Eat, Sleep, Console Neonatal Opioid Withdrawal Syndrome Implementation Evaluation
Erica Costigan MSN, RN, CNL, IBCLC, RNC-IAP; Courtney Johnson OTR/L, MSOT, CNT, NTMTC; Susan Frankki MS; Dawn Steffes AAS; Serina Johnson DNP, RN, PHN

**Background**

- **Substance Abuse during pregnancy:**
  - 1, 2, 3
  - Opioid Crisis has led to rise in neonatal abstinence syndrome (NAS)
  - Newborn experiences withdrawal symptoms after birth
  - The Finnegan Neonatal Abstinence Scoring System (FNASS) scale
  - Widely used scale for assessment and guidance of treatment created in the 1970s
  - Limited by the subjective nature of assessment
  - Focus on counting symptoms
  - The Finnegan Neonatal Abstinence Scoring System (FNASS) scale
  - Because of its subjective nature, увековечиваемый
  - Finnegan scoring system
  - The Finnegan Neonatal Abstinence Scoring System (FNASS) scale
  - Weight loss (>10% loss from birth)
  - Non-Street drug use 60%

**Methodology**

- **Retrospective Institutional Review Board-approved study**
  - Electronic health record (EHR) review
  - January 1, 2018, through August 1, 2022
  - IRB-approved
  - Retrospective chart review
  - Pre/Post implementation
  - Data indicated (2942) FNASS scores
  - ESC Group (n=4)
  - FNASS versus ESC Scale
  - FNASS Tool

**Purpose**

- **Overall Population**
  - The overall study population included mother (59)/baby (60) dyads (1 twin delivery)
  - The timeframe for data collection has been
  - Finnegan Group (n=56)
  - Continuous Improvement
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**Results**

- **Mom Demographics**
  - Age 30.8 years
  - History of
  - Alcohol use 63.3%

- **Baby Demographics**
  - n=60 babies
  - Female (51.7%)
  - Average Gestational Age 37.8 weeks
  - White (85%)

**Nursing Implications**

- **Limitations**
  - Preliminary retrospective EHR data analysis
  - Small homogeneous sample at a single institution
  - Considerations
  - Infants already receiving Morphine may score lower in comparison group
  - Manual scoring by the researcher

- **Implications**
  - Preliminary analysis indicated trends
  - Less medication treatment needed
  - Shortened length of stay
  - The timeframe for data collection has been updated to include new patients and this process is now in progress

- **Next Steps**
  - Continue to collect data on future patients for analysis
  - Continue to identify areas for improvement
  - Consider looking at follow up care and breastfeeding rates for these families
  - Explore reasons for readmissions

**Resources & More Information**

- **Data**
  - **Meds Indicated**
  - **Feeding Type**
  - **If babies were listed in as “Both” they were not listed in the “Breast” or “Formula” categories**

**Study Aim**

- Descriptive demographics
- Length of stay (LOS)
- Medication utilization
- Transfers to a higher level of care

- **Historical Setting**
  - Neonatal abstinence scoring system
  - Escalation of newborns
  - Finnegan scoring system
  - Finnegan scoring system, and I

- **Goals:**
  - Reduce Pharmacologic Treatment
  - Reduce Length of Stay
  - Reduce Cost of Care
  - Family-Centered Care
  - Better Care for Babies
  - Simplify and Decrease Variability in Scoring
  - Ease of Charting

- **Change of Focus:**
  - Focus on the “normal” functions of the newborn
  - Emphasis on preventing increased symptoms
  - Including families as the main caregivers and partner with them

- **Continued evaluation of the staff care process is**
  - Interdisciplinary collaboration
  - Evidence gathering
  - Process development