## ED‐Initiated Buprenorphine (BUP) for Opioid Use Disorder Clinical Management Tool

v. 11/12/2018

**\*\*Notify SBIRT‐Addiction Team** for all patients with non-medical opioid use to help with education, counseling, referral, prescribing, and naloxone. Overnight, leave patient contact info for morning referral assistance. **SBIRT # for ED Staff to call: 212‐245-2665**

1. Patient identified to have non-medical opioid use. **Contact SBIRT. Use EMR template.**

## Is patient willing and eligible to receive buprenorphine (in ED or prescribed)? Yes No

**Eligibility Criteria**

* 1. **Active use** (recent, regular opioid use)Yes No
	2. **Opioid use disorder, moderate-severe** ( ≥ 4DSM criteria; DSM #:\_\_\_)Yes No
	3. **Willing** to receive buprenorphine in the ED todayYes No
	4. **Exclusions** (exclude, refer, or seek consultation) None Exclude
		1. **Recent methadone use** (<3-4 days)
		2. Medically unstable/critically ill or allergy

**Other Considerations and Populations** (still eligible for BUP)

* Alcohol/benzo use – BUP preferred to illicit opioid use; provide precautions (inpatient preferred)
* If already in treatment for opioid use or prescribed opioids for chronic pain; treat withdrawal and follow with own provider
* Prisoners: can treat withdrawal with BUP. Referral/Rx may not be possible
* Pregnant women get BUP without naloxone (Subutex*);* involve GYN forhigh-risk care
* **BUP is preferred to methadone if sending to detox** (if eligible for BUP) — to allow more treatment options

## Does patient have objective signs of moderate‐severe withdrawal (COWS ≥ 8)? Yes No

COWS Score \_\_\_ Opioid type: \_\_\_

**Do not give BUP unless patient in withdrawal!**

Generally, heroin & short‐acting pills ≥12 hrs; sustained‐ release pills 15‐24+ hrs, methadone 48‐72+ hrs.

Time since last use: \_\_\_

##  Actions (per withdrawal state):

**For Patients EXPERIENCING WITHDRAWAL with COWS ≥ 8 -- Treat withdrawal!**

1. **Administer BUP:** 4‐8mg SL. Start low dose if borderline, start 8mg if severe withdrawal.
2. **Reassess in 30‐60 min.** Consider alternate diagnosis or precipitated withdrawal if worsens.
3. **Administer 2nd dose of BUP** (once symptoms improving) for total dose of 8‐16mg. Higher doses may be considered in consultation with experts for prolonged withdrawal/craving suppression.
4. **Labs:** UTOX, hcG, LFTs are often needed for expedited referral. Consider HIV, HCV.
5. **Prescribe** (if BUP prescriber): Use prescribing guidance sheet & SBIRT. BUP/Naloxone (BUP/NX) 8/2mg: two SL daily\*
6. **Refer:** Use referral guidance sheet and SBIRT team. Treat even if definitive follow up cannot be secured. Can refer to detox after BUP. Return to ED is discouraged but BUP may be administered in ED for up to 72 hours.
7. **Discharge instructions/education:** Provide the prepared ED‐BUP discharge instructions and involve SBIRT team for counseling, naloxone kit, help with referral, navigation, and other services.

## Ensure contact information updated. Notify Clerk.

1. **Notify patient of potential future contact** (quality assurance, research, pharmacy issues, authorizations, etc.)

## Notify SBIRT Team. Leave a message for all patients encountered.

**For Patients NOT EXPERIENCING WITHDRAWAL**

* **Follow steps 4‐10 above.** If prescription given, use the home induction prescription. (BUP/Nx 4mg SL up to 3 times on Day 1, then 16mg SL QD\*). Review home induction handout.

## Referral for treatment. Notify SBIRT Team. Leave a message for all patients encountered.

\* Confirm specific formulations and pharmacies for each insurance type. See guidance sheet/call SBIRT team as needed (212‐263‐5915)

# DSM-5 Criteria for

v. 09/13/2018

# Opioid Use Disorder

|  |
| --- |
| **Pulse Rate:** *(at rest)* |
| 80 or below | 0 |
| 81‐100 | 1 |
| 101‐120 | 2 |
| >120 | 4 |
| **Sweating:** *(at rest)* |
| None | 0 |
| Subjective chills or flushing | 1 |
| Observed flushed or moistness on face | 2 |
| Beads of sweat | 3 |
| Sweat streaming off face | 4 |
| **Restlessness**: |
| Sits still | 0 |
| Difficult to sit still, but able to do so | 1 |
| Frequent shifting or moving limbs | 3 |
| Unable to sit still | 5 |
| **Pupil size:** *consider room lighting* |
| normal | 0 |
| Possibly larger than normal | 1 |
| Moderately dilated | 2 |
| Only rim of iris visible | 5 |
| **Bone or Joint aches**: *(if related to opioid withdrawal)* |
| None | 0 |
| Mild diffuse discomfort | 1 |
| Severe | 2 |
| Rubbing muscles or unable to sit still | 4 |
| **GI Upset:** *over last 1/2 hour* |
| None | 0 |
| Stomach cramps | 1 |
| Nausea or loose stool | 2 |
| Vomiting or diarrhea | 3 |
| Multiple episodes | 5 |
| **Tremor**: *observation of outstretched hands* |
| None | 0 |
| Feels tremor ‐ not observed | 1 |
| Slight tremor observable | 2 |
| Gross tremor or muscle twitching | 4 |
| **Yawning**: *Observation during assessment* |
| None | 0 |
| 1‐2 times | 1 |
| 3‐4 times | 2 |
| Several/minute | 4 |
| **Runny nose or Tearing eyes** |  |
| None | 0 |
| Nose stuffy or moist eyes | 1 |
| Running or tearing | 2 |
| Constantly running or tears streaming | 4 |
| **Gooseflesh** |  |
| None | 0 |
| Piloerection felt or hairs standing up | 3 |
| Prominent piloerection | 5 |
| **Anxiety or Irritability:** |
| None | 0 |
| Increasing irritability or anxiousness | 1 |
| Irritable/anxious observed | 2 |
| Cannot participate due to symptoms | 4 |
| **TOTAL SCORE****Score of ≥ 8 to initiate BUP** |  |

|  |  |  |
| --- | --- | --- |
| **Criteria/Symptoms present**(within 12 months) | **No (0)** | **Yes (1)** |
| Take more/longer than intended |  |  |
| Desire/unsuccessful attempts to quit use |  |  |
| A great deal of time taken by activities involved in use |  |  |
| Craving, or a strong desire to use opioids |  |  |
| Recurrent opioid use resulting in failure to fulfill major role obligations |  |  |
| Continued use despite having persistent social problems |  |  |
| Important activities are given up because of use |  |  |
| Recurrent opioid use in situations in which it is physically hazardous (e.g. driving) |  |  |
| Use despite knowledge of problems |  |  |
| \*Tolerance(Does not count if taken as prescribed) |  |  |
| \*Withdrawal(Does not count if taken as prescribed) |  |  |
| **TOTAL SCORE** |  |

**Interpretation of OUD Severity:** Mild: 2‐3 symptoms; Moderate: 4‐5 symptoms; Severe: 6‐11 symptoms \***Need ≥4 criteria to start BUP\***

# Clinical Opiate Withdrawal Scale (COWS)

**Contact the SBIRT‐ Addiction Team**

They can meet with patients for motivational enhancement and naloxone training. They can assist with referrals and prescribing/pharmacy issues. For patients needing referrals overnight, leave message containing patient’s contact information referral help (to be addressed the following morning).

**212‐245-2665**

**Patients may call the SBIRT team patient line after their visit for assistance at 646‐501‐8321.**