



EAT, SLEEP, CONSOLE (ESC) CARE TOOL ESC 3rd edition 7.30.19

- Review ESC behaviors and Non-Pharm Care Interventions (NPIs) with parents every 2-4 hours (using Newborn Care Diary), *clustering care with infant's wakings and feedings*. With each assessment, reinforce NPIs that parents are implementing well ("R") and educate parents in ways that other NPIs can be increased further ("I").
- If Yes for any ESC item (due to Neonatal Opioid Withdrawal Syndrome (NOWS)/Neonatal Abstinence Syndrome (NAS)) or 3 for Consoling Support Needed: Perform a Parent/Caregiver Huddle to formally review NPIs that can be optimized further and continue to monitor infant closely.
- If 2nd consecutive Yes for any ESC item (or 3 for Consoling Support Needed) despite maximal non-pharm care OR other significant concerns present: Perform a Full Care Team Huddle to consider other etiologies for symptoms and determine if medication treatment is needed. Continue to maximize all Non-Pharm Care Interventions and monitor infant closely.

<i>Perform assessment of ESC behaviors for time period since last ESC assessment – note date/time:</i>			
EATING			
Poor eating (takes > 10 min to coordinate feeding or breastfeeds < 10 min or feeds < 10 mL (or other age-appropriate duration/volume) due to NOWS/NAS? Yes / No			
SLEEPING			
Sleep < 1 hr due to NOWS/NAS? Yes / No			
CONSOLING			
Takes > 10 min to console or cannot stay consoled for > 10 min due to NOWS/NAS? Yes / No			
Consoling Support Needed 1: Able to console on own 2: Able to console within (and stay consoled for) 10 min with caregiver support 3: Unable to console within (or stay consoled for) 10 min despite effective caregiver support			
PARENT / CAREGIVER PRESENCE SINCE LAST ASSESSMENT (in hours)			
> 3 (includes if parent / caregiver present entire time)			
2-3			
1-2			
< 1			
0 (no parent / caregiver present)			
NON-PHARM CARE INTERVENTIONS (Enter R = Reinforced, I = Increase, or NA = Not Applicable/Available)			
Rooming-in			
Parent / caregiver presence			
Skin-to-skin contact			
Holding by parent / caregiver / cuddler			
Safe swaddling			
Optimal feeding at early hunger cues			
Quiet, low light environment			
Non-nutritive sucking with pacifier / finger			
Rhythmic movement (provided by parent / caregiver or infant calming device – e.g., swing, "mamaroo")			
Additional help / support in room			
Limiting # of visitors			
Clustering care			
Safe sleep / fall prevention			
Parent / caregiver self-care & rest			
Optional Comments: (e.g., staff caring for / consoling baby as parents not available)			
PLAN OF CARE			
Parent/Caregiver Huddle Performed? Yes / No			
Full Care Team Huddle Performed? Yes / No			
Management Decision a: Continue/Optimize Non-pharm Care b: Initiate Medication Treatment c: Continue Medication Treatment d: Other (please describe – e.g., Wean or Discontinue Medication Treatment)			

*Special note: Numbers above are not intended as a "score" but instead may indicate / identify a need for increased intervention.