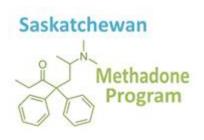


# Methadone Standards and Guidelines

What's New?

# Update



- Saskatchewan Methadone Guidelines last reviewed in 2009
- Review of Alberta's Standards and Guidelines was done by CPSS last year.
- Felt that we needed an update
- Decision to follow Alberta's lead on introducing Standards

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## Standards

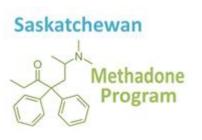


- Standards of Practice represent the minimum standard of professional behavior and good practice expected of physicians.
- Standards, or policies define a minimum. acceptable level of care to ensure patient safety.
- Standards are a mandatory requirement.

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### Standards

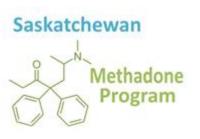


- Increased number of methadone providers in the province
- Need for more methadone prescribers in the province
- Large geographic area
- Stigma of methadone
- Safety issues
- It is hoped that these Standards and Guidelines will clarify the requirements and protocols for MMT and encourage more physicians to either become an Initiating Physician, or maintain MMT patients as a part of their current practice.

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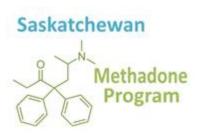
# Guidelines



- Methadone guidelines provide direction and recommendations for effectiveness and optimal care.
- Guidelines provide direction that "should" be followed.
- One must exercise reasonable discretion and justifiable reasons when there is a decision not to follow the guidelines

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#### **New Format**

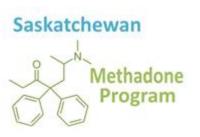


- Easy to follow
- Standards and guidelines clearly laid out
- Allows for quick reference.

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METHADONE GUIDELINES

# **Appendices**

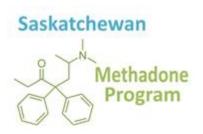


- Wealth of information
  - Drug interaction charts (not inclusive)
  - Prescription templates
  - Sample clinical notes
  - Carry contract
  - Policies

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# Why?

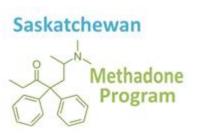


- Patient safety
- Consistency in care
- Clarification of guidelines and protocols making it easier and safer for physicians new to addiction medicine to prescribe methadone.
- Protect the team

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# Concerns



- Barrier to care? Standards provide better, safer care – as a patient what would you prefer – Standard care – or sub standard care?
- These standards have been reviewed by many experts – and found to be acceptable.

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# Saskatchewan Methadone Program

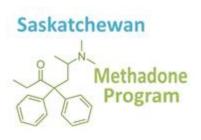
### What's New?

- Chapters 1 3 deal with requirements for prescribing methadone and licensing
- Chapter 4 requirements for prescriptions
- Chapters 5 and 6 Patient assessment and clinical visits
- Chapters 7,8,9 Dosing and dosing issues as well as split dosing and missed doses

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# What's New



- Chapter 10 Carries Standards for carries give a little more backing to physicians to stand by – are restrictive – but safety is the main concern
- Chapter 11 urine drugs screens
- Chapter 12 ECGs criteria for ECG and QTc monitoring

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#### What's New

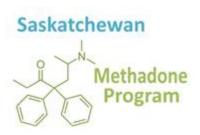


- Chapter 13 Drug interactions and standards regarding PIP viewer and QTc monitoring
- Chapter 14 Voluntary and involuntary withdrawal from methadone
- Chapter 15 Standards for transfer of care
- Chapter 16 Standards for incarceration
- Chapter 17 Adolescents

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#### METHADONE GUIDELINES

#### What's New

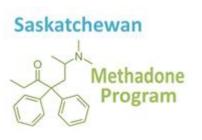


- Chapter 18 Pregnancy
- Chapter 19 Concurrent Diseases
- Chapter 20 Suboxone

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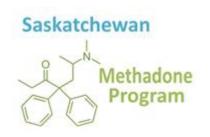
# Summary



- The hope is that the new Standards and Guidelines make methadone more accessible to patients in Saskatchewan by taking some of the mystery and stigma away
- Safer care
- Easier for new physicians to consider prescribing methadone

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### Questions??

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