CHECKLIST: PRIOR TO BUPRENORPHINE/NALOXONE INDUCTION

Patient Name: _____ Date: _____

- □ Review and sign treatment agreement and consents.
- □ Reinforce to patient the need for frequent appointment adherence, and establish whether this is realistic. If patient states that it is not manageable, address with the team prior to initiating treatment.
- $\hfill\square$ Put counseling services in place prior to the patient starting treatment.
- $\hfill\square$ Ensure that UTS is negative for all illicit substances, other than opioids.
- □ Ensure negative pregnancy test for women of child-bearing age.
 - If positive hCG, OBAT team will immediately assist patient engagement with appropriate OB providers.
- □ If patient is referred or presents from detox, ensure he/she has discharge paperwork with medication protocol. Confirm what was prescribed (benzodiazepines or methadone) while in detox. These substances may be present in UTS if induction occurs shortly after discharge from detox.
- □ Consult with waivered provider after initial visit, and obtain the prescription from the prescriber.
- □ After OBAT team review, schedule induction per protocol in collaboration with patient and team: date, time, prescription, and clinic schedule.
- □ Telephone patient to review induction plan, and fax prescription to pharmacy for patient to pick up on the day of induction.
- □ Patient presents to clinic for induction.

Nurse Case Manager (Print Name)

Signature

Date

Witness (Print Name)

Signature

Date

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