**Buprenorphine/Naloxone (Suboxone) Pre-Induction and Home Induction Instructions**

Welcome to the Medication Assisted Treatment with Buprenorphine (suboxone) Program. The pre-induction and home induction process is important for a safe and comfortable start of the medication.

Your induction date/time/ location \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

You are coming off of (opioid) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

You will need to **STOP TAKING or USING all opioids** after \_\_\_\_\_\_\_\_\_\_\_(day) \_\_\_\_\_\_\_\_\_\_(time).

You are also required to abstain from all alcohol, benzodiazepines and illicit drugs.

The reason you need to be in withdrawal from all opioids is that the opioid receptors in your brain and body will soon be occupied by buprenorphine. If there are still opioids in your system, there is a risk for precipitated withdrawal. ***Precipitated withdrawal*** is an intense withdrawal, which can last for many hours and even days.

If you and your provider have planned for a ***home induction***, you will have met with provider and submitted urine drug screen (UDS) and reviewed the plans for a successful comfortable induction.

For your comfort during your opioid withdrawal, your provider might prescribe:

\_\_\_\_\_ Imodium for diarrhea

\_\_\_\_\_ Clonidine for withdrawal symptoms

\_\_\_\_\_ Hydroxyzine for nausea, anxiety and sleep

\_\_\_\_\_ Gabapentin for withdrawal symptoms, anxiety and sleep

\_\_\_\_\_ Ibuprofen for aches and pain

\_\_\_\_\_ Other

Please read the instructions for the proper doses on the bottles of these medications, as they will be ordered specific to your expected withdrawal.

 *On day of induction, you will follow the additional directions provided to you by your provider.*

Some initial **common side effects**:

Drowsiness, light-headedness, nausea, mild headache, urinary retention, constipation. These are usually mild side effects and some people do not experience any. Side effects such as sweating, constipation and muscle twitching might persist. Let us know of any side effects that you are experiencing.

Please drink extra fluids, take ibuprofen or Tylenol for headache, stay in touch with your MAT team, keep your appointments and take care of your recovery. It is important that your provider knows about any side-effects.

Your MAT RN will be following your Home Induction daily for the first 3 days via telephone or in-clinic visits.

**Buprenorphine/Naloxone (Suboxone) Pre-Induction Instructions for**

**In-clinic Induction**

 **Medication Assisted Treatment Program Information**

Welcome to our Medication Assisted Treatment with Buprenorphine (suboxone) Program. The pre-induction process is important for a safe and comfortable start of the medication.

Your induction date/time/ location \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

You are coming off of (opioid) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

You will need to **STOP TAKING or USING all opioids** after \_\_\_\_\_\_\_\_\_\_\_(day) \_\_\_\_\_\_\_\_\_(time).

You are also required to abstain from all alcohol, benzodiazepines and illicit drugs.

The reason you need to be in withdrawal from all opioids is that the opioid receptors in your brain and body will soon be occupied by buprenorphine. If there are still opioids in your system, there is a risk for precipitated withdrawal. ***Precipitated withdrawal*** is an intense withdrawal, which can last for many hours and even days.

On the day of your in-clinic induction, please plan to be here for up to three hours. We will require a Urine Drug Screen and will measure your opioid withdrawal symptoms.

For your comfort during your opioid withdrawal, your MD has prescribed:

\_\_\_\_\_ Imodium for diarrhea

\_\_\_\_\_ Clonidine for withdrawal symptoms

\_\_\_\_\_ Hydroxyzine for nausea, anxiety and sleep

\_\_\_\_\_ Gabapentin for withdrawal symptoms, anxiety and sleep

\_\_\_\_\_ Ibuprofen for aches and pain

\_\_\_\_\_ other

Please read the instructions for the proper doses on the bottles of these medications, as they will be ordered specific to your expected withdrawal.

 *On day of induction, you will submit Urine Drug Screen, meet with Nurse Case Manager for evaluation of your withdrawal symptoms. When you are ready to start buprenorphine (suboxone), you will pick up your prescribed first dose of buprenorphine/naloxone from the clinic pharmacy. Please do not open the bottle and do not take the medication. You will be taking the first two doses in the clinic once your nurse and MD have determined that it is safe to start the buprenorphine (suboxone).*

Some initial **common side effects**:

Drowsiness, light-headedness, nausea, mild headache, urinary retention, constipation. These are usually mild side effects and some people do not experience any. Side effects such as sweating, constipation and muscle twitching might persist. Let us know of any side effects that you are experiencing. Please drink extra fluids, take ibuprofen or Tylenol for headache, stay in touch with your MAT team, keep your appointments and take care of your recovery. It is important that your provider knows about any side effects.

1. **Medication-Assisted Treatment Program Structure**

**Refill/Stabilization groups**: Every new patient is initially on short prescriptions of Buprenorphine such as a 7-day supply, with or without refills. This gives your Buprenorphine team the opportunity to see you frequently in the early weeks of your recovery so that we can give you plenty of support. The doctor will refill your medications at this group; there will also be behavioral health staff if you need to start therapy. We will also cover many topics about recovery and the medication you are taking. Refill/Stabilization Group will also give us an opportunity to make sure that the Treatment plan for long term recovery support is effective or if your Treatment plan requires re-assessment and adjustment.

Please see handout on *Phase Program*.

**The weekly MAT group is every \_\_\_\_\_\_\_\_\_\_\_\_\_\_ from \_\_\_\_\_\_\_\_\_\_ am.**  **Please come ½ hour prior to start of group** so the Medical Assistant can collect urine drug screen prior to the group.

Every admitted MAT patient will be scheduled for a Biopsychosocial intake or update, if you are already receiving behavioral health care at Chapa-De.

**Individual Appointments:** Additional sessions with Addictions nurse, MD or behavioral health therapist will be scheduled based on assessed need and request.

**Maintenance visits:** Once stable on correct dose, treatment agreement adherence established, and behavioral health and treatment (recovery) needs have been identified and are in place, you will be scheduled for routine visits with your buprenorphine (suboxone) provider.

**Relapse:** Addiction is a chronic progressive relapsing disease. We understand that relapse can occur. If this does happen we will work with the individual to provide increased support and monitoring until they are stable. Relapse includes resumption of use of alcohol, benzodiazepines, methamphetamines and opioids.

If you have any questions or concerns, please call our MAT RN Case Manager at: \_\_\_\_\_\_\_\_\_\_.