Welcome to the Office Based Treatment of Opioid Dependence Program at OnCall Urgent Care Centers. If you have an Emergency, dial 911. If you would like to speak with the Director, call 6 Hatfield Street, Northampton, MA 01060 in 413-584-7425.

Orientation Manual

To start our program you must:

☑️ Have active insurance with benefits that cover treatment

☑️ Substance abuse counseling/therapy in place
of the Suboxone Program, please call 413-584-7425. Our hours of operation are: Monday through Friday from 9 am – 9 pm, weekends and holidays from 9 am – 5 pm. The clinic is open 365 days a year.

The purpose of our Opioid Dependence Program is to provide you with an alternative to narcotics (heroin, methadone, oxycontin, percocet, vicodin, etc).

What is Suboxone?
Suboxone is a medication used to treat chronic opioid dependence.

What are opioids?
Natural opioids (morphine, codeine) are substances that are derived from the opium poppy. Endogenous opioids (endorphins) are produced by the human body during exercise. Semi-synthetic opioids (oxycontin, hydrocodone, oxymorphone) are produced in the laboratory from natural opioids. Synthetic opioids (fentanyl, propoxyphene) are manufactured 100% in the lab.

How does the Suboxone Program work at OnCall Urgent Care Centers?
The Suboxone Program is part of the Office Based Opioid Treatment Program offered at OnCall Urgent Care Centers. Suboxone is a pill that patients take as a substitute for narcotics (like heroin and oxycontin). In addition to using Suboxone, all of our patients are involved in counseling to address the psychological aspects of drug addiction. OnCall provides the medical management of Opioid Addiction (prescribing Suboxone, checking tox screens and labs); counseling takes place outside of the clinic.

How does Suboxone Work?
Suboxone is an opioid. Like all opioids, Suboxone works by binding to a receptor called the mu-receptor. The mu-receptor lives on the surface of cells in the body and the opioid is what activates the receptor. Think of it as a door with a lock on it. The receptor is the lock. The opioid is the key. In order to get high from morphine or treat pain with percocet, the key must fit into the lock. During exercise, endorphins are the key. If you are using street drugs, they are the key. If you are on Suboxone, Suboxone is the key. Some drugs bind for a long time, others for a short time. Some bind and turn the receptor on; others bind and turn the receptor off.


When opioids enter the bloodstream, they go to the brain and attach to the mu-receptor which is located on the outside surface of the cell. This causes a chemical, called dopamine, to be released in an area of the brain called the nucleus accumbens. Increased levels of dopamine cause euphoria (that feeling of being high). Repeated use of opioid drugs cause the mu receptors to become tolerant which means that you need higher and higher doses of the drug in order to get the same high feeling. Over time, the brain changes so that it only functions “normally” when opioids are present and bound to the receptors.
If you stop using drugs, the opioids leave the receptor. Brain chemistry goes out of whack and noradrenalin is released. Increasing levels of noradrenalin cause the symptoms of withdrawal. Cravings may also be present at this time.

**Enter Suboxone**

Once you take SUBOXONE sublingually (under your tongue), the buprenorphine (1) enters the blood and travels to the brain where it binds to the mu receptor. The dopamine levels go up and you feel better, (2). As a partial agonist, (it only partly binds the receptor but blocks other opioids from binding) buprenorphine produces less euphoria than a full opioid agonist but is sufficient to suppress withdrawal and cravings.

Noradrenalin

Buprenorphine’s sticks to the mu receptor better than other opioids and therefore keeps them from binding. Buprenorphine (Suboxone) stays in the system for a long time, therefore, once a maintenance dose is established, withdrawal and cravings will be controlled.


**Who Can Prescribe Suboxone?**

Not all physicians can prescribe Suboxone. To prescribe Suboxone, a physician must either be a specialist in Substance Abuse treatment or they must have completed specialized training that certifies them as a Suboxone Provider. Once a physician is certified as a Suboxone Provider, they may care for up to 30 patients during their first year of practice and up to 100 patients per year thereafter. At OnCall Urgent Care Center we currently have four physicians certified to prescribe Suboxone.

All of the Physicians and Physician Assistants at OnCall Urgent Care Centers are experts in Emergency Medicine. They will manage the medical therapy for people in the Suboxone program. Medical therapy includes:

1. Medical Appointments
2. Laboratory Testing and Evaluation
3. Suboxone medication management

Behavioral therapy (counseling) will be arranged by you in cooperation with the Director of the Suboxone Program at OnCall Urgent Care Centers.

**What is the philosophy of OnCall with regard to treating opioid dependence?**

At OnCall we believe that opioid dependence is a chronic disease. Chronic diseases such as opioid dependence, asthma, diabetes, and obesity are best treated through **harm reduction**. Clean needles are an example of harm reduction for injection drug users. Condoms reduce harm in patients with HIV. Suboxone can reduce harm in patients with chronic opioid dependence.
Why does OnCall Require Suboxone

Patients to be in Therapy?
Research has shown that successful treatment of opioid dependence requires a program that combines medical management (Suboxone) and behavioral therapy (counseling, intensive outpatient therapy, AA, NA, etc.). Therapy is mandatory to be in this program.

Is it possible to ever get off Suboxone?
Yes. There are people who taper off of Suboxone. Generally, these patients are involved in intensive therapy, have an extensive social support network, and have tapered off Suboxone over a long period of time.

At OnCall we treat chronic opioid dependence as a lifelong disease. We hope that folks that are dependent on opioids can get to a place in their lives where they can do the same. This takes the shame out of the disease. Diabetes is life-long. A diabetic patient may control their blood sugar with diet and exercise and not require medication. They are still diabetics. We are not asking for a cure. We want people to get healthy, one day at a time.

What happens if I use opioids while I am taking Suboxone?
At OnCall Urgent Care, we understand the nature of chronic opioid dependence. Relapse can be part of the disease. If you relapse (we check urine tox screens randomly) more than 3 times in a 12 month period, you will be taken off of Suboxone and offered a higher level of supervision, such as methadone, detox, or intensive outpatient therapy. When your treatment team feels that you are ready, you will be welcomed back to the Suboxone Program.

What is “medication management”?
Treatment of chronic opioid dependence with Suboxone has two parts: medication management and behavioral therapy. Medication management is under the supervision of a Suboxone Certified Physician. Behavioral therapy is via a psychologist, therapist, psychiatrist or alcoholics anonymous. Medication management is individualized and follows a six step protocol which includes:
1. Prescreening
2. Intake
3. Induction
4. Stabilization
5. Maintenance
6. Medical Withdrawal

Prescreening
Prescreening involves reading this handout to determine if you think the Healthy Living Program at OnCall Urgent Care Centers is appropriate for you. If it is, kindly complete Forms Packet and bring it back to the OnCall Urgent Care Center (6 Hatfield Street, Northampton, MA 01060). The Program Director will review the forms and contact you to discuss whether an intake should be scheduled.

Intake
Intake is where you review all of the requirements of the program with the program director. Your first tox screen and labs are drawn and you undergo a full physical examination. The counseling requirement will be reviewed and once your therapy appointment is confirmed, you will be scheduled for Suboxone Induction.

Induction
Induction transitions you from your opioid of choice to Suboxone. Because of the way that Suboxone works in your cells, you have to be in moderate to severe withdrawal before you take your first dose of Suboxone. Your

On the first day of induction (your second visit to OnCall) you will receive a prescription for Suboxone and take it to Walgreen's Pharmacy to be filled. Walgreens is located at 70 Main St, Florence, MA 01062 (413) 586-1190. This is the only location you are allowed to fill your Suboxone prescription.

<table>
<thead>
<tr>
<th>Day</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>8:30 am – 7:00 pm</td>
</tr>
<tr>
<td>Friday</td>
<td></td>
</tr>
</tbody>
</table>
You will return to the clinic to take your first dose of Suboxone. Suboxone should not be swallowed. Suboxone should be placed under the tongue and allowed to dissolve over five to ten minutes. If you take Suboxone and there are still high levels of narcotics in your system, you will most likely get worse and may need stabilizing treatment at the clinic. This is called precipitated withdrawal.

Typically, Suboxone is dosed as follows:
- Day 1: Up to 8 milligrams
- Day 2-7: Up to 16 milligrams divided twice a day
- Days 7 and beyond: Once a day dosing

It is recommended that you take at least 2 days off from work for the induction.

Stabilization
Stabilization lasts from days to weeks. During this time you will be in counseling and you will see the Suboxone provider as often as needed to keep you medically stable. During stabilization, you will have weekly appointments at OnCall and urine tox screens will be obtained. After EIGHT consecutive clean urines, if you are comfortable, you can be seen every two weeks. Your treatment team will determine, thereafter, if you are ready to move beyond two week appointments. We understand that relapses happen. If you relapse and have a dirty urine sample, we will see you back at the clinic for weekly appointments.

Maintenance
Maintenance last from weeks to months, depending on your situation. The focus will be on continued participation in counseling, relapse prevention, and harm reduction. You remain on Suboxone in the maintenance phase.

Medical Withdrawal
At some point in the future you will talk with the provider about weaning down the dose of Suboxone. When you are ready, you will be able to decrease your Suboxone dose because your brain will be ready to accept smaller and smaller doses and still keep you free from cravings.

Will I have any discomfort during withdrawal?
Yes. Withdrawal is uncomfortable. There are several non-narcotic medications that can be prescribed for patients feeling poorly during induction.

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Medication</th>
</tr>
</thead>
<tbody>
<tr>
<td>Muscle Aches</td>
<td>Ibuprofen</td>
</tr>
<tr>
<td>Headache</td>
<td>Tylenol</td>
</tr>
<tr>
<td>Abdominal Pain</td>
<td>Maalox</td>
</tr>
<tr>
<td>Diarrhea</td>
<td>Imodium</td>
</tr>
<tr>
<td>Nausea and Vomiting</td>
<td>Phenergan</td>
</tr>
<tr>
<td>Insomnia</td>
<td>Benadryl</td>
</tr>
</tbody>
</table>

I have heard that Suboxone tastes bad. Is there anything I can do to make it taste better?
Yes. Some people advocate drinking a bit of soda before placing the pill under the tongue or using a breath strip. Also, crushing the pill before placing it under the tongue will allow it to be absorbed more quickly.

How is Suboxone Dosed?
Suboxone is a once a day drug. During induction, however, you may need several small doses of Suboxone throughout the day. This is because all of the mu-receptors are not yet full. Once they are, daily dosing will be all that is required.

The results of your urine tox screens will be linked to the time of day you take your Suboxone. If you spread the doses out, the urine levels will be low. Low levels of Suboxone in the blood = diversion and we would suggest you move off the Suboxone program to a higher level of supervision such as methadone maintenance, inpatient, or intensive outpatient treatment. The desire to take Suboxone more than once a day is psychological and should be addressed in therapy.

Are there any Safety Issues Associated with Taking Suboxone?
Some patients taking Suboxone will experience an elevation in their liver enzymes (hepatitis). If this happens, your dose will have to be lowered or stopped. Shooting suboxone can kill you. Most deaths from Suboxone overdose occur because Suboxone is mixed with alcohol or a medication that depressed brain activity (valium, ativan, xanax, sleeping pills, tranquilizers, etc.). Suboxone has the potential for abuse and can produce dependence. Suboxone withdrawal is not considered to be as severe as withdrawal from other narcotics.

**Does Suboxone have any side effects?**

All medications have side effects. Signs and symptoms of a severe allergy include difficulty breathing and a rash. If this occurs, call 911 immediately and get to an ER. Less serious side effects include feeling faint, dizzy, jaundice (skin turns yellow), loss of appetite, sleepiness, sleeplessness, constipation, and headache. Let your physician know right away if you experience any of these side effects.

**Will I have to bring my pills to each visit?**

Yes. We do pill counts at every visit. You should bring your medication with you, and it must be in its original container.

**What happens if I lose my pills?**

If your prescription is lost, stolen or damaged, you will have to wait until your next scheduled appointment to receive another prescription. Please call the clinic as soon as you know this has happened so that we can make a note of it in your medical record. **Due to various legal factors, your Suboxone prescription will not be refilled early for any reason what so ever. Therefore, please take good care of it. Keep your Suboxone in a secure place otherwise you may find yourself going without until your next scheduled appointment.**

**What kind of drug testing is done for Suboxone patients?**

Urine tox screens for drugs of abuse and Suboxone are performed both randomly, and at each scheduled visit, on every patient in the program. Blood tests to evaluate liver function are also obtained because Suboxone can cause liver enzymes to become out of whack. If this happens, the Suboxone dose will have to be adjusted.

**Do you require “observed” urines?**

Urine screens for Suboxone patients are performed both randomly, and at each scheduled visit, on every patient in the program. Blood tests to evaluate liver function are also obtained because Suboxone can cause liver enzymes to become out of whack. If this happens, the Suboxone dose will have to be adjusted.

**Do you require “observed” urines?**

Urine screens for Suboxone patients are performed both randomly, and at each scheduled visit, on every patient in the program. Blood tests to evaluate liver function are also obtained because Suboxone can cause liver enzymes to become out of whack. If this happens, the Suboxone dose will have to be adjusted.

Any intentional tampering or manipulating a urine test will result in discharge.

Failure to leave ALL of your
belongings in the designated room will result in a strike.

Can you explain the “three strike” rule?

At OnCall Urgent Care Centers there is a three strike policy. You can relapse twice without being discharged from the program. On the third strike, you will be off Suboxone and offered a more structured opioid treatment environment such as inpatient, intensive outpatient, or methadone maintenance. There are several circumstances which will result in a strike. They include (but are not limited to):

- Failure to adhere to set counseling schedule

- Abusive behavior in the clinic by the patient or any member of their party
The use of foul language by the patient or any member of their party

Urine positive for any drug of abuse

Failure to appear for scheduled follow-up

Is there ever a situation that would cause be to be kicked out of the program?

Yes. Sometimes we have to take you out of the Suboxone program immediately and suggest you enter a more structured environment such as inpatient, intensive outpatient, or methadone maintenance. Examples where this may need to occur might include (but are not limited to):

A negative urine test for Suboxone. The testing is so sensitive now that you will come up positive even if you are only taking 2 mg a day and miss a dose.
If the police call us and tell us that you have been picked up with Suboxone on your possession, in a geographic area which has been identified as an area where illicit drugs are bought and sold.

A pharmacy informs us that you are receiving narcotics from another provider or Suboxone from another provider.

We believe that you have lied to us about your use of controlled substances.

3 Dilute urines will result in discharge.

What are the other requirements for Participation in the Suboxone Program?

1. You are required to inform OnCall Urgent Care of any new medications that you are taking—prescription or non-prescription.
2. You are required to inform OnCall Urgent Care of any side effects that you are experiencing from your medications.
3. You are required to bring your Suboxone bottle to each visit so that a pill count can be completed.
4. You are required to be in substance abuse therapy.

Can I take Suboxone if I am Pregnant?
No. Suboxone is not FDA approved for use in pregnancy. For this reason, women of child bearing age must have a pregnancy test performed each month. If the test is positive, the Suboxone will have to be stopped immediately. Subutex, after assessment by the physician or physician assistant on staff, will then replace your Suboxone prescription.

I don't really think that I'll need a counselor. Is there any way to get into your program without a counselor?
No. Most people that have become dependent on an opioid will require counseling to help them cope with their chronic disease. Every person that is in the Healthy Living Program at OnCall Urgent Care Center is required to be in counseling. It is well known that treatment with medication plus counseling is associated with fewer relapses than counseling or medication management alone.
For every person that is in a Suboxone program, there are several on a waiting list that can’t get into a program. Our program is strict about counseling because we want you to be successful. Since we are only qualified to manage your medications, we are only providing half of the care that you need. Counseling is as important as taking your medication and having clean drug tests.

Why should I try Suboxone instead of just quitting on my own?
Years of experience have shown that methadone maintenance decreases death rates among opiate users. You are much more likely to die from an overdose if you relapse while trying to abstain than if you are in a methadone maintenance program. The same hope exists for Suboxone.

Does Insurance Cover Suboxone?
Please call your insurance plan before intake to find out if your Suboxone treatment will be covered. If it is not, we are required by law to charge you the same amount that we charge any patient for the same level of service. The table below shows the current charges for each level of service as of February 2009. This is the amount that we bill the insurance company for your visit. It is also the amount, required by law (Centers for Medicare and Medicaid Services) that we must charge self pay patients.

<table>
<thead>
<tr>
<th>Service Level</th>
<th>Charge</th>
</tr>
</thead>
<tbody>
<tr>
<td>99201</td>
<td>$70.00</td>
</tr>
<tr>
<td>99202</td>
<td>$100.00</td>
</tr>
<tr>
<td>99203</td>
<td>$140.00</td>
</tr>
<tr>
<td>99204</td>
<td>$200.00</td>
</tr>
<tr>
<td>99205</td>
<td>$205.00</td>
</tr>
<tr>
<td>99211</td>
<td>$40.00</td>
</tr>
<tr>
<td>99212</td>
<td>$60.00</td>
</tr>
<tr>
<td>99213</td>
<td>$80.00</td>
</tr>
<tr>
<td>99214</td>
<td>$145.00</td>
</tr>
<tr>
<td>99215</td>
<td>$185.00</td>
</tr>
</tbody>
</table>

The intake Suboxone visit is usually a Level 99295 (about $500) and subsequent visits are generally 99213. These charges do not include the cost of laboratory tests. Quest Labs, a private company, has an office in the Urgent Care Center and charges separately for their services. Willow labs, also an “outside lab” is responsible for our urine toxicology testing and charges separately for their services.

Copays are becoming a greater expense for patients. Ten years ago, the average office visit co-pay was around $5.00. Today it is $25.00. This is a result of insurance companies passing more and more of the cost of insurance over to the customer. Co-pays must be paid on the date of service.

If you do not pay your copay, OnCall Urgent Care Center runs the risk of not being able to remain in business. On Call is committed to the Suboxone program and to keeping the workers at the clinic employed. To do this we either need to rely on grant money or the money collected from office visit. If you are not able to pay your copay you will not be able to remain in the program. We apologize for this inconvenience. However, we must enforce this policy.

Is my Suboxone medical record confidential?
Yes. There are certain people that we can share your medical information with. Federal laws and regulations require that OnCall Urgent Care maintain the confidentiality of your medical record. Generally, we may not say to a person outside the practice that you attend our practice or our Suboxone program. We may not disclose any information that would identify you as being alcohol or drug dependent unless:
1. You consent to it in writing
2. There is a court order to release your medical record

6 Hatfield Street, Northampton, MA 01060
413-584-7425
3. We need to make the disclosure to medical personnel in a medical emergency or to qualified personnel for research, audit, or program evaluation. 

Violation of the laws that protect your confidentiality is a crime. Suspected violations may be reported to appropriate authorities in accordance with federal regulations. Your records are not protected if you commit a crime at the practice, against the practice, against any employee or worker at the practice or if you threaten to do so.

OnCall Urgent Care has the right to discuss all diagnostic and treatment details with dispensing pharmacists or other professionals including your therapist, your PCP, and any consultants that you have been referred to.

**Do I have to sign a contract to participate in the Suboxone Program at OnCall Urgent Care Centers?**
Yes. You will be signing a treatment contract with OnCall Urgent Care Centers. The contract states that you have read, understand, and will adhere to the requirements of the program. All drugs, no matter how safe, have side effects and very very rarely can even cause death. We would not prescribe a drug that we believe would harm you, but you must be aware that you risk side effects when you take this drug and that all drugs are potentially lethal. Suboxone is **not** safe to take if you are also taking other opioids. A previous patient took Suboxone and Methadone together and nearly died.

**How Many Appointments will I have to attend?**
The typical number of appointments you will have to attend are:
- Intake: 2 hours
- Induction day 1: 1.5 hours
- Induction day 2: 1 hour
- Day 7 visit
- Day 14 visit
- Day 28 visit
- Day 35 visit

**Your treatment plan may be different; this represents the minimal amount of visits.**
If, after 12 weeks of weekly visits, you have 8 clean urines, you can move to appointments that take place every 14 days. Moving beyond two week appointments will be decided by your treatment team. **If, at any time, you have a dirty urine screen, you have to move back to daily, then weekly visits** according to the schedule above.

**What is the next step?**
If you feel that Suboxone could help you with your chronic opioid dependence, the next step is to complete the forms packet and return all of the forms to OnCall Urgent Care Centers at 6 Hatfield Street, Northampton, MA 01060. The phone number is 413-584-7425.

---

**What to do in an Emergency:**

If you have an emergency, call 911
If you need to talk to your medical provider call 413-584-7425
If you want to be seen at the clinic, no appointment is necessary.

**Hours of Operation:**

- Monday – Friday (9am – 9pm)
- Saturday, Sunday, Holidays (9am – 5 pm).