 1						
1 hr – 1 hr 59 min: 2						
2 hr – 2 hr 59 min: 3						
3 hr+: 4						
MANAGEMENT DECISION						
Recommend a Team Huddle? Yes / No						
Management decision:						
Optimize non-pharm care: 1						
Initiate medication treatment: 2						
Other (please describe):						
NON-PHARM INTERVENTIONS						
Rooming-in: Increased / Reinforced						
Parental presence: Increased / Reinforced						
Skin-to-skin contact: Increased / Reinforced						
Holding by caregiver/cuddler: Increased / Reinforced						
Swaddling: Increased / Reinforced						
Optimal feeding: Increased / Reinforced						
Quiet environment: Increased / Reinforced						
Limit visitors: Increased / Reinforced						
Optional Comments:						