

If substance use disorder or other factors are interfering with the parents' ability to care for the infant, or if there are concerns that the family does not have adequate supports, a referral shall be made to CYFD Child Protective Services for potential child abuse/neglect. Creating a Plan of Care does not exempt the family from potential investigation by CYFD. Dial #SAFE.

Date this form was completed and faxed to the state:

Notification when a family refuses to complete the Plan of Care: State law requires hospitals to notify CYFD and DOH of all newborns with substance exposure.

Infant Name:	Admission Date:
D.O.B.:	Discharge Date:
Discharge Address (Street, City, Zip Code):	Discharge Phone:

Infant's Discharge Housing Status (Circle one):

Parental Home Designated Caregiver Home Facility/Shelter Precariously Housed

Health Insurance Company:	PCP for Newborn:
Health Insurance Plan:	PCP Phone #:
	PCP Fax #:

Check if mom tests positive on UA/Toxicology or admits verbally to use during pregnancy. Baby may still be negative, but was exposed.

Substance	✓	Substance	✓
Alcohol		Methamphetamine	
Benzodiazepines		Nicotine	
Buprenorphine (Subutex, Suboxone)		Opioids	
Marijuana		Other (Specify):	
Methadone		Other (Specify):	

Signature of Parent: _____ Date: _____

Signature of Staff: _____ Date: _____