PROTOCOL: These guidelines for MAT Induction Protocol outline the two methods to be used during the induction phase when an individual begins medication therapy using buprenorphine.

PURPOSE: This protocol outlines the guidelines for prescribing buprenorphine for those addicted to either long- or short-acting opioids.

SCOPE: Medical providers who are waivered to prescribe buprenorphine.

DEFINITIONS: MAT = Medication Assisted Treatment

PROCEDURE(S):

Office-Based Induction

1. Patients will meet with a MAT provider to assess options for MAT, assess risks for participation, review MAT program, and discuss the induction process.

2. Patient will be given a Suboxone prescription to be filled at the patient’s pharmacy of choice. The patient is not to take the medication until seen in the office for induction. The prescription should be written for:

   a. Suboxone 8mg/2mg film. Take 1 film SL daily as instructed for induction. Dispense #8.

3. The patient and Medical Provider will determine the date of the induction and allow for 2-4 hours of time in the office.

4. The patient will be instructed to stop all full agonist opiates 24-48 hours prior to the induction date as determined by the Medical Provider based on type of full agonist opiate.

5. Induction procedure based on the following algorithms:
Day 1: Induction for Patients Physically Dependent on Short-Acting Opioids (e.g., Heroin)

- Patient dependent on short-acting opioids?
  - YES
  - Withdrawal symptoms present 12-24 hours after last use of opioids?
    - NO: Stop patient not dependent on short-acting opioids
    - YES
    - Give 4 mg buprenorphine and observe 2+ hours
    - Withdrawal symptoms continue or return?
      - NO
      - Yes: Withdrawal symptoms returned?
        - NO: Daily dose established
        - YES
        - Repeat dose up to 8-16 mg for the first day
      - YES: Daily dose established
      - Manage withdrawal symptomatically

Days 2+: Buprenorphine Induction for Patients Physically Dependent on Short- or Long-Acting Opioids

- Patient returns to the office on 8 mg
  - Yes
  - Withdrawal symptoms present since last dose?
    - No: Maintain patient on 8 mg/day; daily dose established
    - Yes
    - Give buprenorphine 10-12 mg
    - Withdrawal symptoms continue?
      - No: Withdrawal symptoms returned?
        - No: Daily dose established
        - Yes
        - Administer 2-4 mg doses up to maximum 16 mg total for second day
      - Yes: Daily dose established
      - Manage withdrawal symptomatically

Return next day for continued induction; start with Day 2 total dose and increase by 2-4 mg increments [Max daily dose: 32 mg]
Day 1: Induction for Patients Physically Dependent on Long-Acting Opioids (e.g., Methadone)

- Patient dependent on long-acting opioids?
  - YES
  - Taper to 30 mg/day of methadone (or equivalent)
  - 48+ hours after last dose, give 4 mg buprenorphine and observe 2+ hours
  - Withdrawal symptoms continue or return? NO
  - Withdrawal symptoms return? NO
    - Daily dose established
    - Daily dose established
    - Repeat dose up to 8-16 mg for the first day
  - Withdrawal symptoms relieved? NO
    - Manage withdrawal symptomatically
    - Follow Day 2+ induction guidelines for physically dependent patients (Figure 2)

Day 1: Induction for Nonphysically Dependent Patients

- Patient has history of opioid dependence? NO
  - Do not proceed
  - Current physical dependence on opioids?
    - YES
      - Follow induction guidelines for physically-dependent patients (see Figures 1 & 3)
    - NO
      - Give 2 mg in office, observe 2+ hours
      - Opioid agonist side effects (i.e., nausea, vomiting)? NO
        - Follow Day 2+ induction guidelines for non physically dependent patients (Figure 5)
        - Proceed with non-agonist treatment (i.e., psychosocial tx with or without naltrexone)
      - YES
        - Administer symptomatic treatments
        - Wait 24 hours: Reassess need for agonist therapy
        - Agonist therapy required?
          - YES
            - Proceed with non-agonist treatment (i.e., psychosocial tx with or without naltrexone)
          - NO
In-Home Induction

1. Provider will explain the induction process to patients.
2. Providers will provide patients the in-home induction sheet.
Day 1 Starting Suboxone® (buprenorphine/naloxone)

Are you in withdrawal? Before starting Suboxone® (buprenorphine/naloxone) you need to be in withdrawal (dope-sick). Use the ‘SOWS’ withdrawal scale on the back page to determine how bad your withdrawal is. Wait until your withdrawal score is 17 or more to begin.

- Do not take with alcohol or sedatives.
- Do not take more than 12 mg total on Day 1.
- Do not inject. You will be dope-sick if you inject.
- My doctor/nurse practitioner and I agree on this treatment plan.

1st Dose  Take your 1st dose

- Keep medication under your tongue until fully dissolved (this can take up to 10 min) or it will not work. Do not chew or swallow.
- Do not eat, drink, or swallow while it is dissolving.
- Contact your provider to let them know you took your 1st dose.

It usually takes 20-45 min for the medication to start to work. Wait 1-3 hours before your 2nd dose.

If you feel a lot worse → Contact your provider if your symptoms feel a LOT WORSE. This happens when you start before you are in enough withdrawal and is called “precipitated” withdrawal. Talk to your provider about managing symptoms and next steps.

2nd Dose  1-3 hours after 1st dose

How do you feel?

Still feeling withdrawal (dope-sick) symptoms → Take a 2nd dose (keep under tongue until fully dissolved).

Better → Check in with yourself later.

3rd Dose  1-3 hours after 2nd dose or later in evening

How do you feel?

Still feeling withdrawal (dope-sick) symptoms → Take a 3rd dose (keep under tongue until fully dissolved).

Better → Check in with yourself later, you may not need another dose.

Most people feel much better by the end of the first day. Contact your provider if you are still feeling bad withdrawal or feel like using and have taken the daily max of 12 mg.

How many doses did you take today?

<table>
<thead>
<tr>
<th>1st Dose</th>
<th>2nd Dose</th>
<th>3rd Dose</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

The total for Day 1 is your starting dose for Day 2. Whether you started treatment at home or in the clinic, most providers will ask you to start Day 2 with a clinic visit. Take this sheet with you to your next appointment.

Next appointment info: Date: ______________ Time: ______________ Location: ______________
**Additional Information for Starting Suboxone® (buprenorphine/naloxone)**

**Knowing when to start**

Suboxone® (also known by generic name buprenorphine/naloxone) helps you manage opioid withdrawal symptoms and cravings.

You need to be in withdrawal (dope-sick) to start or your symptoms will get a lot worse – the more in withdrawal you are the better.

You know your symptoms. Wait until you are in moderate to severe withdrawal (dope-sick) before you begin. You can use the SOWS scale (below) to help you see if you are in enough withdrawal to start. You can also check your SOWS score throughout the day. You should feel better and see your SOWS withdrawal scores decrease throughout the day. If your SOWS withdrawal score increases and your symptoms get worse, contact your provider.

**Subjective Opiate Withdrawal Scale (SOWS)**

Please score each of the statements according to how you feel right now on a scale of 1 to 4. Add up all your scores to get your total SOWS withdrawal score.

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Score</th>
<th>Score</th>
<th>Score</th>
<th>Score</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel anxious</td>
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<tr>
<td>I feel like yawning</td>
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<tr>
<td>I am perspiring</td>
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<td>My eyes are teary</td>
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<td>My nose is running</td>
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<td>I have goosebumps</td>
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<td>I am shaking</td>
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<tr>
<td>I have hot flushes</td>
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<tr>
<td>I have cold flushes</td>
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<tr>
<td>My bones and muscles ache</td>
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<td>I feel restless</td>
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<td>I feel nauseous</td>
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<tr>
<td>I feel like vomiting</td>
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<td>My muscles twitch</td>
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<td>I have stomach cramps</td>
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<tr>
<td>I feel like using now</td>
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</table>

My SOWS score (total score):

If your SOWS withdrawal score is **17 or more** → You are ready to start, follow the instructions on page 1.
If your SOWS withdrawal score is **less than 17** → Check your score again in 1-3 hours.


**Notes:**