1. All infants born to mothers using illicit narcotics, habitual alcohol or other illicit drugs during this pregnancy will need:
   a. Urine drug screen immediately obtained after birth.
   b. Collection of 24 hours meconium in case needed for further testing.
   c. Consultation with social worker.
   d. Inform Department Child and Family Services (DCFS) soon after discovery (do not wait until discharge day).

2. If mother is on Methadone program or using illicit narcotics (Morphine, Heroin) or if there is a suspicion of ongoing narcotic abuse:
   a. The infant needs to be evaluated by a Neonatal Nurse Practitioner (NNP) or neonatologist for admission to the Neonatal Intensive Care Unit (NICU) within 24 hours.
   b. The infant should not breast feed until clarifying the status (use of other drugs, like cocaine, amphetamines, HIV status and future monitoring capability).
   c. The infant should not be discharged before 1 week of age.
   d. Some infants may not show signs of withdrawal until 2-3 weeks of age so if the infant is asymptomatic and discharged home needs to be monitored closely by Primary Medical Doctor (PMD) for possible late onset signs of withdrawal.
   e. The infants of the mother on prescription narcotics during pregnancy need to be evaluated by a physician for risk of Neonatal Abstinence Syndrome (NAS).

3. Urine drug screen for all the babies whose mothers had history of illicit drug use in the past 5 years, history of drug exposed infant in a previous pregnancy or history of Sexually Transmitted Disease (STD) during pregnancy.