Monday, April 23, from 9:30 – 10:00 a.m. & 2:30 – 3:00 p.m.
WAPC 2018 Poster Session

**Neonatal Drug Screening From an Umbilical Cord Segment**
Innovative program/project

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**Introduction:** With the increasing concerns of the opioid epidemic it is critical to identify a consistent neonatal drug screen test to help guide neonatal abstinence syndrome treatment practices. Infant urine and meconium samples are not consistent sources for tracking maternal drug use. Umbilical cord sampling allows for a consistent source for testing.

**Objectives/purpose/goals:** The objective is to have a consistent process for collection of samples with quicker results to decrease safety issue reports resulting in the goal of safer patient care.

**Intervention/practice:** A 6 inch segment of umbilical cord is collected at each delivery to be used for drug testing if indicated. The segment is unclamped, drained of blood and rinsed. It is dried, placed in a sterile specimen cup and labeled with a patient sticker including: date, time, and Epic login for tracking. The sample is sent to lab to be stored in a specific refrigerator. If indicated, based on the substance abuse policy and protocol, a newborn order is placed for drug testing. The specimen is stored for 7 days, which allows for drug testing even after delivery.

**Results:** Since implementation in May 2017, there have been no safety event reports for unreliable results or missing specimens identified. In the 7 months prior to implementation there were 12 safety issue reports filed with urine and meconium samples including: quantity of meconium or urine insufficient, inability to obtain results due to interfering substances, or no orders placed.

**Conclusions:** This process is a non-invasive, cost neutral, faster method of collection with more conclusive results. It eliminates the explanation, to family, regarding urine and meconium collection since it is collected and sent on all patients. One lesson learned is that the mother does not need to consent for this process, but needs to be informed if testing is being conducted. Since the test is most often sent at the time of delivery per protocol, the RN or MD needs to inform the patient prior to the sample being sent for testing.