What happens if my baby does need medicine to treat NAS?

- Some babies need just 1 or 2 doses of medicine while others may need to be treated for 10 to 14 days. Occasionally, a baby needs medicine even longer. It is very important you are able to stay with your baby this whole time as you are still the most important treatment for your baby. Please plan ahead in case this happens.
- Plan to have at least one family member or friend here with you to help care for your baby in your room.
- Bring enough clothes and personal items with you to last at least one week
- Plan to have someone watch your other children and/or pets while you are away.
- Sometimes it is hard to talk to your family about why your baby might need to stay in the hospital. If this is true for you, ask your OB or Pediatric provider to help. We also have a social worker who can help you with this or any other difficult conversations.

When can I take my baby home?

Your baby's care team will help decide when it is safe for your baby to go home. We will need to watch your baby for at least 4 to 5 days in the hospital to make sure all of the medicine or drug is out of your baby's body. It is best to have your baby stay in the hospital until most of the symptoms of NAS are over.

Your baby is ready to go home when he or she:

- Is feeding and sleeping well.
- Is easy to console (calm down).
- Has not lost too much weight or is gaining weight.
- Is able to maintain a healthy temperature, heart rate, and breathing.
- Has received the hepatitis B vaccine and all newborn screening is done and normal.
- No longer needs medicine, if it was started.
- Has an appointment made with a home visiting nurse and primary care provider (PCP) for the first few days after discharge. These visits are needed to help watch your baby's weight and NAS symptoms.
- Has a referral made to Early Intervention Services to help monitor your baby's development.
- Has a Plan of Safe/Supportive Care completed with referrals made to community supports and services. You will receive a copy of this Plan at the time of your baby's discharge.

Original content developed by Bonny Whalen, MD and the staff at the Children's Hospital at Dartmouth-Hitchcock.





Neonatal Abstinence Syndrome (NAS):

Caring for Your Newborn



Congratulations on your pregnancy and/or the birth of your new baby!

Our team is committed to providing you and your baby with the best care possible. The information in this pamphlet will help you learn how to best care for your baby after birth.

What is NAS?

Neonatal Abstinence Syndrome, or NAS, occurs when a baby withdraws from opioids after birth. It is also sometimes called Neonatal Opioid Withdrawal Syndrome (NOWS). Most babies show signs of withdrawal 2 to 3 days after birth, but some may not show signs until day 4 or 5. Your baby should stay in the hospital until most of the symptoms of NAS are over.



What are the most common signs of NAS?

- Tremors, jitteriness, or shaking of arms and legs
- Tight muscles in arms and legs
- Fussiness
- Problems eating or sleeping
- Hard to console or calm down
- Need for sucking when not hungry
- Frequent spit ups or vomiting
- Loose or watery stools (poops)
- Trouble losing too much or not gaining enough weight (after day 4)

Serious symptoms like stopping breathing or seizures are possible but very rare.

NAS Assessments

We will watch your baby closely for signs of withdrawal every few hours. Let your nurse know when your baby is done feeding as this is a good time to check your baby. You can also help us watch your baby by keeping track of:

- How well your baby eats
- How well your baby sleeps
- How well your baby consoles (calms)
- What kinds of things help your baby calm (holding, skin to skin contact, swaddling, sucking, a calm room)
- Very loose or watery stools (poops)

 We will give you a Newborn Care Diary to keep track of all of these things!

What will my care team do to make sure my baby is healthy?

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 his or her care.

- We will monitor your baby in the hospital for at least 4 to 5 days.
- If your baby has problems with eating, sleeping, or consoling we will teach you ways to help your baby.
- If there are still problems after all you and we have done to help your baby, we will talk with you about whether medicine may help your baby.



- ROOM IN TOGETHER: One of the best things you can do for your baby is to keep him/her with you in your own room. Being close to your baby helps you respond quickly to his/her needs. Your baby will feel safest and most comfortable when close to you.
- SKIN TO SKIN: Spend as much time "skin to skin" with your baby when you are awake. This helps your baby eat and sleep better, and will help calm your baby. It can also help decrease other symptoms of withdrawal. It also helps your milk supply when breastfeeding.
- SWADDLE/CUDDLE: Hold your baby or swaddle your baby in a light blanket. Just being close to someone, or "tucked" in a swaddle, helps your baby feel safe and comfortable. Please let us know if you need to have someone help take care of your baby for a little bit to help you get some needed rest as well.
- A CALM ROOM: Keep your room calm and quiet with the lights down low. Loud noises and bright lights may upset your baby.
- FEED AT EARLY HUNGER CUES: Do not let your baby go for more than one 4 hour stretch between feedings per day until your baby is back to birth weight.
- **SUCKING:** If your baby still wants to suck after a good feeding, offer a clean finger or pacifier to suck on. This can be very comforting for your baby. Always make sure your baby is not hungry first!
- LIMIT VISITORS: Try to have only one or two visitors in your room at a time as more may make your baby fussy or not sleep as well. Encourage your visitors to use quiet voices.