MAT SUDCM
Check List, Smart Phrases, & Handouts

.SA11MATSUDCM

Click on any of the following:
- **Intake**
- **1x1**
- **BUP Refill**
- **MAT Group**
- **Case Management** (Non – MAT patient)
- **CCN** (Case Conference Note)
- **CC** (Care Coordination for all non-face to face encounters)
- **Phone**
- **ER Referral**

Intake Note	Check
CHECK INSURANCE (can check yourself or call registration to check for you), Assist patient if there are issues	
EXPLAIN MAT PROGRAM (TIERS I, II, III, IV, V, X, Y Refills, Relapse, IBH, MAT GROUP, Etc)	
Educate on Dangers of mixing Sub, Benzo, Alcohol, depressants	
Review and sign Tx agreement	
Review and sign MAT consent form. Click on **registration/ADT,** click on **New**, click on **documents**, click on type of document **SA11 E-Sig Consent for the Exchange of Medical and Substance Use Disorder - English**, click on **E-sign**, Click on accept, click on **Status** (signed), Click on location put which clinic it was signed at, , click on **finish**.	
Click on **Encounter. Make sure right Patient -** Check DOB, Name, Address, PCP (if need to check chart before clicking on Encounter or check patient list for right info) **Make sure right Date, Office Visit, provider** you**, make sure right clinic, Emeline= SCZ SC clinic, HPHP=SCZ HPHP clinic, Watsonville= SCZ WATS clinic**	
Visit opens in **Notes**, click on don't share with patient in top right corner of note should be a **purple heart**	
Click on **Rooming** and enter **Chief Complaint:** Medication Assisted Treatment (MAT) 1587, **Comment:** Intake If this pt is coming from SSP then another Chief Complaint: Syringe Service Program can be added and for comment section put Referral.	
Click on **Quick Questions**, in visit program area put **371**, Click on **Plan**, **Visit Diagnosis Area** click on **problems** & pick appropriate Diagnosis. Click on **LOS**, click **NO Charge**, in **Auth Provider** put MAT prescriber.	
Scroll down to **PLAN**, Patient goals click on **+ add** Click on **Case Manager other,** then add goal, click on **patient stated** box, repeat for multiple goals for treatment. Be specific, use SMART for these Treatment goals	
Click on **History** tab and complete	
Once you get to the **Social documentation** in the history section type **.SA11MATSOCDOC** fill out smart phrase using **F2.**	
Once you complete History go to your note and click on don't share with patient in top right corner should be a **purple heart** and then type in note section **.SA11MATSUDCM and** click on **Intake** all info that you have documented from Plan, History, and Social Documentation should pre populate into intake. Finish rest of intake using **F2**. When you get to bottom of the note for plan click on all the sections that are needed. Pt should have an appt with a therapist (IBH), Next appt to see provider, Next group, Labs requested, and anything else you made referrals for, etc. Once complete **Sign Encounter Note**	
Request Labs, UDS, and Pregnancy test if applicable through Nurse/Provider. Send message through Epic **.MATLABS** or talk to provider/nurse yourself.	
Other Consents if Needed (SLE, Family, Probation, Social Worker, Rehab, family, Etc)	
Add **FYI** flag, put **MAT Tier 1** In the FYI note area type in **.SA11MATTier1** fill out ******* if you don't have answer put **DUE,** you can coordinate with nurse/provider to put in right date for CURES and Tx agreement you would have the right date.	
Next click on **CARE TEAMs** tab on left side. In the search for **team member** put the S*UDCM* that will be assigned to pt (which could be you). in relationship box put **Medication Assisted Treatment (MAT) Specialist (aka mat).** Then add in the same section Prescriber that will be prescribing and in relationship section Then click accept. **Medication Assisted Treatment (MAT) Prescriber. PCP can be different then MAT prescriber.**	

MAT Intake

Reviewed MAT Program: Yes
Reviewed MAT consent and signed: Yes
Reviewed Treatment agreement and signed: Yes
Reviewed medication buprenorphine/naloxone (Suboxone), potential side effects, potential lethal interaction with benzodiazepines and alcohol, safe administration and storage. Written information also provided to patient.
Patient verbalizes understanding of information provided: Yes
Is patient pregnant? N/A
History
Smoking Status

- Former Smoker
- Packs/day: 1.00
- Years: 43.00
- Types: Cigarettes
- Start date: 1/1/1973
- Quit date: 1/3/2019

Smokeless Tobacco
- Never Used

History
Alcohol Use   No
        Comment: Sober since 1/1/1989

History
Drug Use

- Frequency: 4.0 times per week
- Types: heroin, methamphetamine, IV
        Comment: Uses Methamphetamines because he cannot afford Dextroamphetamine prescription

History
Sexual Activity

- Sexual activity: Not Currently
- Partners: Female
        Comment: last partner 2012

MAT Intake: Social Documentation
Intake Date: 7/4/19
Case Manager: Danny Contreras
What is the longest amount of time you have been sober? 3 years, 2001-2004, Pt reports he has been off Heroin since 9/21/17 with a slip on 4/10/18. Pt says he has been using suboxone from clinic in Alameda county, since back in Santa Cruz buying off the streets till, he could get back into HPHP MAT program.
How or what did you do to maintain sobriety at that time? 2004-2008, scared that might die soon because of a court hearing that said he could not get clean and would die soon from drug use.
What three things motivate you to stay sober?
#1: Stay sober and do good as revenge for x-employer firing him.
#2: See what happens next.
#3: Wants to live life not as a junkie.

Drug Use History:

9 years old smoking weed, LSD at 10 years old, snorting cocaine at 18 years old, smoking and snorting meth at 18 years old. Started smoking heroin at 38 and then IVDU at 40.

Have you ever overdosed? No

What are you currently using at this time (Drug - Dose - Frequency - Method)?

Methamphetamines/ Amphetamines Dose: .1/8 of a gram, several times a week, Snort

Other: Marijuana Dose: 5 joints, several times a day, Inhaled,

Do you have a history of any other addictive behaviors? No

MAT History:

*Document source, dosage, effectiveness, timeframe

Methadone - Janus 2008 – 2010 For 2 years 156 mg, pt reports he forced Janus to taper him off, didn't like it

Suboxone - HPHP 9/21/17 - 7/3/2018 pt reports 24 mg a day

Mental Health History:

Have you ever been diagnosed with any mental health condition?

Yes, Depression, Anxiety and Attention Deficit Disorder

Are you currently seeing a psychiatrist, psychologist or counselor? No

Have you ever been hospitalized for mental health issues? No

Have you ever attempted to end your life or hurt yourself? No

Do you currently have thoughts of hurting yourself? No

Living situation: Homeless

Transportation: Car

Employment: Unemployed, has worked as a IHSS worker**,** Medical Assistant Certification

Criminal History:

Is patient on Parole/ Probation? No

History of Incarceration? Yes, What is longest amount of time incarcerated? 9.5 months

Medical Conditions:

Patient Active Problem List

Diagnosis

- Polysubstance dependence including opioid type drug without complication, episodic abuse (HCC-CMS)
- Severe major depression (HCC-CMS)
- Cannabis use disorder, moderate, dependence (HCC-CMS)
- Amphetamine dependence (HCC) -Client reports self-treated for ADD

Additional Medical Conditions: None reported

Current /Past Medications:

Current Outpatient Prescriptions

Medication	Sig	Dispense	Refill
• buprenorphine-naloxone (SUBOXONE FILM) 8-2 mg SL film	Place 1 Strip under the tongue 3 (three) times daily Bill State Medical	21 Each	0

Additional Medications: None only suboxone off the streets.

What Readiness to Change Stage is patient in: Preparation

What are patient's goals for Treatment?

- Connect with CFET *(pt-stated)*
- Find housing *(pt-stated)*
- Get a job *(pt-stated)*
- Get off meth *(pt-stated)*

Plan:

- Scheduled MAT group – 7/4/19 at HPHP at 1:30 pm for SMA group.
- Pt to provide POC UDS today and complete LABS
- Provider to prescribe to bridge him to SMA on Tuesday at HPHP

1x1 : SUD counseling/ Case management	Check
Click **Encounter, Make sure right Patient** - Check DOB, Name, Address, PCP (if need to check **CHART** before clicking on Encounter, or check patient list for right info)	
Make sure right **Date**, **Interim or Office visit, provider you**, and make sure **right clinic**	
Visit opens in **Notes,** click on don't share with patient in top right corner of note should be a **_purple heart_**	
Click on R**ooming** and enter **Chief Complaint**: **_Medication Assisted Treatment (MAT) 1587_**, In **Comment:** **_1x1_**	
Click on **Quick Questions,** in visit program area put **371,** Click on **Plan, Visit Diagnosis Area** click on **problems** & pick appropriate **Diagnosis**. Click on **LOS**, click **NO Charge**, in **Auth Provider** put MAT prescriber.	
Scroll down to **PLAN,** update goals and current status.	
Click on **Notes** Type **.SA11MATSUDCM,** Select **1x1** F2 through note, in Assessment part of SOAP note **.SA11MATCHECKIN** if applicable, if not just put what tier they are on. Then click on **Accept** when finished with note.	
Click on **Sign Visit** to close note.	

Chief Complaint: Medication Assisted Treatment   **Comment:** 1x1

Subjective/ Objective: Met with pt {SA11 POS:23075} for a 1x1 session. ***

Assessment: Tier {SA11 MAT Tiers:22582}.
.SA11MATcheckin or .SA11MATSMACHECKIN (only if applicable)
MAT Medication:
{SA11 MAT Tx Meds:22585}
{SA11MATSYMPTOMSOPTIONS:24444}
Have you been drinking any alcohol? {Yes Comment/No Default:21071::"No"}
Do you have Narcan? {YES NO:18689}

Plan:
Patient's progress in Treatment goals:
Goals Addressed

- Follow agreed upon PCP/MAT/IBH provider recommendations.
- Pt to return for next scheduled group/ 1x1 session determined by MAT tier.
- {SA11 MAT Plan:17817}

Duration of encounter: ***

BUP Refill Visit (10-20 Min including documentation)	Check
Click on **Encounter**. Can be interim note, telephone call, or office visit. (depending on situation)	
Make sure right Patient - Check DOB, Name, Address, PCP (if need to check chart before clicking on telephone call, or check patient list for right info)	
Chief complaint: *Medication Assisted Treatment (MAT) 1587* **Comment section**: Bup refill	
If office visit and patient present, then **order UDS** and collect from patient. Order breathalyzer if Prescriber wants it. Click **order entry** and type in drug screen, select appropriate test, then click **accept**. Enter results in **enter/edit results**.	
Click on **Notes**, Click on **NEW NOTE** click on **don't share with patient** in top right corner should be a **purple heart**. Type in **.SA11MATSUDCM** and select **BUP Refill** Visit. Complete note using F2 to scroll through and answer all questions	
Assess/ask patient regarding their dosing each day along with their symptoms and how they currently feel. Assess for any negative side effects or allergic reactions. Consult with provider if needed.	
Click on Take Action tab, Click on Reorder (circle)	
Go to More tab and click, send message to staff, send to Prescriber, in note section put I did a refill request please approve.	
Notify provider if UDS positive for any substances other than BUP and THC	
Give patient next appointment to see provider/nurse.	
Click on **Sign Encounter** once everything is completed to close office visit or telephone call.	

Chief Complaint: Medication Assisted Treatment   **Comment:** Bup Refill

BUP Refill
@NAME@ is a @AGE@ @SEX@ who presents for *******
@CHIEFCOMPLAINTN@, @PATFYIFLAGS@, @PATIENTCARETEAM@

{SA11 MAT Tx Meds:22585}
Is patient attending group/one-on-one? {YES NO:18689}
Date of last group attended: ***
Comments: {N/A:24265}
Side Effects: {SIDE EFFECTS_OPIATE RELATED:10523}
How are side effects being addressed? ***
Urine Drug Screen (POCT-LV5598):
Sent out for confirmation: {YES NO:18689}
Last Breathalyzer (LV5772):

Plan:
{SA11 MAT NEXT VISITS:24457}

Duration of encounter: ***

MAT Group Note: (MAT groups)	Check
Click **Encounter**, Make sure right Patient - Check DOB, Name, Address, PCP (if need to check CHART before clicking on Encounter, or check patient list for right info)	
Make sure right **Date**, **Office visit**, provider **you**, and make sure **right clinic**	
Visit opens in **Notes**, click on don't share with patient in top right corner of note should be a **purple heart**	
Click on **Rooming** and enter **Chief Complaint:** Medication Assisted Treatment (MAT) 1587, **Comment:** Group for non-mat put **Chief Complaint:** Group Counseling (415) **Comment:** Group	
Click on **Quick Questions**, in visit program area put **371**, Click on **Plan**, **Visit Diagnosis Area** click on **problems** & pick appropriate Diagnosis. Click on **LOS**, click **NO Charge**, in **Auth Provider** put MAT prescriber.	
Scroll down to PLAN, update goals and current status.	
Click **Notes** Type **.SA11MATSUDCM**, Select **Group**, F2 through note. Click on Accept when finished with note.	

Chief Complaint: Medication Assisted Treatment   **Comment:** Group
If it is for a Non-MAT patient put this
Chief Complaint: Case Management **Comment:** Group

Group Name: MAT Group
Primary Facilitator: @ME@
Secondary Facilitator(s): ***
Duration of Group: 60 minutes
Group Topic: ***
Individual's Participation and Progress: {NPH GROUP PARTICIPATION/PATIENT RESPONSE:17393}.
What Readiness to Change Stage is patient in? {SA11 MAT Readiness to Change:17816}
Patient's progress in Treatment goals?
@GOALSADDRESSEDR@
Plan:
- Follow agreed upon PCP/MAT/IBH provider recommendations.
- Pt committed to return for next scheduled group session determined by MAT tier.
- Continue to support patient commitment and provide other supportive resources.

Case Management (non-MAT patient): (1x1's, SUD services not MAT, etc)	Check
Click Encounter, Make sure right Patient - Check DOB, Name, Address, PCP (if need to check CHART before clicking on Encounter, or check patient list for right info)	
Make sure right Date, Interim or Office visit, provider you, and make sure right clinic	
Visit opens in Notes, click on don't share with patient in top right corner of note should be a **purple heart**	
Click on **Rooming** enter **Chief Complaint:** *Case Management (MAT) 158*, **Comment:** 1x1, Brief ASAM	
Click on **Quick Questions**, in **visit program area** put 371, Click on **Plan**, **Visit Diagnosis Area** click on problems & pick appropriate Diagnosis. Click on **LOS**, click **NO Charge**, in **Auth Provider** put MAT prescriber.	
Scroll down to **PLAN**, update goals and current status. Click on **Sign Visit** to close note.	

Chief Complaint: Case Management **Comment:** 1x1, Brief ASAM

Subjective/ Objective: Met with pt {SA11 POS:23075} for a 1x1 session. ***
Assessment: Case Management Services
Plan:
- ***

Case Conference Note	Check
Click on **Encounter**. Type **Interim** note and click on it.	
Make sure right Patient - Check DOB, Name, Address, PCP (if need to check chart before clicking on telephone call, or check patient list for right info)	
Chief complaint: Medication Assisted Treatment (MAT) 1587 **Comment section**: CCN	
Click on Notes, then click New note. Click on don't share with patient in top right corner should be a **purple heart,** t*yp*e in **.SA11MATSUDCM** select **Case Conference Note**. Complete note using F2 answer all questions.	
Click on **Sign Encounter** once everything is completed, to close Encounter note.	

Chief Complaint: Medication Assisted Treatment   **Comment:** CCN

Case Conference Note
Attendance: Click on all in attendance, ***
Issue: ***
Plan:
- ***

Care Coordination: (for all non-face to face encounters, MAT or non-MAT)	Check
Click on **Encounter**	
Make sure right Patient - Check DOB, Name, Address, PCP (if need to check chart before clicking on Encounter or check patient list for right info)	
Make sure right **Date**, **Interim notes**, **provider you**, and make sure **right clinic. Emeline= SCZ SC clinic, HPHP=SCZ HPHP clinic, Watsonville= SCZ WATS clinic**	
Chief Complaint: Medication Assisted Treatment (MAT) 1587 or Case Management (MAT) 158, **Comment section**: CC	
Note: Click on **don't share with patient** in top right corner should be a **purple heart**. Then type **.SA11MATSUDCM** select **CC** F2 through note, make sure to document anything that is needed after Individual's Participation and Progress: *** then click on **Accept** when finished with note	
Click on **Sign Visit** to close note	

Chief Complaint: Medication Assisted Treatment   **Comment:** CC
If it is for a Non-MAT patient put this
Chief Complaint: Case Management **Comment:** CC
CC (Care Coordination)
Care Coordination: ***
Plan:
- ***

Phone (Call/Vm/Text/ Pharmacy/etc)	Check
Click on **telephone call** (this type of encounter has to be done same day)	
Make sure right Patient - Check DOB, Name, Address, PCP (if need to check chart before clicking on telephone call, or check patient list for right info)	
If it is a Text Message **Select Other**	
Select **Incoming** or **Outgoing, time, date**	
Select **person** calling and **phone number** call is coming from or to	
Contact Comments: Brief Explanation of Phone call	
Reason for Call: Medication Assisted Treatment (MAT) 1587 **Comment:** section put what you're doing ex: pharmacy issue. Should be no more than 3 words. If it is for a Non-MAT patient related phone call put this **Chief Complaint:** Case Management **Comment:** section put what you're doing should only be 3 words concise.	
Click on Notes, then click New note. Click on don't share with patient in top right corner should be a **purple heart**, type in **.SA11MATSUDCM** and select **Phone**. Complete note using F2 to scroll through and answer all questions.	
Click on **Sign Encounter** to close telephone call	

==Chief Complaint: Medication Assisted Treatment   Comment: Phone?==
If it is for a Non-MAT patient phone call put this
==Chief Complaint: Case Management Comment: Phone?==

Phone Call/VM/Text
Summary of the Communication:
***
Plan:
- ***

ER Referral for MAT 5-10 min visit depending on situation	Check
Click on **Encounter**. Click on **office** note.	
Make sure right Patient - Check DOB, Name, Address, PCP (if need to check chart before clicking on telephone call, or check patient list for right info) and right clinic	
Chief complaint: Medication Assisted Treatment **Comment section**: ER Referral This can turn into an intake so you can put two chief complaints & comments Ex CC: MAT Comment: Intake	
Click on Notes, then click New note, click on **don't share with patient** in top right corner should be a **purple heart** then type in **.SA11MATSUDCM** select **ER Referral**. Complete note using F2 and answer all questions.	
Click on **Sign Encounter** once everything is completed to close office note.	

==Chief Complaint: Medication Assisted Treatment   Comment: ER Referral==

Pt referred by {SA11 LOCAL ER:29983} ER. ***

Plan:
{SA11 MAT LOCAL ER PLAN:29984}

MAT Smart Phrases and Codes

Shared Drive: \\scznas06\hsa\Clinics\MAT

Labs & UDS Codes orders:	Watsonville	Emeline	HPHP
UDS point of care	LV5598		
SWAB point of care			
HCG • Pregnancy Test	LV4971	LT683 in house / LV5997 POCT back office	LV5987
Send out for UDS for Confirmation if patient contest or clinical reason	LV4969 (pain 8)		
Breathalyzer • Only when requested by provider	LV5772		

.SA11 BUPRENORPHINE INITIAL (in Epic code 042403)
Search SA11
After visit Medications
HEROIN/OPIATE WITHDRAWAL PROTOCOL ORDER PANEL
.VASCULARLABORDER

This is <u>not sharing note</u> with pt: [Share w/ Patient]   This is <u>sharing the note</u> with pt: [⚠ Share w/ Patient]

Initial Provider Visit:
.SA11MATINITIALPROVIDERVISIT
Letters: .scconsentandagreementfortreatmentwithbuprenorphineandnalaxone or
.SCBUPRENORPHIONETREATMENTAGREEMENT
Withdrawal Medications:
AVS: .SUBOXONEINDUCTION or SUBOXONEINDUCTIONSPANISH (F2 through to adjust dose on instructions)
.SOWSSUBJECTIVEOPIATEWITHDRAWALSCALE = SOWS for home induction for patient
.ESCOWS = Clinical Opiate Withdrawal Scale (COWS)
Nurse Visit: .SA11MATNURSEVISIT
Vivtrol:
.VIVITROLPATIENTAGREEMENTCOUNSELING
.VIVITROLTREATMENTAGREEMENT

.SA11MATSMACHECKIN= is the MAT check in sheet
.SA11MATRECOVERYLOG = Paper for patient to show attendance of outside support groups
.MATLABS- initial labs for SUD CM
.SA11UDSPOCTLV5598= Last uds for POCT LV5598
.LASTUDSMAT= Last POCT UDS LV5598

FYI's:	Smart phrase for FYI	Status
Medication Assisted Treatment	.SA11MATTierInactive	Inactive after 6 weeks
Tier 1	.SA11MATTier1	Induction - 2 weeks
Tier 2	.SA11MATTier2	Early Treatment - 12 weeks (3months)
Tier 3	.SA11MATTier3	Stabilization - 12 weeks (3 months)
Tier 4	.SA11MATTier4	Maintenance - 6 months – 1 year
Tier 5	.SA11MATTier5	Continual Maintenance -1 year or more
Tier X	.SA11MATTierX	Referred to Janus HUB or at Janus
Tier Y	.SA11MATTierY	Receiving MAT services at another place

Clinic	Office	MAT Staff	
Homeless Person Health Project (HPHP)	831-454-2080	Nurse Jasmine Angelica Torres	831-201-2485 831-566-9347
Watsonville Health Center (WHC)	831-763-8400	Alejandro Monroy Andres Galvan	831-247-4193 831-227-9967
Santa Cruz Health Center (Emeline)	831-454-4100	Greg Goldfield Marissa Torres Adam Echols	831-331-6048 831-421-1033 831-400-6669
Health Services Manager for MAT program	831-454-4460	Danny Contreras	831-212-3498

Support for MAT Prescribers

Vanessa DeLaCruz: 831-454-4885/ 831-247-6057
Dimitri Bacos: 831-454-5017 / 323-474-4725
Sharon Gehringer: 831-235-3310
UCSF warm line- Ron Goldsmith: 1-855-300-3595
https://pcssnow.org/medication-assisted-treatment/