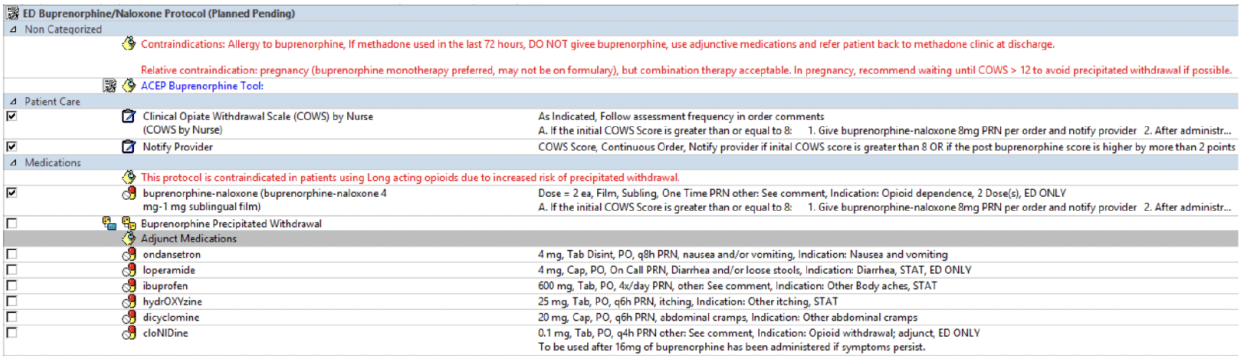
ED Buprenorphine/Naloxone Protocol: Go Live Oct 3
For patients dependent on opioids, consider initiating buprenorphine if the patient is willing.
Buprenorphine treats withdrawals, prevents cravings, and dramatically reduces the risk of overdose.
For patients in acute withdrawal, initiate buprenorphine in the ED with a prescription to bridge to outpatient treatment
For patients not acutely withdrawing, prescribe buprenorphine for the patient to start taking at home until bridged to outpatient treatment.
Assess acute withdrawal via COWS score. COWS > or = 8 can be started on buprenorphine.
Refer **all** patients to SBIRT and outpatient followup.

Exclusion: patients who have taken methadone within 72 hours, or with a true allergy to buprenorphine
Risks: Starting buprenorphine before the patient is withdrawing, or if the patient is on a long-acting opioid (like methadone) can cause precipitated withdrawal. Higher dose buprenorphine has **lower** rates of precipitated withdrawal.
Risks of respiratory depression or sedation from buprenorphine are extremely uncommon and occur primarily in patients with simultaneous use of other sedatives.
Precipitated withdrawal is managed with repeat doses of high-dose buprenorphine.

ED Initiation:

- Loading protocol with starting dose 8mg, up to 32 mg in the ED
- Adjuncts and management of precipitated withdrawal as needed



ED Buprenorphine/Naloxone Protocol (Planned Pending)	
Non Categorized	
Contraindications: Allergy to buprenorphine, If methadone used in the last 72 hours, DO NOT givee buprenorphine, use adjunctive medications and refer patient back to methadone clinic at discharge.	
Relative contraindication: pregnancy (buprenorphine monotherapy preferred, may not be on formulary), but combination therapy acceptable. In pregnancy, recommend waiting until COWS > 12 to avoid precipitated withdrawal if possible.	
ACEP Buprenorphine Tool:	
Patient Care	
☑ Clinical Opiate Withdrawal Scale (COWS) by Nurse (COWS by Nurse)	As Indicated, Follow assessment frequency in order comments A. If the initial COWS Score is greater than or equal to 8: 1. Give buprenorphine-naloxone 8mg PRN per order and notify provider 2. After administr...
☑ Notify Provider	COWS Score, Continuous Order, Notify provider if inital COWS score is greater than 8 OR if the post buprenorphine score is higher by more than 2 points
Medications	
This protocol is contraindicated in patients using Long acting opioids due to increased risk of precipitated withdrawal.	
☑ buprenorphine-naloxone (buprenorphine-naloxone 4 mg-1 mg sublingual film)	Dose = 2 ea, Film, Subling, One Time PRN other: See comment, Indication: Opioid dependence, 2 Dose(s), ED ONLY A. If the initial COWS Score is greater than or equal to 8: 1. Give buprenorphine-naloxone 8mg PRN per order and notify provider 2. After administr...
☐ Buprenorphine Precipitated Withdrawal	
Adjunct Medications	
☐ ondansetron	4 mg, Tab Disint, PO, q8h PRN, nausea and/or vomiting, Indication: Nausea and vomiting
☐ loperamide	4 mg, Cap, PO, On Call PRN, Diarrhea and/or loose stools, Indication: Diarrhea, STAT, ED ONLY
☐ ibuprofen	600 mg, Tab, PO, 4x/day PRN, other: See comment, Indication: Other Body aches, STAT
☐ hydrOXYzine	25 mg, Tab, PO, q6h PRN, itching, Indication: Other itching, STAT
☐ dicyclomine	20 mg, Cap, PO, q6h PRN, abdominal cramps, Indication: Other abdominal cramps
☐ cloNIDine	0.1 mg, Tab, PO, q4h PRN other: See comment, Indication: Opioid withdrawal; adjunct, ED ONLY To be used after 16mg of buprenorphine has been administered if symptoms persist.

Take home pathway/discharge prescriptions:

- Recommendation sending **all** patients with a prescription unless they are going directly to opioid treatment.
- Default prescription is for take-home initiation pathway, but can increase if patient requires higher dose in ED.
- Recommended 16-24mg/day for **at least three days, or as long as needed to bridge to treatment**.
- Does not affect opioid prescribing metrics.
- E-prescribe per Maryland law.
- Give all patients “home instructions for buprenorphine”
- Give follow-up instructions specific to your site: under “buprenorphine follow-up”

Naloxone:

- Send all patients with naloxone in hand (mandatory in Maryland) – built into order set