

BUPRENORPHINE/NALOXONE (SUBOXONE)

Missed Dose Protocol

January 2024



Consecutive days missed (not counting day of presentation)	ED Dosing Instructions	Example: regular dose 16 mg SL
1-3	Give regular as prescribed and notify pharmacy	16mg
4	Discuss risk precipitated withdrawal. Give regular dose if patient agreeable. Notify pharmacy.	16mg
5+ (pharmacy cancels prescription)	Restart if other opioid use in last 5 days Consider: 1. Standard ED induction if in active withdrawal 2. Buprenorphine-to-go pack (standard) or 3. Micro-dosing Rx +/-phone consult	If no other opioid use in last 5 days= tolerance loss risk: Consider gradual dosing in the ED Gradual dosing: 8mg SL x 1 dose, repeat with 4-8mg q2 hrs until therapeutic

Consult for advice

- Local on-call addiction specialist.
- BCCSU 24/7 Addiction Medicine Clinical Support Line at **778.945.7619**

Harm reduction

People are at higher risk of overdose if they miss an OAT dose(s).

- Offer a take-home naloxone kit and safer use supplies.
- Direct to overdose prevention sites or supervised consumption sites.

More info: www.vch.ca/overdose



Transition of care

1. Document dose given in ED to minimize double dosing and prevent prescription cancellation:
 - Notify usual pharmacy **or**
 - Enter dose on Pharmanet via TMU function, if available in your ED
2. Community prescriptions are automatically cancelled after 5+ days missed:
 - Provide bridging prescription at usual dose **or**
 - Buprenorphine-to-go pack to continue on discharge.
3. Forward documentation to usual OAT provider or clinic.

For more clinical guidance

BCCSU OUD Care in the ED at
www.bccsu.ca/opioid-use-disorder/edcare/

