



MATTERS

Medication for Addiction Treatment & Electronic Referrals

Hospital Initiated Buprenorphine Program Screening and Referral Instructions **(THIS FORM NOT TO BE GIVEN TO THE PATIENT)**

Identifying Patients/Screening:

- No absolute contraindications
- Patient agrees to medication assisted treatment and follow up plan
- Check iStop for buprenorphine RX written by emergency provider within past 6 months
- Patients exhibiting signs/symptoms of opioid withdrawal
 - Give 4mg buprenorphine/naloxone now, followed by a prescription for 7 days
- Patients arriving after overdose
 - Provide buprenorphine/naloxone 4mg BID for 7 days

PLEASE WRITE RX FOR 7 DAYS

ALLOWS CLINIC FLEXIBILITY AND DECREASES LIKELIHOOD FOR MEDICATION LAPSE

- Please write your “X” DEA number in the comments section when you e-prescribe
- Patients do NOT have to receive a RX to be referred
- Be aware that Medicare typically does not cover outpatient addiction services including most clinics on this list (patients will essentially be treated like self-pay)

Referral Process:

- Provide patient with the Opioid Dependence Screening Form (with clinic locations)
- Instruct the patient to complete the form
- Have patient choose their top two clinic choices (located on the bottom)
- Secretary/counselor (or the physician/PA/NP) will:
 - Using opioid dependence screening form – call centralized scheduling number

(XXX) XXX-XXXX

THIS NUMBER NOT TO BE DISTRIBUTED OR GIVEN TO PATIENTS

- Call taker will place patient into an appointment dates (clinic will call patient to set exact time)
- Patient should be informed that the clinic will call them to arrange time for appointment
- Place Opiate Dependence Screening form in HIPPA lock box (located in each ED)
- Provide patient with “Hospital initiated buprenorphine D/C instruction sheet”