

Take Home Suboxone (buprenorphine-naloxone)

Before you start, make sure you are very dope-sick (bad withdrawal)

Do you have at least 4 of these signs?

...or score yourself using the scale on Page 2

 Joint and bone aches	 Bad chills or sweating	 Restless, can't sit still
 Twitching, tremors or shaking	 Big (enlarged) pupils	 Goosebumps
 Heavy yawning	 Runny nose, tears in eyes	 Feel sick, throwing up, or diarrhea

How long has it been?

It should be at least... **24 hours** since you used heroin / fentanyl / oxycodone

48 hours since you used long-acting morphine (Kadian)

If you take methadone, talk to your Opioid Agonist Treatment (OAT) Clinic

Wait as long as you can! Start it too early and you might feel very, very sick

Once you are very dope-sick (in bad withdrawal)



How to take Suboxone:

- Put the tablet under your tongue
- **Do not** swallow it – it won't work
- **Do not** take with alcohol or sleeping pills (sedatives)
- **Do not** take when sleepy

How soon it will work:

- Must melt under your tongue to work
- Takes up to 10 minutes to dissolve
- Takes 20 to 45 minutes to work

**Always keep Suboxone away from children

Day 1			Day 2 and Day 3
Step 1	Step 2	Step 3	
Place 1 tablet (2 mg*) under your tongue Wait 1 hour 	Place 1 tablet (2 mg*) under your tongue Wait 1 hour 	Still feel sick? Take 1 tablet every hour Stop when: You feel better or You have taken all 6 tablets (12 mg*)	Place <u>all</u> the tablets needed for Day 1 under your tongue at one time Can take up to 6 tablets each day Go to an OAT Clinic for more Suboxone (see Page 2)
Step 1 + Step 2 + Step 3 = no more than 6 tablets or 12 mg			

 **If you feel a lot worse** at any time, **stop** taking Suboxone - Return to the Emergency Department

*Dose based on mg of buprenorphine (each Suboxone tablet contains 2 mg of buprenorphine and 0.5 mg of naloxone)


Take Home Suboxone (buprenorphine-naloxone) - *continued*

Subjective Opiate Withdrawal Scale (SOWS)*

Please score each of the statements according to how you feel right now on a scale of 1 to 4.

Add up all your scores to get your total SOWS withdrawal score.

Scale: 0 = Not at all 1 = A little 2 = Moderately 3 = Quite a bit 4 = Extremely

Time:						
Symptoms:		Score	Score	Score	Score	Score
 I feel anxious						
I feel like yawning						
 I am perspiring						
My eyes are tearing						
My nose is running						
 I have goosebumps						
I am shaking						
I have hot flushes						
 I have cold flushes						
My bones and muscles ache						
I feel restless						
 I feel nauseous						
I feel like vomiting						
My muscles twitch						
 I have stomach cramps						
I feel like using now						
My SOWS score (total score):						

If your SOWS withdrawal score is **17 or more** → You are ready to start, follow the instructions on Page 1

If your SOWS withdrawal score is **less than 17** → Check your score again in 1 to 3 hours

*Handelsman L et al. AM J Drug Alcohol Abuse.1987

Opioid Agonist Treatment (OAT) Clinics

Abbotsford #203 - 31943 South Fraser Way	604-743-0543	Maple Ridge #106 - 22838 Lougheed Highway	604-467-5179	Surrey 13740 - 94A Avenue	604-587-3755 (option 3)
Burnaby 3935 Kincaid Street	604-453-1930	Mission 3rd Floor, 7298 Hurd Street	604-814-5600	10667 - 135A Street	604-583-5666
Chilliwack 45600 Menholm Road	604-703-6976	Port Moody 700 - 220 Brew Street	604-777-8709	Vancouver 1081 Burrard Street St. Paul's Hospital 2 nd floor	604-806-8867
Langley #305-20300 Fraser Highway	604-514-7940			White Rock 15521 Russell Avenue, Russell Unit	604-541-6844

Any problems contacting your OAT Clinic? Have other Substance Use concerns?

Call the **Substance Use Service Access Team (SUSAT): 1-866-624-6478**

www.fraserhealth.ca

This information does not replace the advice given to you by your healthcare provider.

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To order: patienteduc.fraserhealth.ca

Forms on Demand ID: XXBR107268A

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