

Prenatal Opioid Exposure – Caring for Families

Anticipatory guidance for infants and children exposed to opioids

The AAP Bright Futures outlines the priorities and risks for general anticipatory guidance offered to all families, which changes/evolves based on the age of the infant/child. Families with prenatal opioid exposure may need more specific anticipatory guidance emphasized during visits as shown in the table here:

Anticipatory Guidance for Prenatal Opioid Exposure	Prenatal	New	1-mo	2-mo	3-mo	4-mo	6-mo	9-mo	12-mo	15-mo	18-mo	24-mo	30-mo	3-y
Opioid and other substances use (alcohol, tobacco, marijuana, amphetamines, etc), prescribed and nonprescribed medications														Yes – All visits
Over the counter medications for the infant	-	-	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Perinatal depression (screening)	-	-	Yes	Yes	-	Yes	Yes	-	-	-	-	-	-	-
Parental emotional and mental health well-being	-													Yes – All visits after birth
Parent-infant bonding	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	-	-	-	-	-	-
Family support/support people	-													Yes – All visits after birth
Community resources: housing, nutrition/food, financial assistance.	-													Yes – All visits after birth
Pregnancy adjustment & preparing for delivery	Yes	Yes	Yes	-	-	-	-	-	-	-	-	-	-	-
Intimate partner violence														Yes – All visits after birth
Breastfeeding														-
Newborn health risks and NOWS management & nonpharmacologic care (eg, Eat, Sleep, Console*)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	-	-	-	-	-	-	-
Medications for Opioid Use Disorder	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes			
Risk of return to use & accidental overdose														Yes – All visits
Medication storage														Yes – All visits after birth
Safe sleep	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	-	-	-	-	-
Firearms & home environment safety (burns, poisoning, falls, drowning)	-													Yes – All visits after birth
Environmental concerns (tobacco exposure, lead, pica, mold, etc)	-													Yes – All visits after birth
Developmental screening and surveillance	-	-	Yes	Yes	Yes	Yes	Yes	Yes						
Behavioral and social development and interactions, sibling relationships	-	-	-	-	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Pre-school and academic	-	-	-	-	-	-	-	-	-	-	-	Yes	Yes	Yes

* Eat, sleep, console is an approach to monitoring and treating infants with prenatal opioid exposure. If the infant's ability to eat, sleep and be consoled is impacted by withdrawal the birth parent/caregiver can use methods such as skin-to-skin contact, frequent feeding and holding the baby in a quiet room with low light to calm them.