 BAY OF PLENTY DISTRICT HEALTH BOARD HAUORA A TOI CLINICAL PRACTICE MANUAL	MEDICATION – METHADONE / BUPRENORPHINE AND NALOXONE– MANAGEMENT OF PATIENTS ADMITTED WHO ARE ON AN OPIOID SUBSTITUTION TREATMENT (OST)	Protocol CPM.M3.27
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PURPOSE

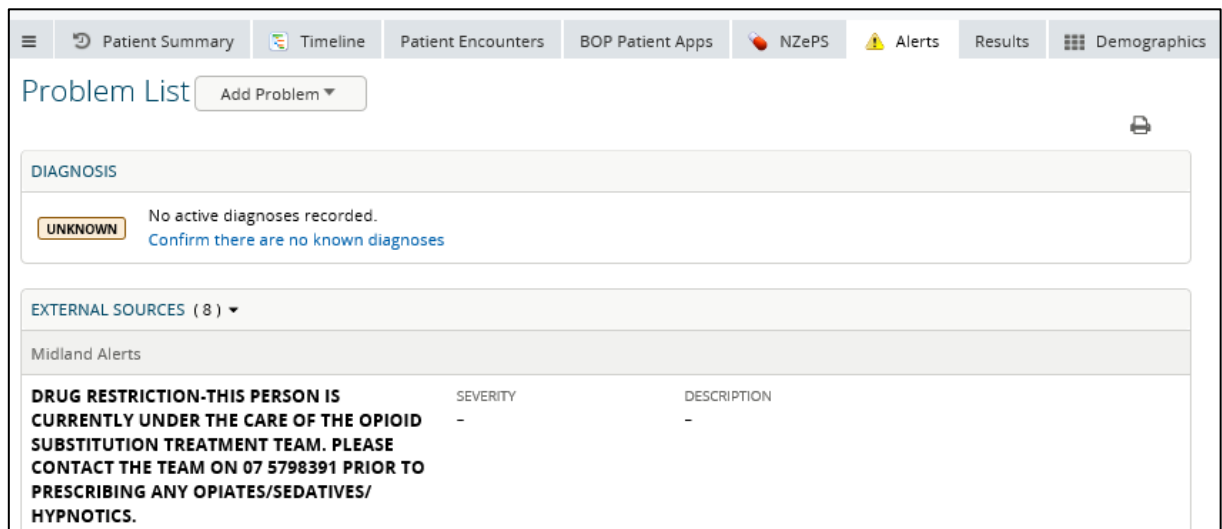
To ensure patients admitted to a Bay of Plenty District Health Board (BOPDHB) hospital, who are on an Opioid Substitution Treatment (OST), are prescribed and administered their methadone / buprenorphine and naloxone doses safely and appropriately. Authority must be obtained from Bay of Plenty Addiction Services (BOPAS).

All medication for OST is prescribed, dispensed / checked and administered in accordance with Misuse of Drugs Act legislation.

Patients admitted to hospital who are enrolled for OST require written authorisation prior to receiving methadone / buprenorphine and naloxone using the below process.

STANDARDS TO BE MET – refer to [Appendix 3 flowchart](#) for simplified version

1. Patient identified as enrolled in OST. All patients enrolled in OST in BOP should have an alert in the Midland Alerts section on Midland Clinical Portal (MCP)




DIAGNOSIS
UNKNOWN No active diagnoses recorded. Confirm there are no known diagnoses

EXTERNAL SOURCES (8)						
Midland Alerts						
<table border="1"> <thead> <tr> <th>DRUG RESTRICTION-THIS PERSON IS CURRENTLY UNDER THE CARE OF THE OPIOID SUBSTITUTION TREATMENT TEAM. PLEASE CONTACT THE TEAM ON 07 5798391 PRIOR TO PRESCRIBING ANY OPIATES/SEDATIVES/ HYPNOTICS.</th> <th>SEVERITY</th> <th>DESCRIPTION</th> </tr> </thead> <tbody> <tr> <td></td> <td>-</td> <td>-</td> </tr> </tbody> </table>	DRUG RESTRICTION-THIS PERSON IS CURRENTLY UNDER THE CARE OF THE OPIOID SUBSTITUTION TREATMENT TEAM. PLEASE CONTACT THE TEAM ON 07 5798391 PRIOR TO PRESCRIBING ANY OPIATES/SEDATIVES/ HYPNOTICS.	SEVERITY	DESCRIPTION		-	-
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1. Patient's Own Methadone Or Buprenorphine and Naloxone Brought Into Hospital
 - 1.1 If patient has methadone or buprenorphine and naloxone with them:
 - a) **Do NOT administer to ensure no doubling up of doses in hospital**
 - b) Enter in the patient's own controlled drug register.
 - c) Store in a locked controlled drug (CD) cupboard.
 - d) Inform BOPAS you are in possession.
 - e) Patients own methadone or buprenorphine and naloxone is to be destroyed after discharge – it is NOT to be given back to the patient on discharge (unless instructed by BOPAS).
2. Contact BOPAS at the earliest available opportunity (see contact details below) to obtain written authorisation to prescribe.
3. Cease further community supply of methadone / buprenorphine and naloxone
 - 3.1 Weekdays: BOPAS will contact the service users usual community pharmacy to cease supply until further notice.
 - 3.2 Weekends / public holidays: If unable to contact BOPAS, admitting nurse / medical practitioner to contact community pharmacy directly (please note – patients may use alternative community pharmacies in the weekend, both may need to be contacted).

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Protocol Steward: Pharmacist, MH&AS	Authorised by: Chief Medical Officer	

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4. Prescribing Notes:

- 4.1 Prescribe methadone / buprenorphine and naloxone according to the direction on the authority (or in weekends, community pharmacy information).
- 4.2 Methadone for OST is given as a single once daily dose unless otherwise indicated by BOPAS
- 4.3 The dose prescribed of buprenorphine + naloxone should be expressed as buprenorphine content (as per NZF).
- 4.4 Methadone / buprenorphine and naloxone interacts with many other medications. Please check NZF for prescribing information
 - a) [Opioid substitution therapy – NZF](#)
 - b) [methadone hydrochloride – NZF](#)
 - c) [buprenorphine + naloxone – NZF](#)
- 4.5 Consult the Clinical Pain Service (CPS) for advice on pain relief for these patients if required. (Note buprenorphine and naloxone affects patients analgesic requirements)
- 4.6 Benzodiazepines or zopiclone should not be initiated in these patients without consultation with BOPAS

5. Inpatient Supply

- 5.1 Pharmacy will dispense doses for inpatient use. They require:
 - a) Authorisation
 - b) Scanned medication chart
 - c) CD requisition book, doses dispensed **are for inpatient use only – NOT to go home with patient**
- 5.2 Enter in the CD register on the page assigned for methadone oral solution or buprenorphine and naloxone sublingual tablets (see [Appendix 1](#) for example).
- 5.3 Lock in the CD cupboard.
- 5.4 Any unused doses must be returned to Pharmacy on discharge.


6. Administration

- 6.1 Book out the day's dose from the CD register (see [Appendix 1](#))
- 6.2 Methadone: Nurse is to observe the entire contents of the labelled unit dose being swallowed by the patient, followed by a glass of water and a few spoken words.
- 6.3 Buprenorphine + naloxone: Tablets should be broken into a few pieces to speed up absorption and must be dissolved under the tongue – this usually requires 2 – 10 minutes. It will not be absorbed if swallowed. Patients should not swallow or consume food or drink until the tablet is completely dissolved. Observe consumption and ensure adherence. May be followed by a glass of water and a few spoken words.
- 6.4 Buprenorphine and naloxone come in 2 different strengths
 - a) 8 mg buprenorphine + 2 mg naloxone
 - b) 2 mg buprenorphine + 0.5 mg naloxone
 - c) A combination of the 2 strengths may be required to make up a patient's dose, when prescribed it should be expressed as buprenorphine content only. For example, buprenorphine and naloxone 10 mg would be one of each strength tablets (combining 8 mg buprenorphine + 2 mg buprenorphine).

7. Observations

- 7.1 Pre dose and up until approximately 3 hours post dose, observe for intoxication / withdrawal respectively (refer to [FM.C10.1 Clinical Opioid Withdrawal Scale \(COWS\)](#))
- 7.2 If signs of intoxication are observed prior to the 3 hour peak, notify medical practitioner

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- 7.3 If there are any concerns regarding clients behaviour or presentation contact BOPAS
- 7.4 Observations should be documented in the patient's health record and passed on to BOPAS on discharge

8. Discharge

- 8.1 As soon as discharge date is known, nurse / medical practitioner to contact BOPAS
- 8.2 Discharge **must be planned** with BOPAS so a prescription for methadone / s buprenorphine and naloxone in the community is available. **N.B.** If this changes, the service must be contacted again to confirm.
- 8.3 A methadone / buprenorphine and naloxone dose for that day should be given on the ward before discharge. No takeaway doses to be given to the patient on discharge.
- 8.4 Return patient own methadone or buprenorphine and naloxone to Pharmacy for destruction as per usual process, unless otherwise directed by BOPAS.
 - a) only upon request of BOPAS sign out and return any of the patient's own methadone / buprenorphine and naloxone
- 8.5 Information required on summary for the BOPAS service:
 - a) Last dose and time of administration
 - b) If complications of injecting
 - c) Anything noted from observations requested above
 - d) Any new medications
 - e) Reminder – there are to be no changes to doses without consulting BOPAS

9. After Hours / Weekends

- 9.1 Contact BOPAS on 0800 800 508. If BOPAS uncontactable on after hours number follow below procedure:
 - a) medical practitioner contact community pharmacy to confirm:
 - i. correct / current dose
 - ii. date when last dose was consumed or dispensed
 - iii. If community pharmacy not contactable review information on Community Dispensing history on MCP
 - iv. Prescribe one dose on the stat section of the national medication chart IF it is deemed necessary before BOPAS can be contacted
 - b) If BOPAS or the community Pharmacy cannot be contacted
 - i. and the patient has had 3 or more days since a dose has been last dispensed to them,
 - ii. and all attempts to contact BOPAS have failed (after hours only),
 - iii. and the patient starts to exhibit withdrawal symptoms (COWS \geq 8)
- THEN
- iv. a methadone or buprenorphine and naloxone dose up to 25% of their regular dose can be given stat
 - c) In both cases above BOPAS must be contacted the next day.
 - d) Contact Pharmacy / on call pharmacist for advice if necessary.

10. Contact Details

Bay of Plenty Addiction Services (BOPAS)

First Floor, Kowhai House
Tauranga Hospital


Clinic (07) 579 8391

Fax (07) 571 8095

Business Hours: Mon - Fri 0800 to 1630 hours

After Hours: Crisis Team on-call phone 0800 800 508

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REFERENCES

- [Ministry of Health. Practice Guidelines for Opioid Substitution Treatment in New Zealand 2014](#)
- [Misuse of Drugs Act 1975](#)
- [Opioid substitution therapy – NZF](#)
- [Methadone hydrochloride – NZF](#)
- [Buprenorphine + naloxone – NZF](#)

ASSOCIATED DOCUMENTS

- [Bay of Plenty District Health Board policy 7.1.1 Medications, IV Fluids and Standing Orders](#)
- [Bay of Plenty District Health Board Clinical Practice Manual protocol CPM.M3.8 Medication - Controlled & Monitored Medications - Storage, Checking & Administration](#)
- [Bay of Plenty District Health Board Clinical Practice protocol CPM.M5.24 Personal Search](#)
- [Bay of Plenty District Health Board Form FM.C10.1 Clinical Opiate Withdrawal Scale \(COWS\)](#)

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Appendix 1. Example of Methadone Oral Solution Entries into Ward CD Register


NAME AND FORM OF DRUG: Methadone Oral Solution STRENGTH: 5 mg / mL

Date	Name and address of person supplied; from which or into which made; or declaration of physical stocktaking	Rx No. or Ref No. or Time	In	Out	Balance	Person making entry	Person witnessing entry
3/11/10	From Pharmacy for J Bloggs 5x20 mL	21320	100 mL		100 mL	PH 1	RN B
3/11/10	J Bloggs	0900		20 mL	80 mL	RN A	RN B
4/11/10	JBloggs	0915		20 mL	60 mL	RN A	RN B
4/11/10	From Pharmacy for B Brown 5x15mL	21323	75 mL		135 mL	PH 1	RN A
4/11/10	B Brown	11:00		15 mL	120 mL	RN A	RN B
5/11/10	JBloggs	0900		20 mL	100 mL	RN A	RN B
5/11/10	B Brown	11:00		15 mL	85 mL	RN A	RN B
5/11/10	Returned to Pharmacy J Bloggs 2x20mL	21325		40 mL	45 mL	RN A	PH 1
6/11/10	B Brown	11:15		15 mL	30 mL	RN A	RN B
6/11/10	Returned to Pharmacy B Brown 2x15mL	21328		30 mL	NIL	PH 1	RN B

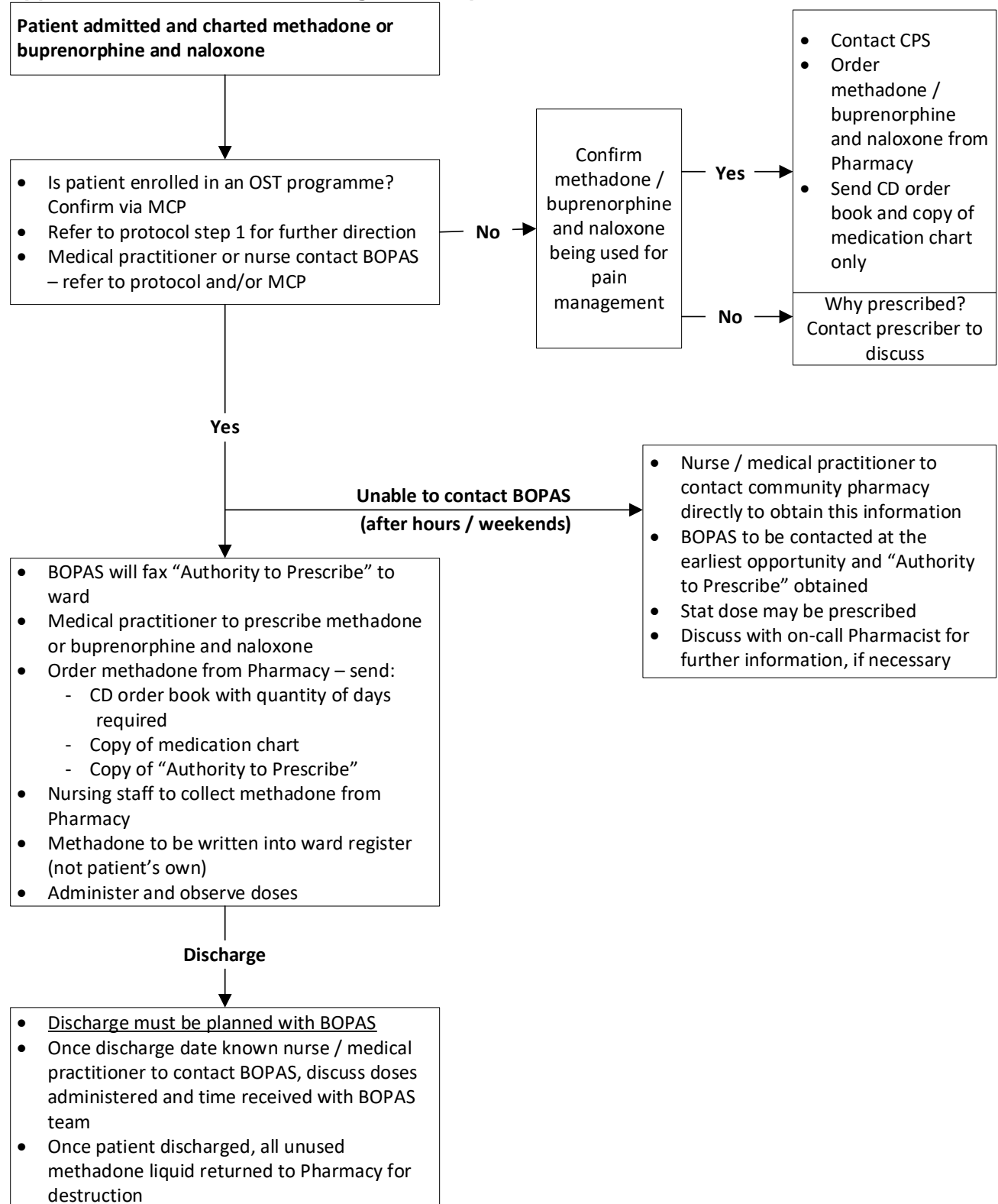
Appendix 2: Example of Requisition Order for Methadone Oral Solution:

CONTROLLED DRUGS AND MONITORED MEDICINES REQUISITION		21320
Date 3/11/10		
PLEASE SUPPLY to 1D		
Quantity Required	NAME OF DRUG	ISSUED
	<i>Methadone Oral Solution for J Bloggs</i>	
	<i>As per chart</i>	
	<i>Number of days supply required</i>	

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Appendix 3: Flowchart for management of patients admitted who are on OST



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