

Atlanta Stress Center: Opioid Medication Replacement Treatment Plan

Patient Name: _____ Date: _____

Problem: Opioid Use Disorder

Solutions: I want you to succeed and these are the ways how.

I. Medication Treatment

- a. Initiation phase
 - a. Stop using all opioids
 - b. Begin buprenorphine (Suboxone) treatment
 - i. Find correct dosing
 - ii. Stop cravings
 - iii. No withdrawal symptoms
 - c. First medication follow-up in two weeks
 - d. Second medication follow-up in three weeks
 - e. Urine drug screens required prior to every appointment
- b. Maintenance phase
 - a. Monthly follow-up appointments with your doctor
 - b. Monthly urine drug screens required prior to every appointment
- c. Discontinuation phase
 - a. Consideration of stopping buprenorphine treatment

II. Psychosocial supports

- a. Successfully staying stopped from using opioids means changing a lot of things, not just being prescribed buprenorphine (Suboxone). The support group and psychotherapy (if needed) will help you learn about triggers and learn coping tools to stay stopped.
- b. Required weekly support group meeting (50 minutes) for 2 months
 - a. May drop in anytime thereafter
- c. Psychotherapy with your doctor or another therapist (if needed)
- d. Family therapy with a therapist (if needed)
- e. 12 step fellowship such as Narcotics Anonymous or other support groups (discuss with your doctor before attending)

III. Relapse(s)

- a. Relapse doesn't have to be, but may be part of your recovery process. It does mean you need more help and support to be successful. Relapse will require more intensive treatment in order to continue buprenorphine prescription treatment.

- b. Must increase treatment in one (or more) of several ways including (but not limited to):
 - a. Weekly therapy to one of referred therapists
 - b. Weekly appointments with your doctor
 - c. Begin attending support group weekly *and* attend another support group twice weekly *and* provide written (250 words) journal writing for each session attended to discuss with your doctor or therapist
 - d. Regular family therapy sessions with your doctor and/or therapists
- c. Multiple relapses
 - a. More treatment will be required
 - b. Should multiple relapses continue, depending on clinical decision making of your physician, and your level of participation, treatment may be terminated.

Patient

Signature_____Date:_____