

Buprenorphine Home Induction Guidelines

Congratulations on your decision to start treatment with medication for opioid use disorder (MOUD). Buprenorphine (Suboxone®) is a safe and effective medication that is specially formulated to help patients stop using opioids, including heroin, fentanyl and certain pain medications. MOUD treatment consists of three phases: induction (first few days), stabilization (several weeks) and maintenance (timeframe established through shared decision between you and your provider).

MOUD treatment is more successful if you appropriately prepare for your first dose, so it is imperative that you set aside sufficient time to focus on the induction process (consider taking a day or two off from work or other obligations if possible). You must wait until you experience significant withdrawal symptoms before taking buprenorphine. If you have been using short-acting opioids (e.g., oxycodone, hydrocodone, heroin) wait at least 12-24 hours since your last use. If you have been using long-acting opioids (e.g., ms contin and methadone), you may require 36-48 hours of abstinence before experiencing sufficient withdrawal symptoms. To help guide you, you should feel **at least three** of the following:

- ☐ Very restless, can't sit still
- ☐ Twitching, tremors, or shaking
- ☐ Enlarged pupils
- ☐ Bad chills or sweating
- ☐ Joint and bone aches
- ☐ Heavy yawning
- ☐ Runny nose, tears in your eyes
- ☐ Goose flesh or goose bumps
- ☐ Cramps, nausea, vomiting or diarrhea
- ☐ Anxious or irritable

You may also use the Subjective Opioid Withdrawal Scale (see handout) to guide you – start when you score 17 or higher.

Once you are ready to start buprenorphine, use the following schedule:

Day 1

1. Take prescription to pharmacy and fill prescription for #17 4 mg/1 mg buprenorphine/naloxone (Suboxone) films.
2. Take 4 mg buprenorphine under your tongue (do not swallow the medication or eat/drink for at least 15 minutes to ensure absorption).
3. Following your first dose, wait approximately one hour before determining how you feel.
4. If your withdrawal symptoms have resolved, do not take any more medication on Day 1 (today).
5. If you continue to have withdrawal symptoms, take another 4 mg under your tongue.
6. Again, wait another hour before assessing your withdrawal symptoms. If you are feeling better, no additional medication is needed. If symptoms persist, you may take a third 4 mg dose (for a total of 12 mg) on Day 1.

Day 2

1. Begin Day 2 by calculating the total dose of medication taken on Day 1.
2. Once you have determined the total dose, take this amount and wait approximately one hour.
3. If you are not experiencing withdrawal symptoms, no further medication is needed on Day 2.
4. If you continue to experience withdrawal symptoms, you may take an additional 4 mg-8 mg (for a total of 16 mg) on Day 2.

Day 3

1. If you experienced resolution of your symptoms with minimal or no side effects at the end of Day 2, take the same total dose you took on Day 2.
2. If the dose was more than 8 mg, you may want to split the dose into a half dose in the morning and a half dose in the evening. If you felt tired, groggy or over-sedated at the end of day 2, consider taking 2 mg or 4 mg **less** on Day 3.
3. If you still felt some withdrawal at the end of Day 2, you may take an additional 4 mg (for a total of 16 mg) on Day 3.

Day 4 and beyond

1. Take the total dose you took on Day 3.
2. If the dose was more than 8 mg, you may want to split the medication into half in the morning and half in the evening.

Your addiction care coordinator nurse is _____

and you may contact them with questions at _____ .

Your follow up appointment is with Dr. _____

on _____ at _____ a.m. p.m.

