

Medication Assisted Treatment for Opioid Dependence (MATOD) Buprenorphine/naloxone (Suboxone®) Prescriber Initial Medical Assessment Checklist - Brief

- [Assessment – determination of dependence](#)
- [Discuss options/explain pros and cons](#)
- [Discuss daily dosing requirement and dispensing pharmacy](#)
- [Negotiate type of MAT:OD and starting dosage, and provide information](#)
- [DDU authority form complete](#)
- [DDU authority form fax 1300 658 447 or email HealthDrugsofDependenceUnit@sa.gov.au](#)
- [DDU authority number \[phone\] 1300 652 584 \(press 1 then 1\)](#)
- [Urine drug screen](#)
- [Urine pregnancy test if woman](#)
- [Patient agreement / Safety netting \[six points on patient agreement\]](#)
- [Ring Pharmacy](#)
- [ID card for pharmacist](#)
- [Prescription](#)
- [Plan for reviews during induction](#)
- [Communicate with GP/others](#)

To get an electronic copy of this please:

- Enter into your search engine: “SA Health DASSA GP MATOD”
- Select the GP program page and
- Scroll down the page to “Assessment & induction onto MATOD”
- Go to [“Buprenorphine/naloxone \(Suboxone®\) Prescriber Initial Medical Assessment Checklist \(PDF 612KB\)”](#) and click on the link.

Buprenorphine/naloxone (Suboxone®) Prescriber Initial Medical Assessment Checklist Expanded



Assessment

- [Maintenance Pharmacotherapy - Assessment and Initial Treatment](#)
This clinical form enables the recording of the assessment of a client for possible commencement of opioid pharmacotherapy. The form includes reasons for requesting treatment, drug use history, medical history - including blood borne virus status, psychiatric history, medications - including QTc prolongation risk factors, social history, DSM IV criteria: Presence of Dependence, physical examination, treatment plan etc.
- Clinical Opiate Withdrawal Scale (COWS) on p.189 of the National Guidelines by clicking [here](#) or by entering “2014 Clinical guidelines opioid dependence” into your search engine
- This assessment combines objective and subjective items. It has the advantage of being quick to administer.

Discuss options/explain pros and cons

- Opioid withdrawal
 - Inpatient
 - Home
 - Follow up counselling or rehabilitation
- Medication Assisted Treatment for Opioid Dependence (MATOD)

Discuss daily dosing requirement and dispensing pharmacy

- The patient will be required to attend daily dosing at the nominated pharmacy written on the prescription.
- As no takeaways are permitted at the initial phase of treatment, the patient will need a 7 day a week dosing pharmacy.
- Provide Alcohol & Drug Information Service (ADIS) wallet card for patients to arrange 7 day a week dosing pharmacy.
- Discuss dispensing cost.

Negotiate type of MAT:OD and starting dosage, and provide information

- Counsel patients regarding buprenorphine/naloxone (Suboxone®) as pharmacotherapy of first choice.
- Explain that only a doctor who is an accredited prescriber can prescribe methadone or buprenorphine (Subutex®). Unless the doctor is accredited the patient will have to be referred to another doctor if methadone is required.
- The booklet “Suboxone sublingual film (buprenorphine hydrochloride/naloxone hydrochloride): a guide to treatment” can be given to the client which provides further information about the medication. The booklet can be obtained by emailing the DASSA GP Program CoOrdinator at: dassa.gpprogram@health.sa.gov.au or calling (08) 7425 5045
- for a summary the Clinical Pharmacology of Buprenorphine and Buprenorphine/Naloxone formulation refer to the national guidelines p 21 by clicking [here](#) or by entering “2014 Clinical guidelines opioid dependence” into your search engine
- Explain to female clients that if pregnant it is recommended that they are [referred to the DASSA obstetric unit](#) (see below)

DDU authority form complete

[AUTHORITY APPLICATION MATOD PROGRAM](#)

Remember to complete both sides. Prescribing doctor and patient to sign ID photo arranged

DDU authority form fax_ 1300 658 447

DDU authority # [phone] 1300 652 584

Buprenorphine/naloxone (Suboxone®) Prescriber Initial Medical Assessment Checklist (Cont.)

Urine drug screen

On standard pathology form under "Test required" add:

AMPHETAMINES
BENZODIAZEPINES
COCAINE
METHADONE
BUPRENORPHINE
OPIATES
OXYCODONE

Urine pregnancy test for women

If pregnancy occurs during treatment the patient should be referred to DASSA obstetric unit for ongoing management, through either the Women's and Children's or Lyell McEwin Hospitals. Advice on this can be obtained via DACAS (08) 7087 1742 or ADIS 1300 13 13 40. Generally, it is best for patients to stay on their maintenance treatment while pregnant.

Patient agreement / Safety netting [six points on contract]

See [below](#) (pg 5) for the "Methadone and Buprenorphine Programs - Patient Agreement" The "Essential information for patients commencing or recommencing on Medication Assisted Treatment for Opioid Dependence (MATOD):" section must not be altered. Your practice details need to be inserted and the details on the lower half of the form can be modified to fit with your practice requirement.

Ring Pharmacy

- Alcohol & Drug Information Service (ADIS) 1300 13 1340 can provide details of the pharmacies which will dispense MAT:OD and are 7 day pharmacies.
- Pharmacists appreciate a call about patients and the call allows the opportunity for relevant information to be shared e.g. impending closures of pharmacy for public holidays

ID card for pharmacist

- See [below](#) (pg 6) for: "ID card for pharmacist" document for your use.
- ID photo

Prescription

- See [below](#) (pg 7) for instructions: "Writing Initial Prescriptions".

Plan for reviews during induction

- See the patient on days one and two and then six or seven, to check progress. Ring the pharmacist each time to instruct re dosing
- Dosing regime at reviews
 - Starting dose on day 1: 4 mg. The patient may come back four hours later for another 4 mg dose.
 - Dose day 2 : increase on day 1 by 4 mg. ∴ 8 mg or 12 mg
 - Dose day 3 and then for the next week maintain at 12-16mg a day
 - Note: Suboxone® comes in 2mg and 8mg film which can not be broken down into smaller dose increments.

Communicate with GP/others

For safe communication for all GPs at your practice – ensure:

- A copy of the current, valid Section 18A Authority and amendments is available to your co-workers
- The locum policy relating to ODSP is made available [where applicable] Available [here](#):
Or by entering “locum policy ODSP” into your search engine.
- Alert systems are used
- An up-to-date patient history is maintained including
 - o Current pharmacy
 - o Collection restrictions and supervision requirements
- Numbers for the DDU, Alcohol and Drug Information Service, Drug and Alcohol Clinical Advisory Service are available. See below (pg 8) for “Useful Contact details sheet”. You may wish to include this in the patient file, put a copy in the practice policy folder and/or laminate a copy for your consulting room (Continued below)

[Insert practice details]

Medication Assisted Treatment for Opioid Dependence (MATOD)
Methadone and Buprenorphine

PATIENT'S NAME:

DOB: / /

Essential information for patients commencing or recommencing on Medication Assisted Treatment for Opioid Dependence (MATOD):

- Methadone / Buprenorphine may affect your capacity to safely **drive motor vehicles, ride motorcycles or operate machinery**, particularly when first starting and until you have been on a stable dose for a while, or if you are taking a higher dose of this medication.
- It is best if someone stays with you when you are stabilising on Methadone or Buprenorphine. Please tell this person to seek help if you become drowsy or difficult to wake up. This is not an expected result of Methadone/Buprenorphine.
- It is dangerous to use other drugs, particularly alcohol or benzodiazepines with Methadone / Buprenorphine e.g. Valium, Serepax, Xanax,
- It is important that you let your GP, or other doctors you visit, know that you are on Methadone or Buprenorphine to make sure that medications prescribed can be used safely with Methadone / Buprenorphine.
- Check with the Pharmacists where you have scripts filled whether they are safe to be taken with Methadone / Buprenorphine.
- Methadone and buprenorphine use will cause tolerance and withdrawal. You may have symptoms of withdrawal if you stop taking Methadone or Buprenorphine.

Patient Agreement

I
(Patient's name)

agree to the following:

- I have read or had explained to me the information above, and understand the "*Essential Information for patients commencing or recommencing on Medication Assisted Treatment for Opioid Dependence (MATOD)*".

.....
(Signature of patient)

...../...../.....
(date)

.....
(Signature of witness)

...../...../.....
(date)

CONFIDENTIAL

IDENTIFICATION FORM

MAINTENANCE PHARMACOTHERAPIES

SURNAME _____

OTHER NAMES _____

DATE OF BIRTH _____ SEX _____

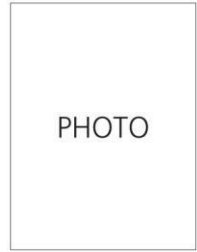
ADDRESS _____

TELEPHONE _____

BUILD Light Medium Heavy _____

HEIGHT _____ EYES (colour) _____

PIERCINGS _____ TATTOOS _____



CLIENT'S SIGNATURE _____ DATE _____

PRESCRIBING DOCTOR _____

ADDRESS _____

TELEPHONE _____ FAX _____

GP STAMP HERE



© Drug and Alcohol Services South Australia 2012
This form may be reproduced for use by scheduled opioid substitution prescribers.

CONFIDENTIAL

IDENTIFICATION FORM

MAINTENANCE PHARMACOTHERAPIES

SURNAME _____

OTHER NAMES _____

DATE OF BIRTH _____ SEX _____

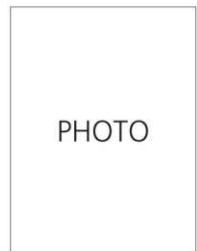
ADDRESS _____

TELEPHONE _____

BUILD Light Medium Heavy _____

HEIGHT _____ EYES (colour) _____

PIERCINGS _____ TATTOOS _____



CLIENT'S SIGNATURE _____ DATE _____

PRESCRIBING DOCTOR _____

ADDRESS _____

TELEPHONE _____ FAX _____

GP STAMP HERE



© Drug and Alcohol Services South Australia 2012
This form may be reproduced for use by scheduled opioid substitution prescribers.

Opioid Pharmacotherapy Prescriber Initial Medical Assessment Checklist (Cont.)

Writing an Initial Suboxone Prescription

For more information regarding the starting dosages of buprenorphine/naloxone (Suboxone®) refer to the national guidelines p 99 by clicking [here](#) or by entering “2014 Clinical guidelines opioid dependence” into your search engine

Writing an Initial Suboxone Script

Dr John Smith
1 Smith Drive
Smith Park SA 5555
Phone: 8276 3451

Midnight Pharmacy

795709

Patient's Medicare no. []

Patient's name and address
First name: John Family name: Doe DOB: 05/11/1973
1 Doe Street, Doe Park SA 5555
Postcode: [] [] [] [] [] []

Pharmaceutical Benefits Entitlement number []

(tick appropriate boxes)
 PBS RPBS BRAND SUBSTITUTION NOT PERMITTED
S18A/18/00001

BA04792214
Rx Suboxone film

25/12/2018 4 (four)mg
26/12/2018 8 (eight) mg

NO takeaways
Expiry: 26/12/2018

Total amount of drug supplied from this prescription: 12 (twelve)mg

DOCTOR'S SIGNATURE J. Smith DATE 25 12 2018

Please turn over for privacy note I certify that I have received this medication and the information relating to any entitlement to free or concessional pharmaceutical benefits is not false or misleading.

Date of supply _____ Patient's or agent's signature _____

4001(09/03) Agent's address _____

The name of the pharmacy nominated to dispense the prescription. The script is only valid at this pharmacy.

Patient's DOB

Authority Number

Dose of the drug to be administered, in both words and numerals. To distinguish this from the "Total amount of drug supplied from the prescription" below, use larger writing and underline/highlight this information.

No take-away privileges

The expiry date of the prescription or prescription valid from xx/xx/xxxx to xx/xx/xxxx. (This ensures the patient attends next review appointment as the Rx will expire and no more doses will be available).

The total amount of the drug to be supplied from the prescription, in both words and numerals. To avoid confusion with the dose to be administered use smaller writing and don't underline this information.

We encourage prescribers to discuss new patients with the pharmacy to ensure the patient will be dosed and open lines of communication are established. This will aid the pharmacists whose role includes monitoring attendances, intoxication and/or erratic behaviour, and reporting these back to the prescriber.

Drugs of Dependence Unit (DDU): 1300 652 584

HealthDrugsofDependenceUnit@sa.gov.au

The Drugs of Dependence Unit is responsible for administering parts of the Controlled Substances Act, and various regulations under the Act relating to drugs of dependence. This Unit operates during normal business hours and are available to answer queries in regards to Schedule 8 authorities.

Drug and Alcohol Clinical Advisory Service (DACAS): (08) 7087 1742

Telephone: (08) 7087 1742 from 8:30am — 10pm 7 days/week including public holidays or e-mail your enquiry to: HealthDACASEnquiries@sa.gov.au. DACAS provides a telephone and email service for South Australian health professionals seeking clinical information and clarification around clinical procedures, guidelines and evidence-based practice.

This service does not provide proxy medical cover and cannot assume responsibility for direct patient care.

Alcohol and Drug Information Service (ADIS): 1300 13 1340

Is a state-wide, confidential, toll free telephone service, which provides brief intervention counselling, resource information, support and referral options for people dealing with their own or another's alcohol or drug problem.

If you are acting as a locum for an accredited prescriber in your practice, you will find the document, "*Information for Medical Practitioners Acting as a Locum for an Accredited Private Opioid Dependence Treatment Program Prescriber*" sets out clearly your clinical and legal responsibilities. Available [here](#):

Or by entering "SA Health Locum MATOD" into your search engine.

Drugs of Dependence Unit (DDU): 1300 652 584

HealthDrugsofDependenceUnit@sa.gov.au

The Drugs of Dependence Unit is responsible for administering parts of the Controlled Substances Act, and various regulations under the Act relating to drugs of dependence. This Unit operates during normal business hours and are available to answer queries in regards to Schedule 8 authorities.

Drug and Alcohol Clinical Advisory Service (DACAS): (08) 7087 1742

Telephone: (08) 7087 1742 from 8:30am — 10pm 7 days/week including public holidays or e-mail your enquiry to: HealthDACASEnquiries@sa.gov.au. DACAS provides a telephone and email service for South Australian health professionals seeking clinical information and clarification around clinical procedures, guidelines and evidence-based practice.

This service does not provide proxy medical cover and cannot assume responsibility for direct patient care.

Alcohol and Drug Information Service (ADIS): 1300 13 1340

Is a state-wide, confidential, toll free telephone service, which provides brief intervention counselling, resource information, support and referral options for people dealing with their own or another's alcohol or drug problem.

If you are acting as a locum for an accredited prescriber in your practice, you will find the document, "*Information for Medical Practitioners Acting as a Locum for an Accredited Private Opioid Dependence Treatment Program Prescriber*" sets out clearly your clinical and legal responsibilities. Available [here](#):

Or by entering "SA Health Locum MATOD" into your search engine.