

ED-Initiated Buprenorphine

Emergency Nursing Perspectives

Presenter



Tania D. Strout, PhD, RN, MS

Director of Research, Associate Professor
Department of Emergency Medicine, Maine Medical Center
Tufts University School of Medicine



National Institute
on Drug Abuse

- **NIDA CTN-0099:**
Emergency Department
Initiated Buprenorphine
Validation Network Trial
(ED-INNOVATION)
- Medication Braeburn
- LIs D'Onofrio, Fiellin



**Facilitating
humanization,
meaning,
choice,
quality of life
& healing in
living and
dying.**



Position Statement

915 Lee Street, Des Plaines, IL 60016-6569 • 800.900.9659 • www.ena.org

**Patients with Substance Use Disorders and
Addiction in the Emergency Care Setting**

Care

Policy

Research

Testimony

Education

**Management Plans &
Guidelines**

***Nursing's Social
Policy***

Statement:

**The Essence of
the Profession**

Compassion

**Respect for
Dignity, Worth, &
Uniqueness**

Unrestricted by:

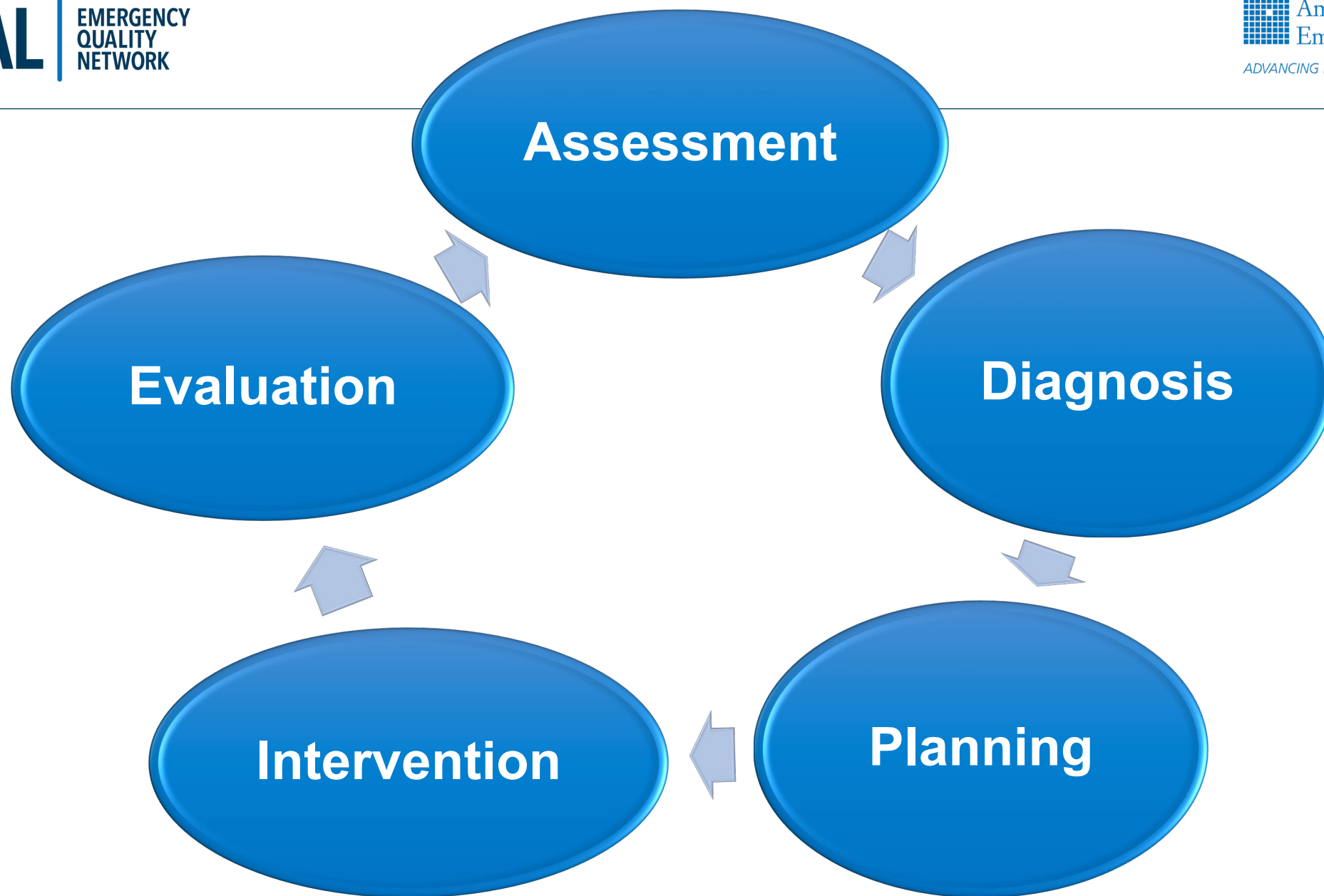
**Social or
Economic Status**

**Personal
Attributes**

**Nature of Health
Problems**


**Work for
Social
Justice**

**Supporting
Patients' &
Families'
Health and
Wellbeing**



Universal Screening





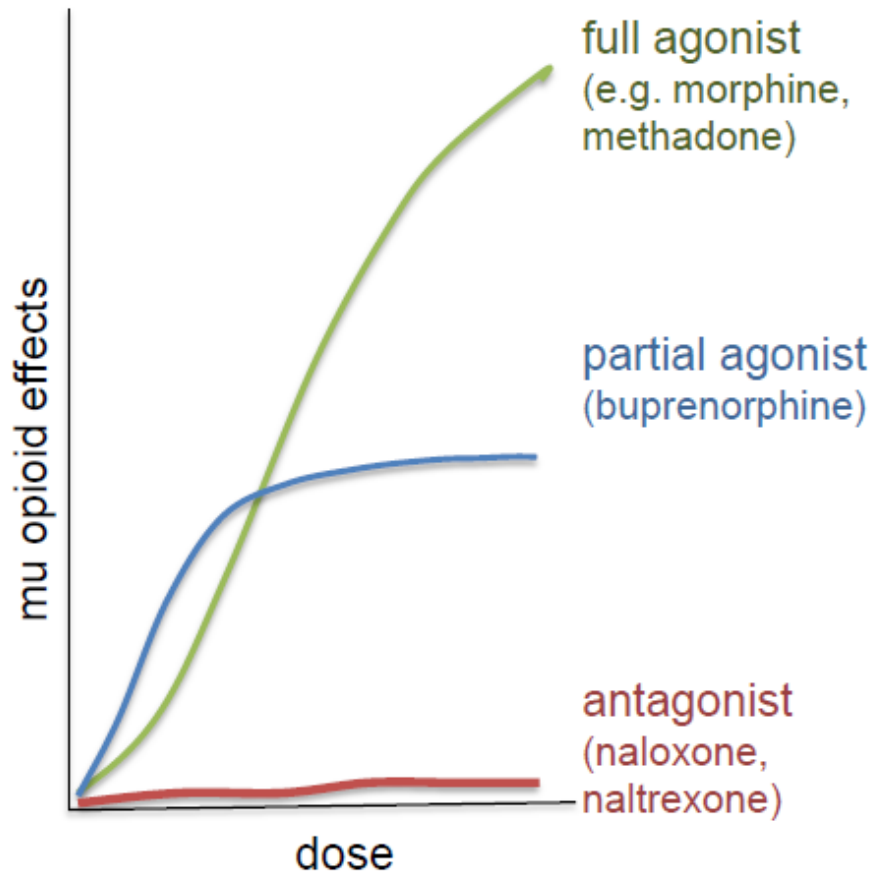
**Assessment:
Withdrawal
Symptoms**



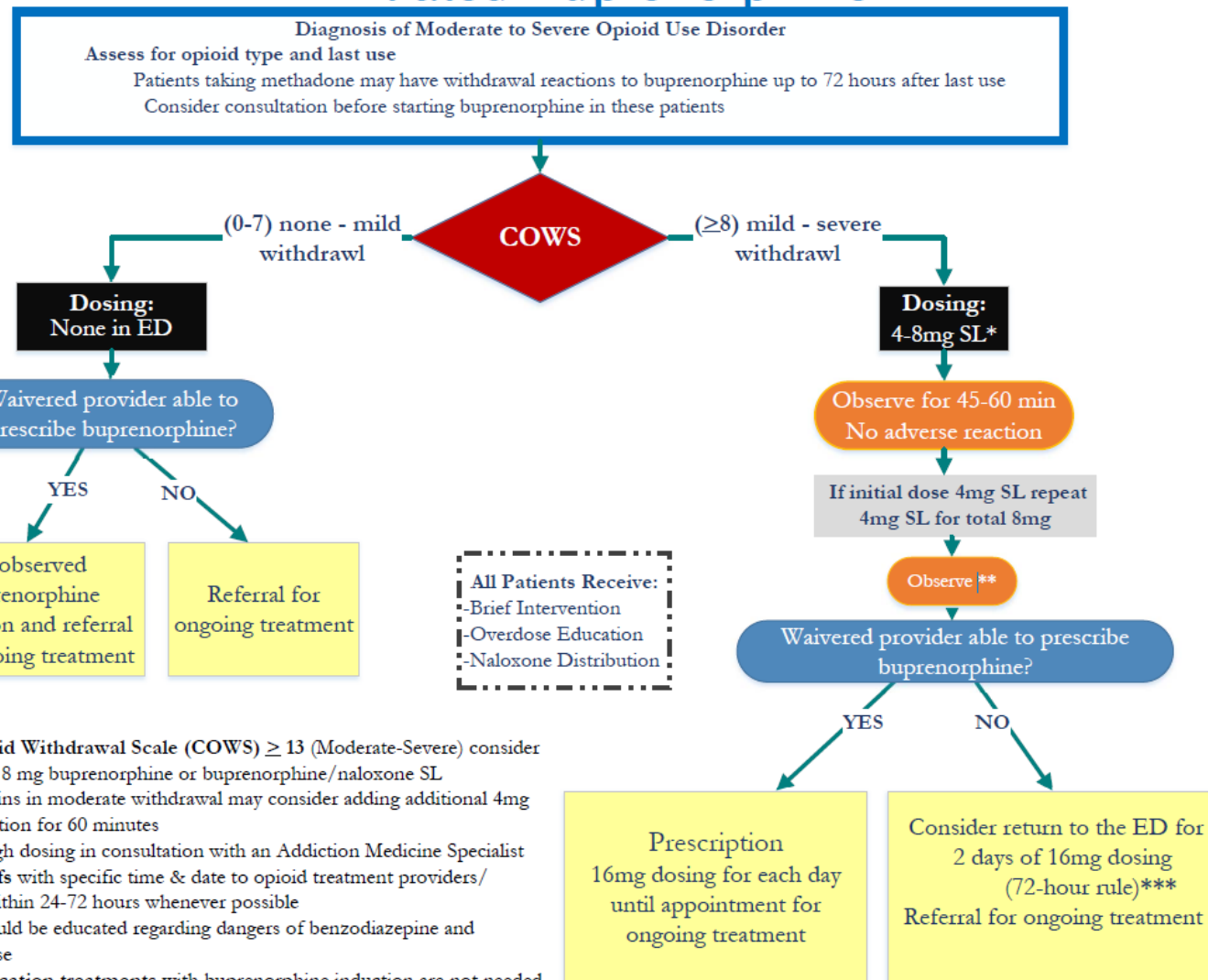
Figure 1: Clinical Opiate Withdrawal Scale (COWS)

Sign or Symptom	Score
Heart Rate	< 80 = 0 81-100 = 1 101-120 = 2 > 120 = 4
Sweating	None = 0 Subjective report = 1 Flushed or moist face = 2 Beads of sweat on face = 3 Sweat streaming of face = 4
Restlessness	Able to sit still = 0 Subjective reports of restlessness = 1 Frequent shifting or extraneous movements = 3 Unable to sit still for longer than a few seconds = 5
Pupil size	Normal or small = 0 Pupils possibly larger than appropriate = 1 Pupils moderately dilated = 2 Pupils so dilated that only rim or iris visible = 5
Bone or joint aches	None = 0 Mild diffuse discomfort = 1 Subjective reports = 2 Patient actively rubbing joints or muscles = 4
Rhinorrhea or lacrimation	None = 0 Congestion or moist eyes = 1 Rhinorrhea or lacrimation = 2 Nose constantly running or tears streaming = 4
Yawning	None = 0 Yawning 1-2 times = 1 Yawning > 3 times = 2 Yawning several times per minute = 4
Anxiety or irritability	None = 0 Subjective report = 1 Patient appears anxious = 2 So irritable that cannot participate in assessment = 4
Gooseflesh	Smooth skin = 0 Piloerection can be felt = 3 Prominent piloerection = 5





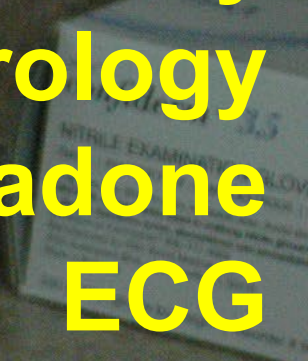
ED-Initiated Buprenorphine



Notes:

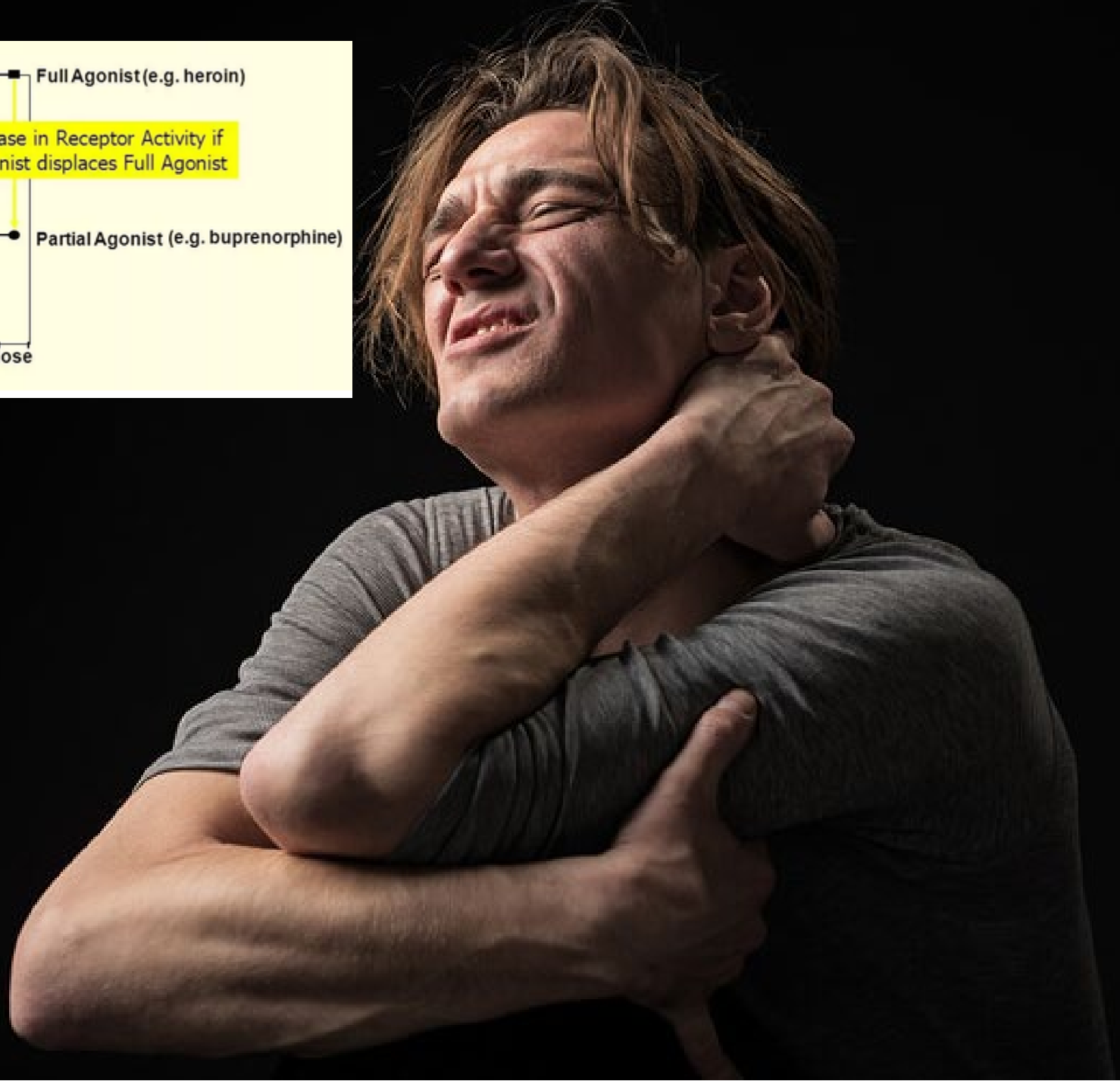
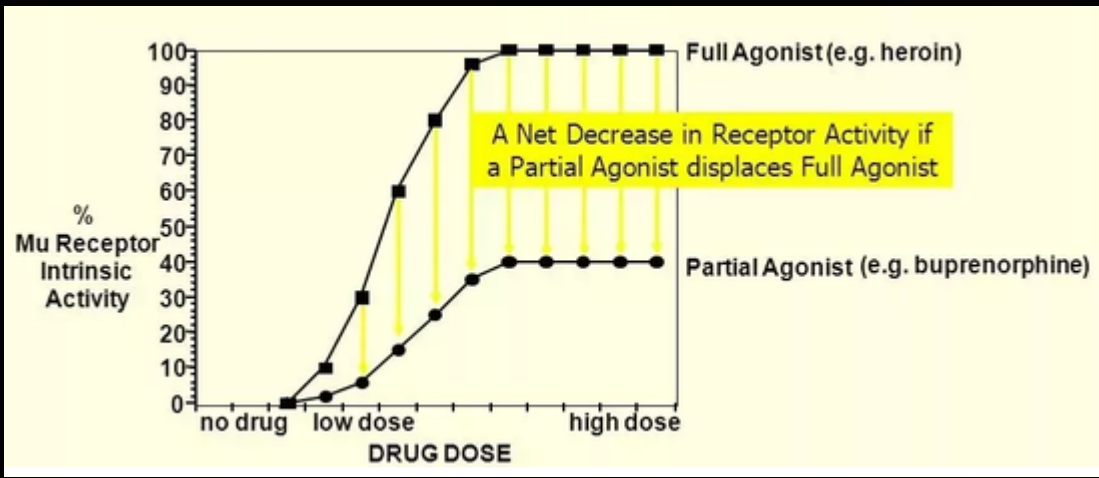
- *Clinical Opioid Withdrawal Scale (COWS) ≥ 13 (Moderate-Severe) consider starting with 8 mg buprenorphine or buprenorphine/naloxone SL
- ** Patient remains in moderate withdrawal may consider adding additional 4mg and observation for 60 minutes
- ***Consider high dosing in consultation with an Addiction Medicine Specialist
- Warm hand-offs with specific time & date to opioid treatment providers/ programs within 24-72 hours whenever possible
- All patients should be educated regarding dangers of benzodiazepine and alcohol co-use
- Ancillary medication treatments with buprenorphine induction are not needed

**Pregnancy
Virology
Methadone
ECG
Immunization Status**



The form contains several sections, including a header with patient information, a table for immunization status, and a table for laboratory results. The immunization table has columns for 'Vaccine', 'Date', and 'Status'. The laboratory results table has columns for 'Test', 'Result', and 'Reference Range'. The form is partially covered by a syringe and a vial.

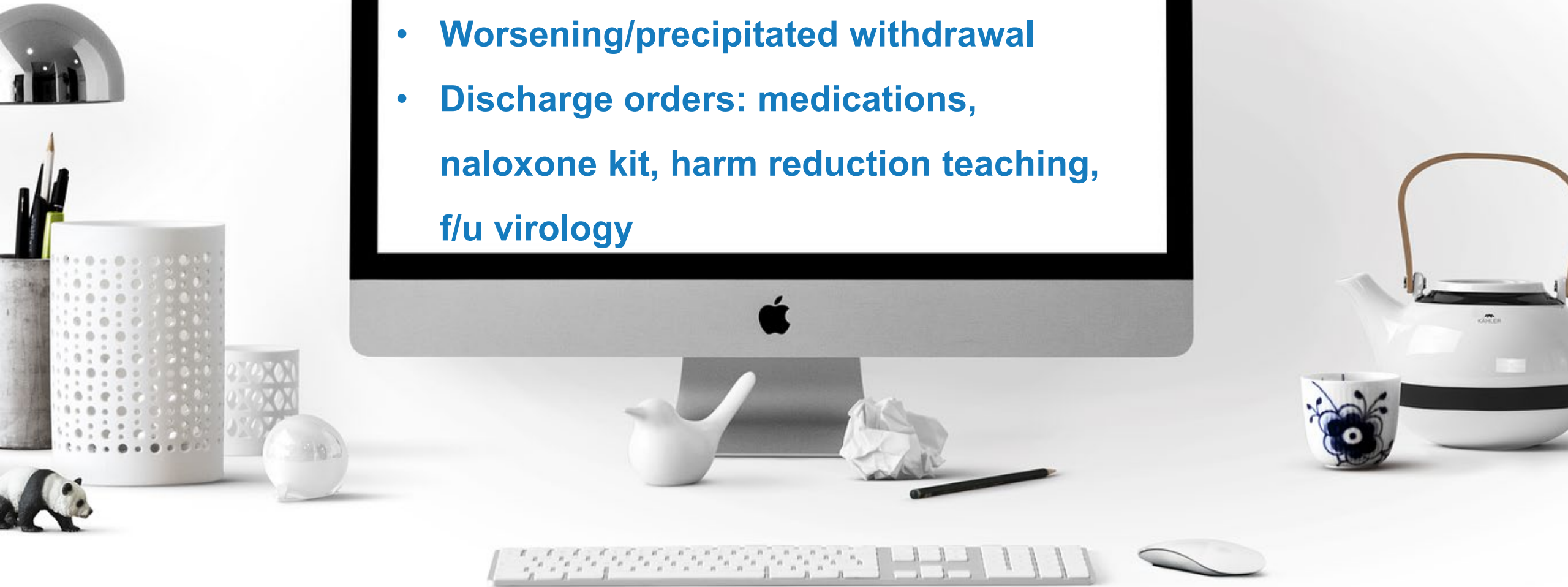




Team



- **Standardized orders**
- **Ancillary medications**
- **Withdrawal symptom reassessments**
- **Worsening/precipitated withdrawal**
- **Discharge orders: medications, naloxone kit, harm reduction teaching, f/u virology**



Yale EM Home Induction Guide

Scripts for
Induction Day,
Enough until
Follow-Up
Appointment
(7+ days)

Fill at Hospital
Pharmacy

A Guide to Begin Buprenorphine Treatment on Your Own

Before you begin you want to feel very sick from your withdrawal symptoms

It should be about . . .

- 12 hours since you used heroin/fentanyl
- 12 hours since snorted pain pills (Oxycontin)
- 16 hours since you swallowed pain pills
- 48-72 hours since you used methadone

You should feel at least three of these symptoms . . .


- Restlessness
- Heavy yawning
- Enlarged pupils
- Runny nose
- Body aches
- Tremors/twitching
- Chills or sweating
- Anxious or irritable
- Goose pimples
- Stomach cramps, nausea, vomiting or diarrhea

Once you are ready, follow these instructions to start the medication

DAY 1:

8-12mg of buprenorphine

Most people feel better the first day after 8-12mg. (Dosing depends on how early on the first day you started)

Step 1.		Step 2.		Step 3.		DAY 2: 16mg of buprenorphine
Take the first dose	Wait 45 minutes	Still feel sick? Take next dose	Wait 6 hours	Still uncomfortable? Take last dose	Stop	Take one 16mg dose
						
<ul style="list-style-type: none"> • Put the tablet or strip under your tongue • Keep it there until fully dissolved (about 15 min.) • Do NOT eat or drink at this time • Do NOT swallow the medicine 		Most people feel better after two doses = 8mg		<ul style="list-style-type: none"> • Stop after this dose • Do not exceed 12mg on Day 1 		Repeat this dose until your next follow-up appointment

If you develop worsening symptoms while starting buprenorphine before your scheduled outpatient appointment return to the emergency department

**Community Referral
Partners
Peer Recovery Partners
Medication Resources
Virology Clinic**

WESTERN 234 AVENUE

Psychiatry & Impairment Services

John B. Conroy, D.M.D.

Frank B. Thomas, D.M.D., Dr. West, Jr.

 Alaska Behavioral Healthcare
MediCare



Warm Hand-Off



Harm Reduction Teaching

CONTACT US FOR HARM REDUCTION SERVICES

Sanford: deliveries TUESDAYS + FRIDAYS 207-370-4782

Calais: deliveries THURSDAYS - 207-370-1042

Machias: deliveries daily + drop-in TUESDAYS AND
WEDNESDAYS 9-1pm @ 25 Main St. #15 - 207-370-1042

Aroostook County: mail delivery call/text 207-518-8424

STATE-WIDE MAIL DELIVERY NALOXONE + HARM
REDUCTION SUPPLIES: 207-370-9445

Need help with heroin or pain pills?

We want to help you get off opioids and started on Buprenorphine (Suboxone).

We can help you get into treatment.

Please ask here for more information.



centered around you

Substance Use

Drug Use:

Types:

Use/Week:

Comments:



Words Matter Terms to Use and Avoid When Talking About Addiction

This handout offers background information and tips for providers to keep in mind while using person-first language, as well as terms to avoid to **reduce stigma** and **negative bias when discussing addiction**. Although some language that may be considered stigmatizing is commonly used within social communities of people who struggle with substance use disorder (SUD), clinicians can show leadership in how language can destigmatize the disease of addiction.











**Humanization,
meaning,
choice, quality
of life & healing**

Resources

- Willis et al. A central unifying focus for the discipline of nursing. *Adv Nurs Science*. 2008; 31(1): E28-40.
- ENA Position Statement Committee 2016. (2016). Position statement: patients with substance use disorders and addiction in the emergency care setting. Available at: https://www.ena.org/docs/default-source/resource-library/practice-resources/position-statements/patientswithsubstanceuse.pdf?sfvrsn=6c33cad2_6.
- American Nurses Association. (2003). *Nursing's Social Policy Statement*, 2nd ed. Silver Spring, MD: ANA.
- Wesson DR, Ling W. The clinical opiate withdrawal scale (COWS). *J Psychoact Drugs*. 2003; 35(2): 253-259.
- Herring AA et al. Managing opioid withdrawal in the emergency department with buprenorphine. *Ann Emerg Med*. 2019; 73(5): 481-487.
- Yale School of Medicine. Academic detailing brochure: ED initiated buprenorphine & referral to treatment, a brief guide for ED practitioners. Available at: <https://medicine.yale.edu/edbup/resources/>
- Yale School of Medicine. A guide to begin buprenorphine treatment on your own. Available at: <https://medicine.yale.edu/edbup/discharge/>.
- National Institutes of Health. (2020). Words matter: terms to use and avoid when talking about addiction. National Institute on Drug Abuse. Available at: <https://www.drugabuse.gov/nidamed-medical-health-professionals/health-professions-education/words-matter-terms-to-use-avoid-when-talking-about-addiction>
- Strout TD, et al. Understanding ED buprenorphine initiation for opioid use disorder: a guide for emergency nurses. *J Emerg Nurs*. 2021; 47(1): 139-154.

Iania D. Strout, PhD, RN, MS
Maine Medical Center EM
strout@mmc.org
207.662.7049

PRICE LIST:
BREAD - Bannocks Bakery, 20oz - Available Friday's only
All bread items are traditional bakery techniques, passed down through generations, and are without, preservatives or dyes (as much as bakery baking)

PRODUCT	PRICE PER ITEM
Country Loaf	1.49
Whole Wheat	1.49
French Bread	1.49
Hot Roll	0.49
English Muffin	0.49
CRISPER BREADS	
Large Herb Bread	1.99
Large Sesame Seed	1.99
Large Multigrain or Stone Grind	1.99
Crusties	1.49
Large Herb Bread	1.99
Large Sesame Seed	1.99
Large Multigrain or Stone Grind	1.99

FRUIT & VEG, GT Produce, Leeds
We receive high quality, local produce whenever possible.
We have an extensive list of produce which varies daily. Please ask us for a list of what you need and we will do our best to get a price that works for you. We also have a variety of our Veg boxes!
TO ORDER: PLEASE EMAIL fruits@mmc.org OR CALL 207.662.7049
YOU WILL BE CONTACTED BY THE CHA LOUNGE TEAM.
YOU WHEN YOUR ORDER ARRIVES AND YOU CAN COME TO THE CHA LOUNGE. YOU CAN PAY VIA BACS.
DELIVERY DAYS ARE FRIDAY AND TUESDAY.
THANK YOU! THE CHA LOUNGE TEAM.

Come up for...
The best WiFi in the area
LIVE Jazz and Comedy
1st Thurs of every month
18:30 - 23:00
...cakes, bread, soups
...much more!
Cha Lounge
...dishes

#becurious