

Background

Maternal opiate use has increased significantly resulting in an increased rate of neonatal abstinence syndrome (Casper and Arbour, 2013)

- 15% of births in the United States are affected by prenatal alcohol and drug exposure (NCSACW, 2017)
- Early detection in neonates exposed to illicit substances assists to effectively care and treat withdrawal symptoms (Casper & Arbour, 2013)
- Current methods of collecting toxicology samples from newborns include: urine, meconium, umbilical cord, and hair sampling (Casper and Arbour, 2013)

Population: Neonates **Intervention:** Drug testing **Comparison:** Meconium vs umbilical cord drug screening

Outcome: Determine best practice



Best Practice for Neonatal Drug Screening Glenda Hummel, Alex Long, Jennifer McDaniel, and Joy Slaven

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Objectives

- Identify the most effective methods for detection of maternal drug use in pregnancy through neonatal meconium versus umbilical testing.
- To evaluate the most efficient way to identify infant withdrawal
- To provide quality and safe care to our patients based on evidenced based practice

Methods

Five evidence based articles related to neonatal abstinence syndrome were found using CINAHL based on:

- Full text articles

Published date within the last ten years Level one and Level two research articles The articles were compared and contrasted in order to find the most effective way to perform neonatal toxicology screening

Progressing Newborn Toxicology With Umbilical Cord Testing







Results/Findings

- Meconium Testing Pros:

Cons:

- 2013)

- Umbilical Cord Testing Pros:

 - 2013)

 - Cons:
- Chain of Custody

 - screen

Recommendations

- Committee
- decrease turnaround time

Full list of references available upon request





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Detects a wider variety of drugs and more cost effective (Casper & Arbour, 2013)

Requires a larger sample (Casper & Arbour,

Not effective when it is passed in utero, when the provider and nurse are not in collaboration, or the meconium is thrown away in the diaper (Wood et al., 2014) Longer wait for results.

Cord blood testing is easier to collect, produces more accurate results, and has a quicker turnaround time (Casper & Arbour,

Available from every newborn, non-invasive, and does not rely on parent participation

• Drugs given to mother at delivery can be detected (Palmer et al., 2017)

• Notify pediatrician of mother's positive drug

Notify social work of results.

• Further analysis of umbilical cord sampling costs Discuss findings and recommendations with FBP leadership and FBP Professional Practice

 Change practice from meconium testing to umbilical cord testing to improve accuracy and