When to Prescribe Naloxone?

A Quick Reference Guide for MHS Providers

Assess/Offer

Prescribe naloxone if a patient

- ❑ **Has a Morphine Equivalent Daily Dose (MEDD) ≥ 50**
- ❑ **Has a Risk Index for Overdose or Serious Opioid-Induced Respiratory Depression (RIOSORD) Score > 32**
  - RIOSORD scores located on the Opioid Registry and Patient Look up Tool at https://carepoint.health.mil/
  - New diagnoses and prescriptions impact RIOSORD scores, but scores are not re-calculated in real-time. Manual calculations are recommended (see page 2 for worksheet).
  - Check prescription drug monitoring program (PDMP) database to assess outside opioid prescriptions: http://www.nascsa.org/stateprofiles.htm
- ❑ Has a benzodiazepine co-prescription with opioids
- ❑ Is on long-term opioid therapy
- ❑ Is considered at risk per your clinical judgment
- ❑ Directly requests naloxone

Notify & Educate

Notify

- ❑ The patient's other providers of opioid and naloxone prescriptions

With Patients…

Review Brochures

- ❑ Opioid Safety: A Quick Reference Guide
- ❑ Naloxone Administration: A Quick Reference Guide on How to Respond to a Suspected Opioid Overdose

Safeguard

- ❑ Properly dispose of unused opioids to protect others
- ❑ Know where naloxone is stored in the event of an overdose
- ❑ Involve family member(s) in education, if possible
- ❑ Recognize signs and symptoms of an overdose

Respond to an overdose

- ❑ Administer naloxone
- ❑ **Contact 911 immediately**

Document

Document in the electronic health record

- ❑ If naloxone was prescribed and why (e.g., risk indicated, patient request, clinical judgment)
- ❑ If naloxone was offered, but declined
- ❑ RIOSORD score
- ❑ High-risk opioid alerts and risk assessment results (including urine drug test results, PDMP findings)

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Risk Index for Overdose or Serious Opioid-Induced Respiratory Depression (RIOSORD): Calculate risk by completing RIOSORD assessment	Circle if "YES"
In the past 6 months, has the patient had a health care visit (outpatient, inpatient, or ED) involving:	
• Opioid dependence?	15
• Chronic hepatitis of cirrhosis?	9
• Bipolar disorder of schizophrenia?	7
• Chronic pulmonary disease? (e.g., emphysema, chronic bronchitis, asthma, pneumoconiosis, asbestosis)	5
• Chronic kidney disease with clinically significant renal impairment?	5
• Active traumatic injury, excluding burns? (fracture, dislocation, contusion, laceration, wound)	4
• Sleep apnea?	3
Does the patient consume:	
• Extended release or long acting (ER/LA) formulation: An ER/LA formulation of any prescription opioid or opioid with long and/or variable half-life? (e.g., OxyContin, Oramorph-SR, methadone, fentanyl patch, levorphanol)	9
• Methadone? (Methadone is a long-acting opioid, so also circle for "ER/LA formulation")	9
• Oxycodone? (If it has an ER/LA formulation [OxyContin], also circle for "ER/LA formulation")	3
• A prescription antidepressant? (e.g., fluoxetine, citalopram, venlafaxine, amitriptyline)	7
• A prescription benzodiazepine? (e.g., diazepam, alprazolam)	4
Is the patient's current maximum prescribed opioid dose: (Use Opioid Daily Dose Conversion Table below)	
• ≥100 mg morphine equivalents per day?	16
• 50 – <100 mg morphine equivalents per day?	9
• 20 – <50 mg morphine equivalents per day?	5
In the past 6 months, has the patient:	
• Had 1 or more ED visits?	11
• Been hospitalized for 1 or more days?	8
TOTAL SCORE (add up "YES" response values). **If score > 32, PRESCRIBE NALOXONE→**	

Opioid Daily Dose Conversion Table:	Calculate Morphine Equivalent Daily Dose (MEDD) by multiplying daily dose for each opioid by the conversion *	
Type of Opioid (doses in mg/day except where noted)	Conversion Factor	MEDD (enter calculation here)
• Buprenorphine patch	12.6	
• Buprenorphine tab or film	10	
• Butorphanol (Stadol)	7	
• Codeine	0.15	
• Fentanyl transdermal (in mcg/hr)	2.4	
• Hydrocodone	1	
• Hydromorphone	4	
• Meperidine	0.1	
• Methadone		
○ 1-20 mg/day	4	
○ 21-40 mg/day	8	
○ 41-60 mg/day	10	
○ ≥ 61-80 mg/day	12	
• Morphine	1	
• Oxycodone	1.5	
• Oxymorphone	3	
• Tapentadol IR	0.4	
• Tramadol	0.1	

Opioid Daily Dose Conversion Table:	Calculate Morphine Equivalent Daily Dose (MEDD) by multiplying daily dose for each opioid by the conversion *
**These dose conversions are estimated and cannot account for all individual differences in genetics and pharmacokinetics.*	