

Opioid Withdrawal/Buprenorphine Initiation Order Set

MONITORING:

Temperature, HR, RR, BP and O2Sat

Notify MD if O2Sat less than 92% and/or RR less than 10 breaths/minute

Clinical Opiate Withdrawal Scale (COWS) at presentation

Hold medications and notify MD if drowsy or vitals are unstable

Unstable vitals: BP less than 90/60, HR greater than 100, RR less than 12, O2Sat less than 92%

LABORATORY TESTS

Urine or serum HCG

CBC, electrolytes, creatinine, glucose, AST, ALT, ALP, Bili

Urine toxicology (point of care drug screen if available)

Note: do not delay treatment while waiting for investigations

MEDICATIONS

Patients on methadone or slow-release oral morphine should not be changed to buprenorphine in the ED. Offer bridging prescription of their current treatment instead.

For COWS ≥ 13 AND appropriate timing from last opioid use: Standard Initiation

- At least 12 hrs since last short acting opioid (heroin, IR oxycodone, hydromorphone, morphine)
- At least 18 hrs since last controlled-release opioid (e.g. CR oxycodone, hydromorphone, morphine)
- At least 48 hrs since last street fentanyl use

Buprenorphine 4mg (2 x buprenorphine/naloxone 2/0.5mg tablets) SL q1h to max 16mg as long as patient is not drowsy and COWS >8

Buprenorphine 2mg (1x buprenorphine/naloxone 2.0/0.5mg tablets) SL **if elderly, on benzodiazepines or unsure of last opioid**

Notify MD if COWS score **increases** by 2 or more after first dose of buprenorphine/naloxone

For COWS ≥ 13 AND meeting criteria for macrodosing:

- Post-naloxone reversal of an opioid overdose (i.e. naloxone-induced withdrawal)
- In withdrawal from fentanyl use <48 hours since last use

Buprenorphine 16mg (2 x buprenorphine/naloxone 8/2mg tablets) SL

Repeat buprenorphine 8-16mg q1-2h for COWS score >8 to maximum 32mg as long as patient is not drowsy

Acetaminophen 1000 mg PO q6h PRN for pain, max 4g in 24 hours

Ibuprofen 400 mg PO q6h PRN for pain

Dimenhydrinate 25-50mg po/IV q4h prn

Ondansetron 4-8mg PO/IV q4-6h PRN for nausea

Clonidine 0.1mg po BID prn for sweats/goosebumps/restlessness if withdrawal symptoms persist

DISCHARGE ORDERS

- Refer to Substance Use Navigator/Social Worker if available and not already done
- Provide patient with appropriate information handouts
 - Buprenorphine treatment [↗](#), and harm reduction [↗](#)
 - Home start handout [↗](#)
 - Microdosing handout [↗](#)
- Confirm follow-up plans and provide information on RAAM/clinic hours
- Fax patient summary to appropriate clinic
- For patients with an existing community provider send discharge report/contact to discuss follow-up (with consent)
- Provide a naloxone kit (document on naloxone dispensing record) [↗](#)

Name: _____ Signature: _____

MD: _____

Date: _____ Time: _____