

Dear Parent(s),

Congratulations on your pregnancy and/or the birth of your new baby! As you may know, your new baby may experience signs of withdrawal because of the medicines or drugs that you are taking. Our team at the [hospital x] is committed to providing you and your baby with the best care possible. The information in this letter will help you learn how to best care for your baby after birth.

When a baby shows symptoms of withdrawal from an opiate medicine, like methadone or buprenorphine, it is called **Neonatal Abstinence Syndrome (NAS)**. Symptoms of NAS usually start within 1 to 2 days of a baby's birth, but can sometimes take 4 to 5 days. Some babies will need medicine to treat the symptoms of withdrawal. However, most babies can get through the withdrawal with their parent's touch, holding, and care as their only treatment.

Babies do best when their parents are close by to provide a feeling of comfort and safety. Babies also do best when they are cared for in a calm, quiet space without lots of noises or people around. When you care for your baby in your own room, it is called "**rooming in.**" When babies "room in" with their parents, they are able to eat and sleep better. They are also easier to console or calm down. Babies are much less likely to need medicine to treat their withdrawal if their parent is close by. If a baby does need medicine, they will likely need less medicine and be able to go home faster if their parent is there taking care of them all of the time. **You are your baby's best treatment for NAS!**

We will take the following steps to make sure your baby is as healthy as he or she can be:

1. After birth, your baby will stay with you in the **Birthing Pavilion** if he or she is born at 35 weeks or more and does not require intensive care for any reason.
2. Nurses and doctors will check your baby for symptoms of NAS after feedings every few hours.
3. We will monitor your baby in the hospital for **at least 4 days**. We will let your baby go home when we know that your baby has gone through the peak of withdrawal symptoms.
4. If your baby has **problems eating, sleeping, or consoling**, we will teach you ways to help your baby through the withdrawal problems such as with skin-to-skin contact and quietly rooming-in together.
5. If there are still problems with eating, sleeping, or consoling despite all comfort care measures, your baby may be moved to the **Pediatrics Unit** to start medicine unless intensive care is needed for another reason.
6. While on the Pediatrics Unit, you will be able to room in with your baby 24 hours a day. **On average, babies being treated with medicine need to stay in the hospital for one to two weeks.** However, it sometimes takes longer. It is important that you **room in with your baby this whole time**. Once your baby is off medicine and showing no symptoms of NAS for at least a day, your baby is ready to go home!

During your baby's time in the hospital, you will be your baby's primary caregiver. We will be here to help you, but ***your baby will do best if you are the one providing all of his or her care.***

➤ **Care for your baby in a calm, quiet room with the lights down low**

- ❖ Keep your baby close to you “*skin to skin*” when you are awake and not sleepy.
- ❖ Talk to and sing to your baby.
- ❖ Gently sway your baby.
- ❖ Feed your baby when he/she shows you hunger or feeding cues (licking lips, bringing hands to mouth, opening mouth to something touching lips or cheek) and until content (at least every 3 hours).
- ❖ Breastfeed your baby (unless told not to by a provider for medical reasons).
- ❖ Wrap (“swaddle”) your baby in a thin blanket keeping the top of the blanket away from his or her face.

➤ **Be with your baby 24/7**

*Babies with NAS do not do as well when they are in bright, loud settings such as at the Nurse’s station.*

- ❖ Stay with your baby in your private room as much as possible. **If you need to leave the unit for some reason** (such as for an appointment or a walk) and someone else cannot stay with your baby, please let your nurse know so we can **make a plan ahead of time**. We will work to find a “cuddler” to help hold your baby in your own room if you need to be away. The sooner you can tell us about these needs, the better we can work together to help you and your baby.
- ❖ Help us watch your baby for symptoms of NAS. Let us know if your baby has **any problems with eating, sleeping, or consoling**. These are the symptoms that are most important to your baby. You can also keep track of these symptoms, and other symptoms of NAS, in your baby’s “Newborn Care Diary.”
- ❖ We will be nearby to help you if you have any questions or concerns.

➤ **Make a plan to stay with your baby for as long as he or she needs to be in the hospital**

*It is very important that you are able to stay with your baby the whole time he/she is in the hospital. Your baby will be much less likely to need medicine, or will need medicine for a shorter period of time, if you are here to care for your baby all of the time. Here are a few tips to help prepare you for your baby’s hospital stay:*

- ❖ Bring enough clothes and personal items with you to last for 2 weeks or more.
- ❖ Plan to have someone watch your other children and/or pets while you are away.
- ❖ Tell your family and your employer that you might need to be in the hospital for a couple of weeks.
- ❖ Plan to have a home visiting nurse come to your home and to follow up with your baby’s primary care provider the first 2 days after your baby’s discharge.

We look forward to working with you to help you and your baby have the best experience possible. If you have any questions about any of the information in this letter, please contact Dr. [name of contact], a social worker, or a nurse manager in the Birthing Pavilion at 603.555.5555.

Thank you and congratulations again!

*The Newborn Care Staff at [insert name of your hospital here]*