

Withdrawal Management Service Discharge

CLIENT INFORMATION	
Name	
DOB	
Health card number	
Phone number	
Address/living situation	
Benefits/government support	
Family practitioner	
Other care providers	
Case worker	

STATE OF DISCHARGE

- This client had an unplanned discharge from the WMS
- Client left early against medical advice
 - Client was discharged early due to safety concerns for staff or other clients
 - Client was discharged early due to behaviour that went against WMS policies

Discharge documents are being forwarded to you for continuity of care, though they are only accurate as of this discharge date. The client's needs and treatment may have changed since this time. We would be happy to receive repeat referrals for this client as appropriate in the future.

- This client left the WMS ambulatory, with acute withdrawal managed. Please see discharge plan below for more details of ongoing care.

TREATMENT

While at the WMS, the client withdrew from:

- Alcohol Opioids Stimulants Other: _____

- The client received supportive care only during their stay.

- The client received the following medications for acute withdrawal management during their stay:

- Diazepam Lorazepam Gabapentin Thiamine
 Olanzapine Risperidone Quetiapine Other: _____

- The client received a prescription for naltrexone 50 mg once daily.
- The client received a prescription for acamprosate 666 mg TID.
- The client received a prescription for thiamine 100 mg once daily.
- The client has been started on nicotine replacement therapy with _____.
- The client received slow-release oral morphine titrated to a dose of _____ mg.
- The client received methadone titrated to a dose of _____ mg.
- The client received buprenorphine titrated to a dose of _____ mg.
- The client received 300 mg 100 mg of extended-release depot buprenorphine (Sublocade) on date _____

Prescription details, including pharmacy, prescription end date, and observed doses vs. carries: _____

- No complications were experienced during the client's stay.
- The following complications were experienced during the client's stay:
 - Seizures Drug-induced psychosis
 - DTs Hospital transfer (records attached)

Details of complication: _____

- The client has been given a naloxone kit.

DISCHARGE DETAILS

- Documents attached: _____
- _____
- _____

Referrals made: _____

Medications (including medications stopped, started, adjusted, and reasoning): _____

Information and instructions provided to client:

- The client was asked to follow-up with your clinic within 2 weeks of discharge for dose titration and script renewal
- _____