

NAS Initiative Data Collection Form

(Inclusion criteria: Data collection tool started when scoring is initiated)



Part I-Admission

1. Date of Birth: _____

2. Admission Date: _____

3. Gestational Age: _____

4. Maternal narcotic use: Methadone Buprenorphine Heroin Unknown

5. Date scoring began: _____

6. Did parents receive NAS education: Yes No Unknown

If yes then:

6a. Education provided by: OB Neonatologist Prenatal consult Nursing Social Work Unknown

6b. Type of education: Written Verbal Both

NAS Data Collection

Part II-Daily

Date: _____

7. Location of Care: NICU Nursery Peds

8. Parents visited: Yes No

9. Non-pharmacologic treatment: Swaddling Quiet Room Skin to Skin Other None

10. Type of feeding: BM Formula Combination NPO

11. Medication wean today: Yes No

If yes to 11 then

11a. Peak score in last 24 hours: _____

12. Medication escalated today: Yes No

If yes to 12 then

12a. Score leading to escalation: _____



NAS Data Collection

Part III-Discharge

13. Discharge Date: _____

14. Was pharmacologic treatment started: Yes No

If yes to 14 then:

14a. Date pharmacologic treatment started: _____

14b. Score when pharmacologic treatment started: _____

14c. Date pharmacologic treatment stopped: _____

14d. Primary medication used: Morphine Methadone Clonidine Phenobarbital

14e. Secondary medication used: Morphine Methadone Clonidine Phenobarbital

14f. Dosing: Weight Based Flat Dose

14g. Weaning: Weight Based Percentage

14h. Discharged home on treatment medications: Yes No

15. Type of feeding at discharge: BM Formula Combination NPO

16. Did parents room in: Yes No

17. CPS referral made: Yes No



NAS Data Collection