

Newborn Drug Screening

Purpose:

Newborns with drugs in their bodies will be reported to the Office of Children's Services (OCS). Drug screening for at-risk newborns will be done to determine the need for intervention, education, and treatment.

Guidelines:

- A. On admission for delivery of the infant, parents will be informed that screening criteria will be applied to all newborns and that infants meeting these criteria will have urine drug screening done.**
- B. The admitting nursery nurse will screen the mother's prenatal and inpatient records for risk factors. A newborn urine drug screen will be collected if any of the following indicators are present:**
 1. Prenatal history of substance abuse at any time during pregnancy.
 2. Maternal history of drug use <1 year prior to delivery.
 3. Obvious alcohol odor on the mother's breath or behavior consistent with intoxication.
 4. No prenatal care, or a local Anchorage patient with less than 5 prenatal visits or no prenatal care until after 20 weeks gestation.
 5. Spontaneous (non-induced) pre-term delivery (i.e. less than 37 weeks).
 6. Placental abruption.
 7. Small for gestational age.
 8. Symptoms suggestive of neonatal abstinence syndrome.
 9. Neonatal seizures.
- C. Specimen handling:**
 1. The first voided urine will be obtained (minimum 3 cc). Note: Methadone testing must be ordered specifically (not included on screen).
 2. If urine drug screen is POSITIVE, a Meconium Drug Screen will be obtained and sent (minimum 1 cc).
 3. Any positive urine screen will be treated by the lab as a "critical value" and called to the nursery nurse.
- D. Results:**
 1. The nursery nurse will report a positive urine screen to the pediatrician covering the nursery and Social Services. These contacts can be made during the routine working hours.
 2. Social Services will interview the patient. Support services and drug rehabilitation treatment will be offered.
 3. Patients who have already been discharged will be contacted by Social Services and an intervention will be arranged with the parents and Social Services.
 4. If the mother infant pair is scheduled to leave on a weekend or holiday, the on-call pediatrician and social worker will be notified for a positive urine drug screen, which will result in the on-call social worker coming in to interview the patient.

5. All cases of positive drug screens will be referred for follow up to OCS with the interviewing social worker determining a safe discharge plan for the infant.

Reference: Newborn Drug Screening Memo, 1995

WRITTEN: Nov 1990

REVISED: Apr 1999, Jul 2003, Jun 2004, Apr 2006

REVIEWED: Dec 2011, Jun 2012, Jul 2015