Buprenorphine Induction for Opioid Use Disorder

Quickstart Guide

Note: See separate guide for buprenorphine for pain.

Diagnose Moderate or Severe Opioid Use Disorder: DSM-5 Criteria (Link).



Choose Agent/Level of Care



Moderate tolerance < 360 MME Irregular or intermittent fentanyl use Stable home life, highly motivated No/limited access to OTP



Order Labs: CBC, CMP, HIV, Hep C, HepB SAb & SAg, syphilis, Upreg, GC/ Chlamydia, Urine Drug Screen

(ensure fentanyl, benzo confirmatory, opioid confirmatory, buprenorphine if indicated, EtG/EtS are included)



Home Induction: Most people.



Standard Induction:

Short acting opioids Most XR/ER opioids Handout (PDF)



High tolerance > 360 MME Regular fentanyl use Unhoused, no support Concomitant SUD(s): Alcohol, benzos, stimulants



Refer, Rx naloxone 4 mg/mL IN

Clinic Induction:

Unsafe to do at home (cognitive impairment, unhoused, etc)

Low-Dose (Micro) Induction:

To decrease the risk of precipitated withdrawal in people using methadone or illicit fentanyl Handout (PDF)

Visit 1

Order labs if not done already (see above)
Review patient handout for standard or micro-induction (linked above)
Prescribe enough buprenorphine for up to 1 week
Prescribe non-opioid meds to treat withdrawal (see below):

Clonidine	0.1-0.2 mg tab q4h prn hyperactivity
Hydroxyzine	25-50 mg q6h prn anxiety
Loperamide	2 mg q2h prn diarrhea
Ondansetron	4 mg q6h prn N/V
Ibuprofen	600 mg q6h prn pain
Trazodone	50 mg QHS prn insomnia

Follow up in 1 week or less; consider daily check-ins during low-dose (micro) induction. Rx naloxone 4 mg/mL IN.

Follow up visits:

Any opioid or drug use? Any cravings to use?



Yes: consider increased dose, increase frequency of visits/counseling, higher level of care



No: congratulate, build on success

Monitoring:

- Collect Urine for Monitoring
- Check PDMP
- Ensure they have Naloxone and know how to use it
- Plan relapse prevention

Schedule follow up:

- 1-2 weeks for new/struggling
- 2-4 weeks for dose adjustments
- 4-12 weeks for stable



OPIOID PRESCRIBER
SAFETY AND SUPPORT
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