### SAFE DISCHARGE CHECKLIST

#### ON ADMISSION
- Identify exposures via history and/or maternal/infant toxicology screen; determine HCV status
- Determine if exposure is short acting or long acting opioid
- Encourage parental and/or caregiver involvement
- Educate parent or caregiver on signs of NAS including: general care of the newborn, supportive care measures, medication adherence and administration (if indicated), and symptom assessment
- Encourage multidisciplinary collaboration: nurses, social workers, music therapists, PT, OT, pharmacists, nutritionists, and medical staff
- Begin social work assessment and clearance for discharge

#### APPROACHING DISCHARGE
- **If short acting opioid exposure identified:** Infant has been observed (in-hospital) for at least 72 hours for signs of withdrawal
- **If long acting opioid exposure identified:** Infant has been observed (in hospital) a minimum of 5-7 days for signs of withdrawal
- **If medically treated:** Infant has been observed off medications (opioids) for a minimum of 48 hours prior to discharge
- Weight gain should be established for minimum of 48 hours prior to discharge with adequate oral nutrition intake
- Concerns regarding child protection and guardianship have been addressed
- Assess how the home environment will support the mother-baby dyad

#### DAY OF DISCHARGE
- Home health service (visiting nurse care at least once in the 1st week after discharge)
- Referral for HCV testing
- Pediatrician (or PCP) appointment and developmental clinic follow up (treated for NAS)
- Identify community resources for the mother (check all applicable):
  - Early Intervention (EI)
  - Early Head Start
  - Head Start
  - Incredible Years
  - WIC
  - Individual Statewide resources:
    - __________________________
    - __________________________

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