

# Neonatal Abstinence Syndrome (NAS) Practice Guidelines

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## Admission- Patient Placement- Assignments- Visitation

- Consider specific room assignment for babies with NAS based on location of room in POD.
- Support a quiet, dimly lit environment.
- Patients should be located farther away from RN stations to avoid excessive, constant noise exposure from report, etc. Consider a corner room assignment.
- Consider number of infants per assignment with NAS.
- RN assignments with 2-3 baby assignments and thoughtfulness of what babies are assigned together.
- Consider immediate referral to developmental team at admission to develop individual plan of care.
- Encourage visitors, caregivers, volunteers and therapist to check in with the RN before approaching.

## Assessment- Feeding- Patient Environment- Patient Handling

- Document infant behavior using scoring tool.
- Draw curtain to contain area with re: sound, light
- Post DO NOT DISTURB sign to promote a quiet environment
- Position and swaddle to provide adequate proprioceptive input (i.e. swaddle and use ZFLO tube, small bassinet vs. large open crib)
- Encourage parent and/or caregiver involvement as much as possible at feedings and touch time. Provide ongoing education to volunteers before they begin assisting in the care of infants with NAS with specific direction re: handling and feeding (due to their tendency for hyperactive suck and therefore taking in too much po)
- Encourage small, frequent feeding with good pacing
- Create an individualized daily schedule for the infant to maintain continuity of care  
*The rehab team will be developing and updating the individual treatment plan for each NAS baby to reflect the needs of that infant*
- Position infant prone when actively withdrawing, as per orders.
- When holding position infant firmly and close to body.
- Rock in vertical position vs. side to side (slow and steady).
- Modulate eye contact; monitor infants desire for eye contact
- Decrease volume and frequency of talking during treatment/care and feeding
- Offer infant one type of input at a time
- During massage, treat one extremity at a time
- Provide a therapeutic bath
- Attend to infants needs ASAP avoiding periods of excessive crying or irritability
- Monitor mobiles and toys and assess infant's tolerance frequently
- Maintain the 4 S's  
*Shush Swaddle Suck Sway*

## Family Education

- Teach withdrawal symptoms and stress signs
- Instill an understanding of the benefits of reading stress signs
- Encourage rocking in a vertical position vs. side to side (slow and steady)
- Teach modulation of eye contact; monitor infants desire for eye contact
- Encourage the decrease in volume and frequency of talking during treatment/care and feeding
- Teach offering infant one type of input at a time
- Encourage during massage, treatment one extremity at a time
- Teach and encourage therapeutic bath
- Encourage the attention to infants needs ASAP avoiding periods of excessive crying or irritability
- Encourage monitor mobiles and toys and assess infant's tolerance frequently
- Maintain the 4 S's  
*Shush Swaddle Suck Sway*