

Identify patient with possible Opioid Use Disorder (OUD)

- Contact EIP: Can consult through unit clerk by clicking Epic link. If no answer, please call to leave a message with **patient's name, MRN, reason for consult** for ~ next-day EIP action:
 - UCMC 817-5212; Epic message inbox
 - WCH 298-3515; Epic message inbox
- MAT Education

Comfort Meds

- Clonidine 0.1-0.2 mg PO tid (#9), for restlessness
- Naproxen 500 mg PO qd (#3), for myalgia
- Ondansetron ODT 4-8 mg PO q6 hr PRN (#12), for nausea

Is patient craving and/or in withdrawal?
CAUTION if Naloxone received w/in last 12 hrs

Comfort Meds + Bup

- Clonidine 0.1-0.2 mg PO tid (#9), for restlessness
- Naproxen 500 mg PO qd (#3), for myalgia
- Ondansetron ODT 4-8 mg PO q6 hr PRN (#12), for nausea
- **Consider [Bup at home](#) (See page 2)

MAT Interest

Calculate COWS score

COWS < 8
Patient agrees to observation until COWS ≥ 8 ?

COWS ≥ 8

No

COWS ≥ 8

Yes

- Contraindications:**
- Long-acting opioid (methadone) w/in 48 hrs
 - Evidence of liver disease (LFTs not required)
 - Any evidence of decompensated psychiatric illness
 - Allergic

COWS ≥ 8

- Buprenorphine 4 mg sublingual (max total ED dose 16 mg)
- [Contraindications](#)
- Caution if any opioid w/in 12 hrs
- If COWS ≥ 13 consider starting with [buprenorphine 8mg sublingual](#) as this represents moderate/severe withdrawal (max total dose in ED 16 mg)

Reassess COWS hourly until COWS ≥ 8

Reassessment after buprenorphine
Observe 45 - 60 minutes then recalculate COWS

Disposition
Admission or Discharge

Admission

- Standard admission process
- Place order for [IP consult to addiction services](#)

COWS ≥ 8

COWS ≥ 8

COWS ≥ 8

Buprenorphine 4 mg sublingual
Maximum total dose 16 mg in ED

Discharge

Confirm discharge planning with EIP if available (otherwise leave message "next day follow-up available?")

Next day FU available?

No

Waivered Provider?

No

Yes

No Waivered Provider

- Consider return to ED for redosing of buprenorphine daily up to 72 hrs
- Consider placement in CDU

Waivered Provider

RX Buprenorphine-naloxone 8-12 tabs
(2 tab SL qd x 2 day)

Referral Options

- RX Naloxone
- Referral options: document referral in ED Provider note and discharge instructions
 - [Early intervention Program](#)
 - [UC Addiction Sciences](#)
 - [Brightview](#)
 - [Talbert Engagement Center](#)
 - [Center for Addiction Treatment](#)

(See page 2 for Referral Details)

No MAT interest

Referral

Referral

Admission

Discharge

Yes

Yes

Referral

Referral options

Early Intervention Program:

EIP can be called for risk-reduction counseling, linkage to care and addiction services

UC Addiction Sciences

- If patient is interested in UC ASD, order Chemical dependency Amb referral to assist with outpatient follow-up.
- UC ASD is available Mon-Fri 7:30AM 9:00AM for walk in appointments at Suite 202, 3131 Harvey Avenue, Cincinnati, OH.
- ASD must be notified of appointment at 513-585-9722. Leave a message after hours

Brightview

- 24/7 hotlines available
- Provider hotline: 513-873-1218
- Patient hotline: 513-834-7063

Talbert Engagement Center

- 24/7: Call 513-338-8738
- 3009 Burnet Ave, Cincinnati, OH 45219
- *Patient must provide discharge papers to Talbert with MAT administration time documented.
- WEEKENDS: Will require patient commitment to stay as inpatient until Monday morning. MAT will be provided until formal assessment.

Center for Addiction Treatment

- Call 513-381-6672; 830 Ezzard Charles Dr, Cincinnati, OH 45214
- Open 24 hours
- All referrals must be documented in Provider Note and Discharge Instructions

A Guide for Patients Beginning Buprenorphine Treatment at Home

Before you begin you want to feel very sick from your withdrawal symptoms

It should be at least . . .

- 12 hours since you used heroin/fentanyl
- 12 hours since snorted pain pills (Oxycontin)
- 16 hours since you swallowed pain pills
- 48-72 hours since you used methadone

You should feel at least three of these symptoms . . .

- Restlessness
- Heavy yawning
- Enlarged pupils
- Runny nose
- Body aches
- Tremors/twitching
- Chills or sweating
- Anxious or irritable
- Goose pimples
- Stomach cramps, nausea, vomiting or diarrhea

Once you are ready, follow these instructions to start the medication

DAY 1:

8-12mg of buprenorphine

Most people feel better the first day after 8-12mg. (Dosing depends on how early on the first day you started)

DAY 2:

16mg of buprenorphine

Step 1.

Take the first dose

Wait 45 minutes

4mg

45 minutes

- Put the tablet or strip under your tongue
- Keep it there until fully dissolved (about 15 min.)
- Do NOT eat or drink at this time
- Do NOT swallow the medicine

Step 2.

Still feel sick? Take next dose

Wait 6 hours

4mg

6 hours

Most people feel better after two doses = 8mg

Step 3.

Still uncomfortable? Take last dose

Stop

4mg

Stop

- Stop after this dose
- Do not exceed 12mg on Day 1

Take one 16mg dose

Most people feel better with a 16mg dose

16mg

Repeat this dose until your next follow-up appointment

If you develop worsening symptoms while starting buprenorphine before your scheduled outpatient appointment return to the emergency department