

Buprenorphine/Naloxone (Bup/Nal) Initiation in Emergency Departments & Urgent Care Centres Program



What is opioid use disorder?

Opioid use disorder (OUD) is a problematic pattern of opioid use that leads to clinically significant impairment or distress. OUD includes the use of synthetic and/or naturally derived opioids, whether prescribed or illegally obtained. Having OUD can be a chronic and life-threatening condition.

How can OUD be treated?

For many individuals who live with OUD, there are prescription medications that can help, such as buprenorphine/naloxone ('bup-nal', trade name: Suboxone®). When taken properly, this medication reduces cravings and withdrawal symptoms. It helps people feel normal and use opioids less often and in smaller amounts. Once on a stable dose, some people can stop taking opioids altogether.

What is the Buprenorphine/Naloxone Initiation in ED program?

Many individuals who live with OUD visit emergency departments (ED) because of an overdose, withdrawal symptoms, or other issues related to opioid use. The **Emergency Strategic Clinical Network™** has implemented a province-wide strategy to screen and initiate bup-nal for eligible ED patients. The treatment program involves 3 steps:

- 1. Screen** – appropriately screen patients for opioid use disorder in ED
- 2. Initiate** – initiate bup-nal for eligible patients in ED
- 3. Follow-up** – provide rapid follow-up at a community clinic or primary care for future dosing & care.

What are the expected outcomes?

- Enhanced access to evidence-based care
- Better coordination of care
- Improved patient experience and quality of life
- Decreased morbidity and mortality

What work is under way?

The roll-out of the program began in May 2018, implementing the program at all EDs in Alberta by March 2020.



How to get in touch with us?

For more information, contact emergency.scn@ahs.ca and watch for our tweets through our Twitter account.

[@EMERGENCY_SCN](https://twitter.com/EMERGENCY_SCN)



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Program protocol main steps:

Screen



1. Screen and identify appropriate ED patients who live with OUD that have a desire to quit or reduce opioid use.
2. Determine sufficient TIME since LAST opioid.
3. Perform the Clinical Opiate Withdrawal Scale (COWS) to determine if patient is in mild (COWS <12) or moderate withdrawal (COWS ≥12).

Initiate



*IF the patient is eligible for **ED induction** (sufficient time since last opioid use and COWS score ≥ 12) please see the ordered dosing details. Repeat the COWS score after 1 hour. If the COWS remains the same or improves, the next dose can be provided.*

During the initiation phase, the clinician must observe for signs of precipitated withdrawal (marked worsening symptoms of opioid withdrawal) and notify the MD/NP



Provide the patient with bup/nal doses to take PRN at home.

*IF the patient is eligible for **HOME induction** (insufficient time since last opioid use and/or COWS score < 12) provide the patient with bup/nal doses to take PRN at home.*

Follow-Up



1. Provide discharge teaching and the applicable Patient Information Sheet: Discharge instructions.
2. Confirm Take Home Naloxone Kit and associated teaching provided.
3. Confirm referral form and ED chart is completed and faxed to the selected Opioid Use Disorder Treatment Clinic.
4. Provide a copy to the patient.

