

# Medications for Opioid Use Disorder: Medication Administration Integrity

*Consideration of where and when to administer buprenorphine may be individualized to each facility.*

## IMPORTANT DEFINITIONS

### DIVERSION

- » The transfer of any legally prescribed substance to a person to whom it is NOT legally prescribed.
- » Any removal of medication from the medication administration process.

**Diversion** is not isolated to buprenorphine or methadone and can occur during storage, dispensing, administration, or wasting of any medication. Medication administration and monitoring procedures exist in all facilities; enhancing existing procedures may help alleviate concerns regarding diversion.

### MISUSE

- » Taking a medication at a time other than prescribed (e.g., saving it for later).
- » Taking a medication by a route other than prescribed (injecting, snorting).
- » Taking someone else's medication, even if for a legitimate medical complaint.
- » Taking a medication for a reason other than what it is prescribed for (i.e., to get high).

### CONTRABAND

- » Medication that originates outside the medication administration process.

## Best Practices for Medications for Opioid Use Disorder (MOUD) Administration

Dedicated custody **and** medical staff for medication administration

Combined clinical **and** custody staff training

### TO PREVENT DIVERSION PRIOR TO MEDICATION ADMINISTRATION

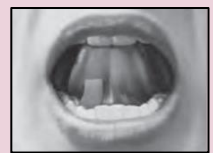
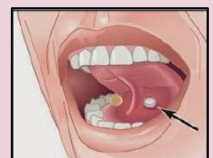
1. Do not allow patients to bring **anything to medication line** (nothing in their hands or otherwise on their person).
2. Roll up sleeves and no jackets or other garments over shirt.
- 3a. Completely remove mask.
- 3b. Completely remove dentures and other removable dental appliances.
4. Tie back hair.

### TO PREVENT DIVERSION PRIOR TO PLACEMENT IN THE MOUTH

1. Check mouth pre-medication.
2. Premoisten mouth with fluid.
3. Confirm film/tab is being removed from pouch. (Staff placing film/tab in mouth mitigates diversion opportunities.)
4. Direct observation of medicine under tongue.
5. Ensure all items are collected before leaving medication line (e.g., cup, foil pouch).

### TO PREVENT DIVERSION AFTER PLACEMENT IN THE MOUTH

1. Ensure medication pass occurs in unobstructed space with total line of sight.
2. Instructions to:
  - a) Keep mouth closed.
  - b) Do not swallow (staff visually monitor and conduct mouth check if patient swallows).
  - c) Patient education that the medication must dissolve under the tongue or inside the cheek<sup>3</sup> to work; it will not work if swallowed.
3. Patient's hands\* (options for hand placement include sitting on hands, placing hands behind back, in front or on top of table).
4. For films, monitor for at least four minutes. For tabs, monitor for at least six minutes.<sup>1</sup>
5. Mouth check to confirm films/tabs dissolved.
6. After the medicine is completely dissolved, have patient take a large sip, swish gently around teeth and gums, and swallow water.<sup>2</sup>
7. Educate patient not to eat or drink for 30 minutes and wait at least 1 hour before brushing teeth to avoid damage to teeth.<sup>2</sup>



*\*Hand placement, duration of monitoring, type of staff, and possible video surveillance to monitor will be determined by facility and may vary per housing unit within a facility.*

<sup>1</sup> Lintzeris N. et al. A Randomised Controlled Trial of Sublingual Buprenorphine-Naloxone Film Versus Tablets in the Management of Opioid Dependence. Drug Alcohol Dependence, 2013. 131 (1-2), 119-26.

<sup>2</sup> <https://www.fda.gov/drugs/drug-safety-and-availability/fda-warns-about-dental-problems-buprenorphine-medicines-dissolved-mouth-treat-opioid-use>

<sup>3</sup> [disorder#:~:text=FDA%20is%20warning%20that%20dental,disorder%20\(OUD\)%20or%20pain](https://www.fda.gov/drugs/drug-safety-and-availability/fda-warns-about-dental-problems-buprenorphine-medicines-dissolved-mouth-treat-opioid-use)

<sup>3</sup> For buccal formulation

## Sample Clinical Pathway for Patient Suspected of or Identified as Misusing or Diverting MAT

