

## **APPROPRIATE USE CHECKLIST:**

BUPRENORPHINE-CONTAINING TRANSMUCOSAL PRODUCTS FOR OPIOID DEPENDENCE (BTODs)

This checklist is a useful reminder of the safe use conditions and monitoring requirements for prescribing BTODs.

## Required actions during each patient's appointment:

- Communicate and reinforce safe use conditions
- Express the importance of psychosocial counseling
- Screen and monitor patients to determine progress towards treatment goals

If a patient continues to abuse various drugs or is unresponsive to treatment, including psychosocial intervention, it is important that you assess the need to refer the patient to a specialist and/or a more intensive behavioral treatment environment.

Additional resource: Providers Clinical Support System for Medication Assisted Treatment: (<u>https://pcssnow.org</u>)

Use this checklist or other means (e.g. electronic health record) during the induction period to document that the safe use conditions listed have been completed. After the induction period, use the maintenance checklist on the next page.

INDUCTION CHECKLIST			
ASSESSMENT TO ENSURE APPROPRIATE USE		NOTES	
Date:			
CHECK	INDUCTION		
<ul> <li>Appropriate</li> <li>Diagnostic Criteria</li> </ul>	Verified patient meets <b>appropriate diagnostic criteria</b> for opioid dependence		
<ul> <li>Prescription Drug Monitoring</li> </ul>	Checked patient's prescription profile in the <b>Prescription Drug</b> <b>Monitoring Program</b> (PDMP), as appropriate		
Opioids/CNS Depressants	<ul> <li>Reviewed all medications (e.g., benzodiazepines, other opioids, CNS depressants) and illicit substances to assess for appropriateness of co-prescribing</li> </ul>		
□ Risks and Side Effects	<ul> <li>Discussed the risks and side effects described in professional labeling and Medication Guide with patient including</li> <li>potential for abuse and misuse</li> <li>potential for fatal additive effects with benzodiazepines and other CNS depressants, including alcohol</li> </ul>		
□ Conditions of Safe Storage	<ul> <li>Explained or reviewed conditions of safe storage of medication</li> <li>Reinforced importance of secure storage and keeping the medication out of the sight and reach of all others, especially children</li> </ul>		
<ul> <li>Naloxone for</li> <li>Opioid Overdose</li> </ul>	Discussed with patient and caregiver the importance of having access to naloxone if there are household members (including children), or other close contacts at risk for accidental ingestion or opioid overdose.		
□ Induction Doses	Provided induction doses under appropriate medical supervision		
□ Limited Amount of Medication	Prescribed <b>limited amount of medication</b> at first medical appointment <ul> <li>enough to last until next medical appointment</li> </ul>		
Professional Counseling	Assessed participation in <b>professional counseling</b> and support services <sup>1</sup>		
<ul> <li>Scheduled</li> <li>Next Medical</li> <li>Appointment</li> </ul>	<ul> <li>Scheduled next medical appointment at interval commensurate with patient stability</li> <li>Weekly, or more frequent, medical appointments are recommended for the first month</li> </ul>		

<sup>1</sup> Counseling and other services are important as part of a comprehensive treatment plan, but the provision of medication should not be made contingent upon participation in such services.



## Use this checklist or other means (e.g. electronic health record) to document that the safe use conditions listed have been completed for medical appointments following the induction period.

## MAINTENANCE CHECKLIST

MAINTENANCE CHECKLIST		
ASSESSMENT TO ENSU	JRE APPROPRIATE USE	NOTES
Date:		
СНЕСК	MAINTENANCE	
Naloxone for Opioid Overdose	Discussed with patient and caregiver the importance of having access to naloxone if there are household members (including children), or other close contacts at risk for accidental ingestion or opioid overdose.	
<ul> <li>Take Medication</li> <li>As Prescribed</li> </ul>	Assessed and encouraged patient to <b>take medication as prescribed</b>	
<ul> <li>Pill/Film</li> <li>Count/Dose</li> <li>Reconciliation</li> </ul>	Consider <b>pill/film count/dose</b> reconciliation	
Appropriateness of Dosage	<ul> <li>Assessed appropriateness of dosage</li> <li>Buprenorphine combined with naloxone is recommended for maintenance.</li> <li>Refer to product-specific prescribing information for dosing</li> <li>Dose should hold the patient in treatment and suppress opioid withdrawal signs and symptoms</li> </ul>	
Urine Drug Screens	Conducted <b>urine drug screens</b> as appropriate to monitor compliance with prescribed buprenorphine treatment plan or ascertain use of illicit substances	
<ul> <li>Prescription</li> <li>Drug Monitoring</li> <li>Program</li> </ul>	Checked patient's prescription profile in the <b>Prescription Drug</b> <b>Monitoring Program</b> (PDMP), as appropriate	
Professional Counseling	Assessed participation in <b>professional counseling</b> and support services <sup>2</sup>	
🗆 Benefits vs. Risks	Assessed whether <b>benefits of treatment with BTODs</b> outweigh risks	
□ Progress Toward Treatment Goals	<ul> <li>Assessed whether patient is making adequate progress toward treatment goals</li> <li>Considered results of urine drug screens as part of the evidence of the patient complying with the treatment program</li> <li>Considered referral to more intensive forms of treatment for patients not making progress</li> </ul>	
□ Scheduled Next Medical Appointment	<ul> <li>Scheduled next medical appointment at interval commensurate with patient stability</li> <li>Weekly, or more frequent, medical appointments are recommended for the first month</li> </ul>	

<sup>&</sup>lt;sup>2</sup> Counseling and other services are important as part of a comprehensive treatment plan, but the provision of medication should not be made contingent upon participation in such services.