



**Queensland
Government**

**Neonatal Abstinence Syndrome
Pathway Ongoing Care
(Additional Page)**

Facility:

(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

Date of birth:

Sex: M F I

» Clinical pathways **never** replace clinical judgement.
 » Care outlined in this clinical pathway **must** be altered if it is **not** clinically appropriate for the individual client.

Every person documenting in this clinical pathway **must** supply a sample of their initials in the signature log on the *Neonatal Abstinence Syndrome Clinical Pathway (SW246)*. This additional page **must** be kept with the original *Neonatal Abstinence Syndrome Clinical Pathway*.

Instructions: Initials - care attended to, Rule out - not applicable, V - variance (record and sign all variances on sheet provided or progress notes)

⌂ Key ■ Medical ▲ Midwife / Nursing ☉ Pharmacy ◆ Allied Health ♦ AODS

Day	⌂	Date: / / to Date: / /	Initial	Time	V
Consult / referral	■	Proceeding according to clinical pathway			
	▲	<input type="checkbox"/> Paediatric review daily <input type="checkbox"/> Lactation consultant <input type="checkbox"/> AODS			
Investigations	■	As per Paediatrician's / Medical Officer's instructions (if applicable)			
	▲	Review maternal HCV status			
Enter shift that will occur predominately within the next 8 hours				Time	V
Observations	▲	Observation of vital signs (temp, HR and RR) observed with feeds and within normal parameters Assess for signs of withdrawal ½ to 1 hour after each feed (Finnegan score) Contact Paediatrician if Finnegan score is 8 or above Baby identification is checked and correct Refer to statewide clinical guidelines for management (especially for SSRI)			
Medications <i>(refer to statewide NAS guideline)</i>	☉	Refer to medication chart for medication administration (parents informed prior to commencement of medication) Medication: <input type="checkbox"/> Increased <input type="checkbox"/> Decreased <input type="checkbox"/> Changed <input type="checkbox"/> Continue unchanged			
Feeding	▲	Feeding 2-5 hourly Supplementary feeds provided for adequate caloric intake and prescribed or ordered by a Medical Officer			
Non-pharmacological supportive care	▲	Settled between feeds Excess light and noise minimised around baby Skin-to-skin encouraged Swaddling and cuddling encouraged Pacified (non-nutritive sucking) Cluster care Rooming in encouraged Provide position and comfort measures (e.g. swaying and rocking)			
Elimination	▲	Urine output 2-6 wet nappies in 24 hours Green / yellow stool			
Hydration	▲	Moist mucous membranes			
Physical assessment	▲	Skin - well perfused, jaundice nil or mild over face only Eyes / mouth - nil evidence of infection Cord clean and dry			
Counsel / support	◆	Parents counselled prior to commencement of medication			
Education (NAS information)	▲	Discuss: withdrawal symptoms, Finnegan score, treatment options, supportive monitoring, cardio respiratory monitoring, effects of medication			
Discharge	▲	Baby has <i>not</i> progressed to NAS requiring medication - plan for discharge Discharge plan completed Baby has progressed to NAS requiring SCN admission			
Expected outcomes	▲	Ask mother about the following	Initial	Time	V
	2.1	Mother feels confident in caring for her baby			

Further notes:

DO NOT WRITE IN THIS BINDING MARGIN

NAS PATHWAY ONGOING CARE (ADDITIONAL PAGE)





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Scores with '*' require only one score to be recorded

Start date:	End date:	Time											Comments		
		Score													
Central Nervous System Disturbances	Excessive high pitched cry	* 2													
	Continuous high pitched cry	3													
	Sleeps less than 1 hour after feed	* 3													
	Sleeps less than 2 hours after feed	2													
	Sleeps less than 3 hours after feed	1													
	Hyperactive Moro reflex	* 2													
	Markedly hyperactive Moro reflex	3													
	Mild tremors disturbed	* 1													
	Moderate-severe tremors disturbed	2													
	Mild tremors undisturbed	3													
	Moderate-severe tremors undisturbed	4													
	Increased muscle tone	2													
	Excoriation	1													
	Myoclonic jerks	* 3													
Generalised convulsions	5														
Gastrointestinal disturbances	Excessive sucking	1													
	Poor feeding	2													
	Regurgitation	* 2													
	Projectile vomiting	3													
	Loose stools	* 2													
	Watery stools	3													
Respiratory / Vasomotor Disturbances	Sweating	1													
	Fever (37.3°C–38.3°C)	* 1													
	Fever (38.4°C and above)	2													
	Frequent yawning >3–4 times in half hour	1													
	Mottling	1													
	Nasal stuffiness	1													
	Sneezing >3–4 times in half hour	1													
	Nasal flaring	2													
	Respiratory rate greater than 60 / mins	* 1													
	Respiratory rate greater than 60 / mins and retractions	2													
Total score															
Scorer's initials															

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