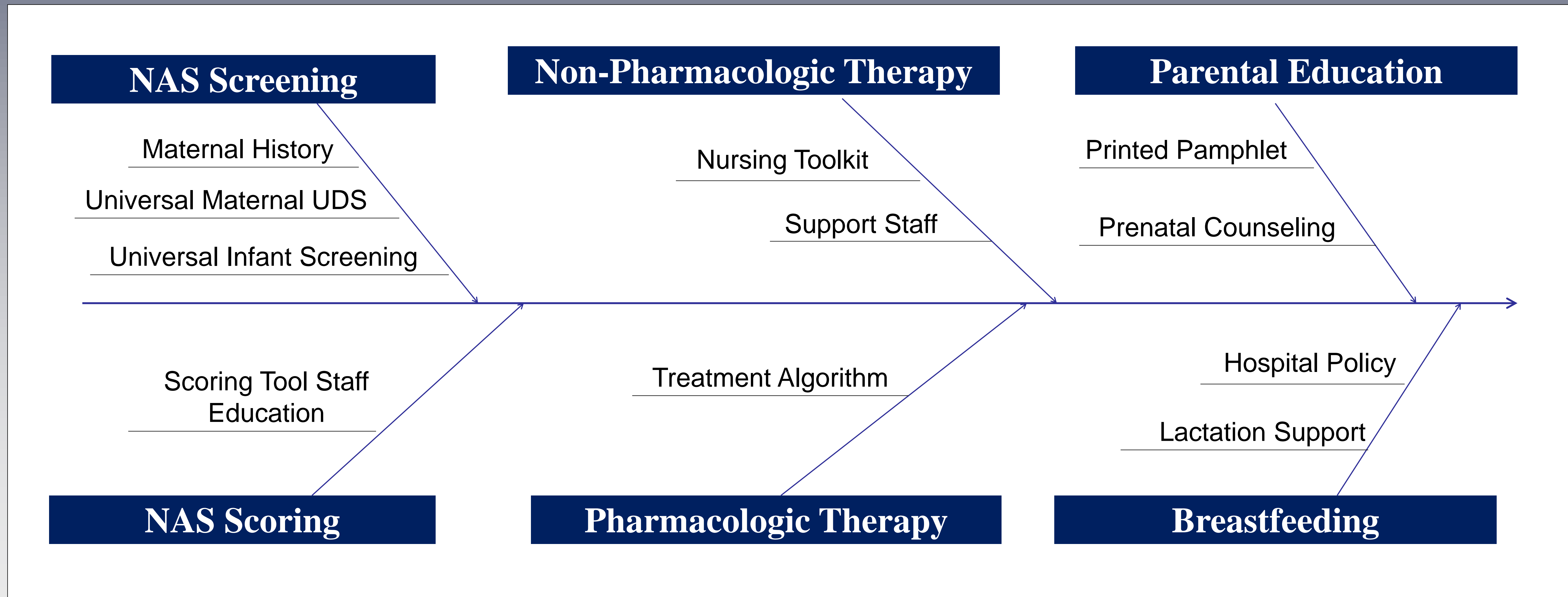




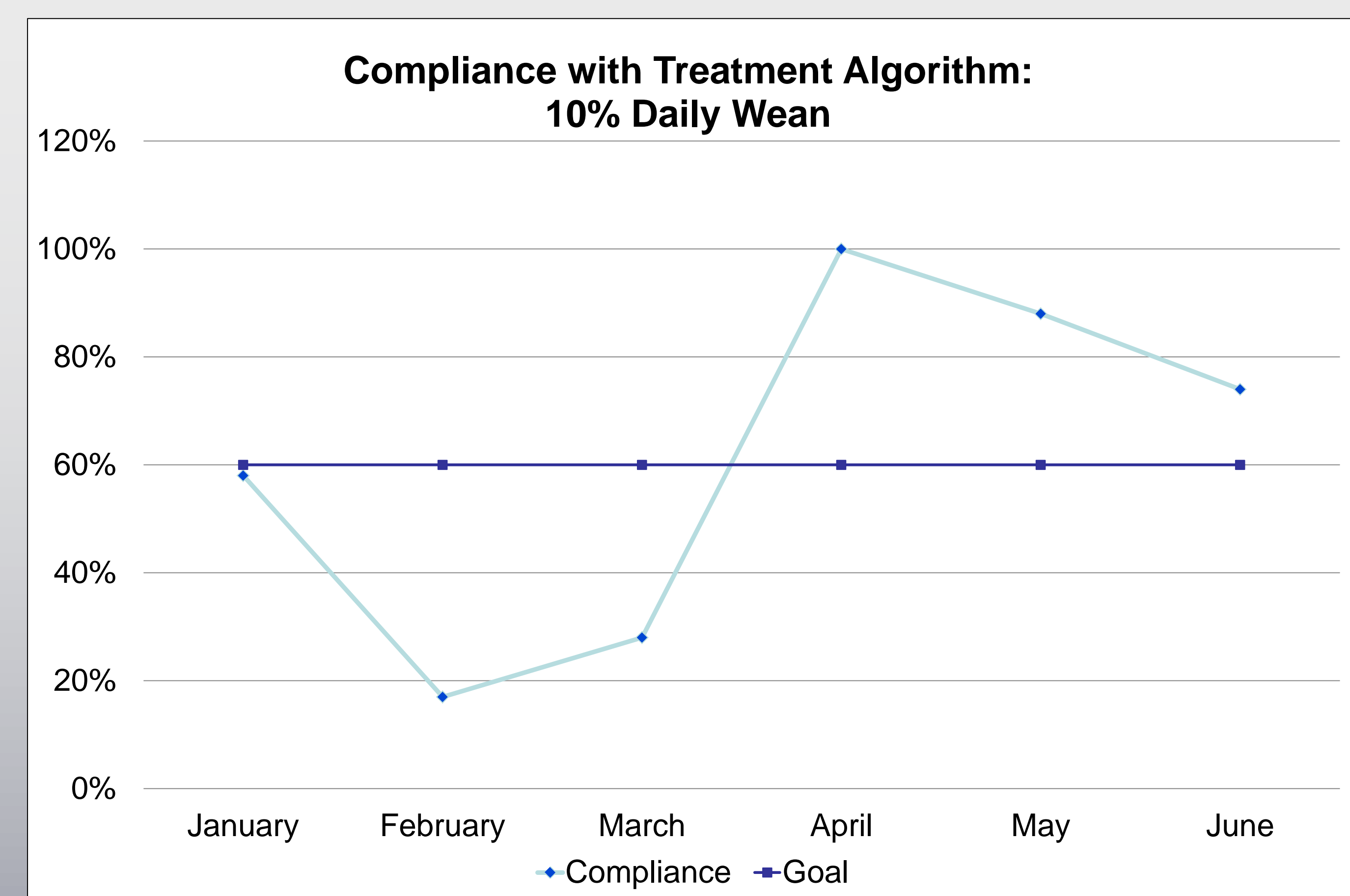
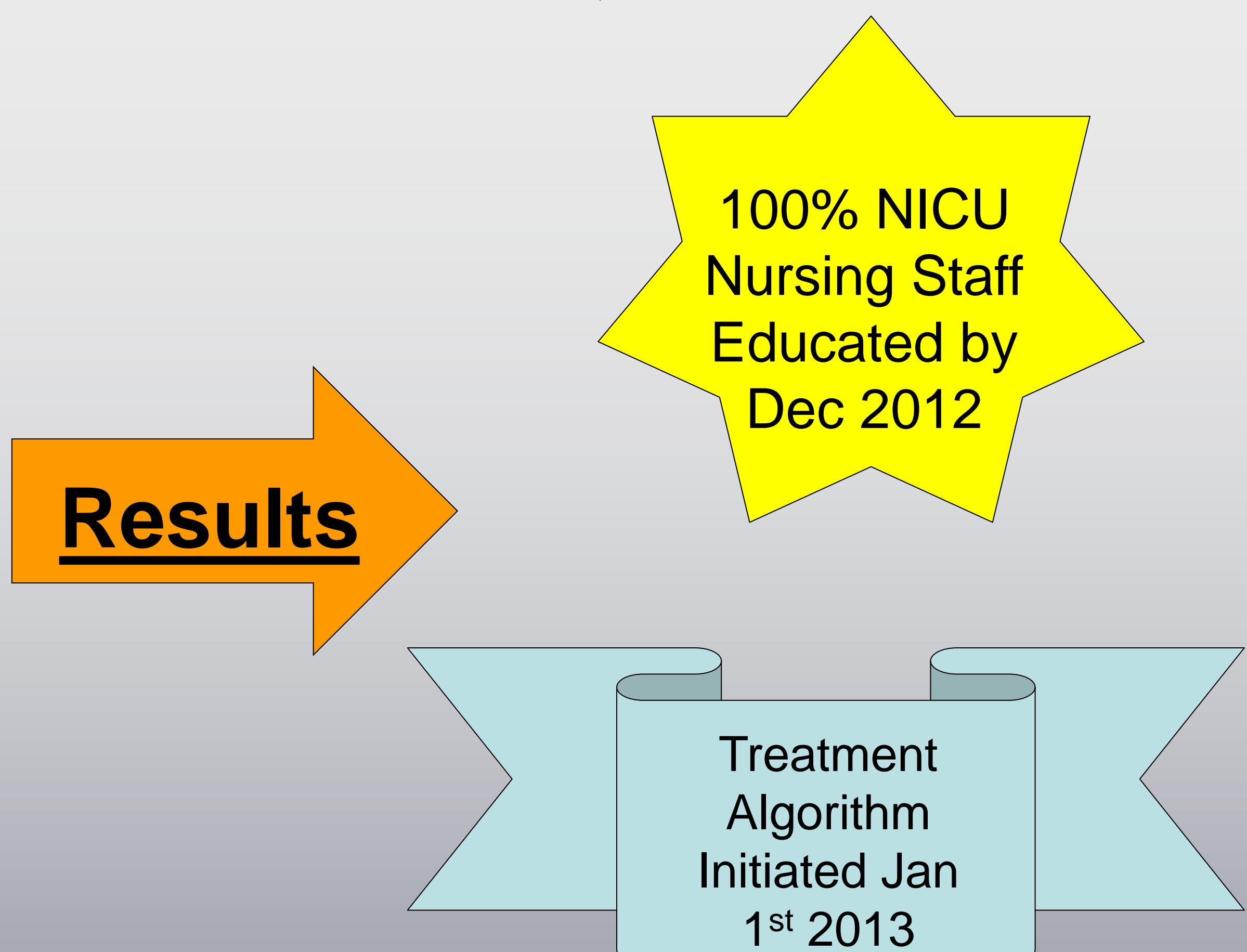
Improving Our Care of Infants with Neonatal Abstinence Syndrome

West Virginia University Healthcare. Morgantown, WV.
Multidisciplinary WVUCH team (Contact email: sweetc@wvuhealthcare.com)



- ### Clinical Aims
- Term infants, not requiring pharmacologic therapy
Baseline median length of stay (LOS)= 3 days
Goal: To maintain current LOS
 - All term infants, requiring pharmacologic therapy
Baseline median LOS= 20 days
Goal: To reduce LOS by 3 days
 - Term infants, requiring a hospital stay longer than 21 days
Baseline median= 32 days
Goal: To reduce LOS by 8 days

- ### Mechanisms of Change
- A multidisciplinary team of physicians, nurse practitioners (neonatal and newborn), nurses (maternal and neonatal), a clinical pharmacist, and a social worker was created.
 - Formalized, mandatory education of bedside nurses for the utilization of the modified Finnegan's scoring tool was conducted.
 - A standardized pharmacologic treatment algorithm was implemented.



- ### LOS Improvements (6 months; N= 16)
- All term infants, requiring pharmacologic therapy
Median: 18 days
 - Term infants, requiring LOS > 21 days
Median: 24 days
- 35% reduction in number of patient requiring LOS greater than 21 days**
- 11% reduction in actual hospital days!**

- ### Future Directions
- Education related to expectation and treatment of NAS
 - Antenatal
 - Postnatal
 - Breastfeeding and use of maternal breast milk
 - Non-pharmacologic toolkit for nursing

- ### Our Team
- | | |
|--------------------------|-----------------------|
| Stephanie Grayson, MD | Cody Smith, MD |
| Courtney Sweet, PharmD | Beth Hintz, RN |
| Pete Yossuck, MD | Cara Smith, RN |
| Martha Mullett, MD | Melinda Connolly, NNP |
| Susan Wagner, RN | Maureen Schmitt, RN |
| Barbara Nightengale, NNP | Carol Kourtsis, MSW |