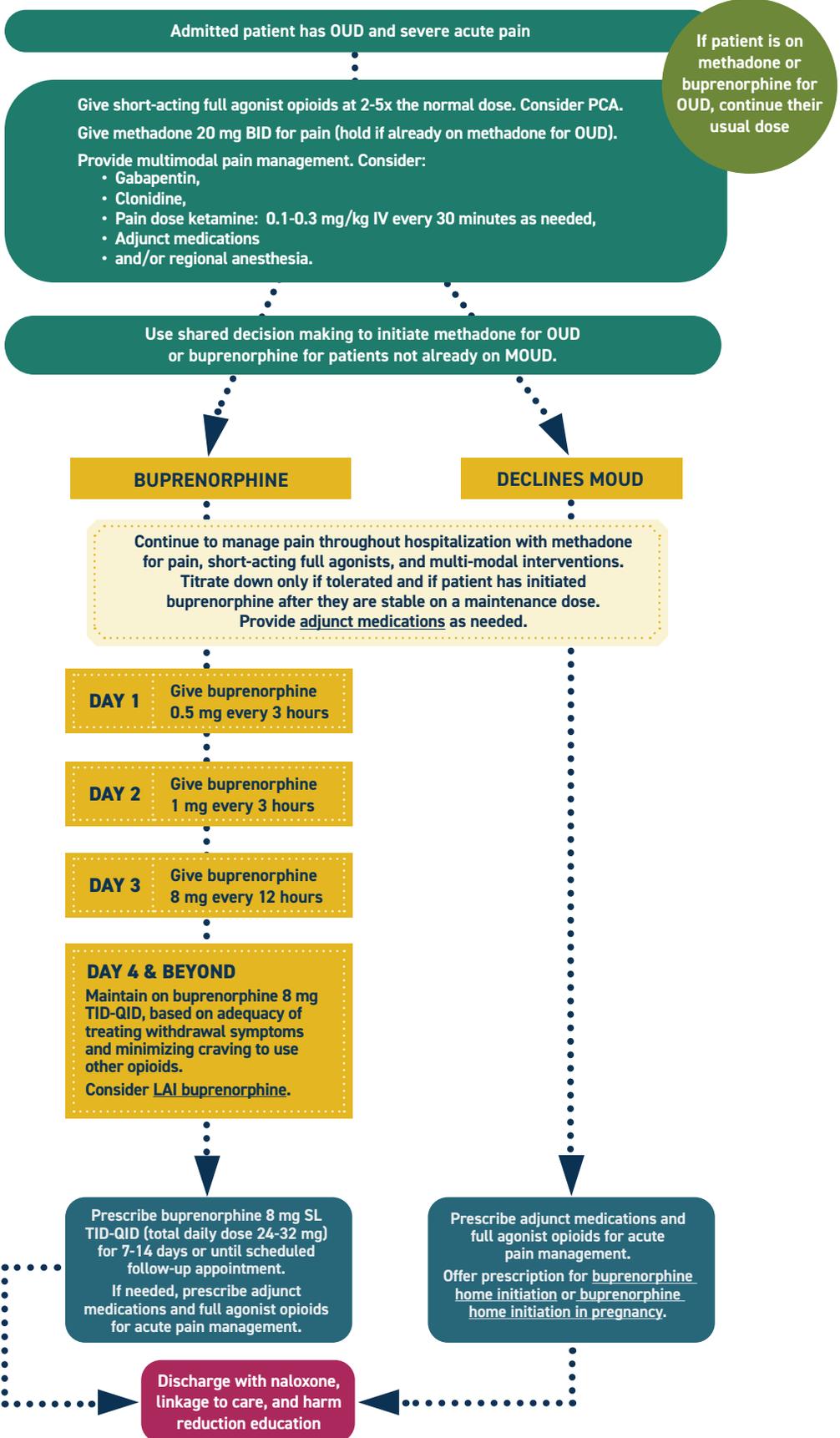


Inpatient Pain Management for Patients with OUD



Considerations

- Higher doses of opioids for analgesia are required for patients with opioid tolerance; 2-5x the usual dose is typically needed to adequately control pain.
- The risk of respiratory depression in this case is low. If respiratory rate remains within normal limits and the patient is not overly sedated, the dose is not too high.
- Ensure pain is adequately controlled and opioid withdrawal is managed to prevent self-directed discharge.
- Discussion of MOUD treatment options is more effective when pain and withdrawal are well-managed.
- Treating acute pain does not worsen OUD.
- Full agonist opioids, including methadone, can be used safely to treat acute pain in addition to initiating buprenorphine for OUD.
- This protocol can be used for pregnant and postpartum patients. See *Special Populations* for more information.
- This protocol does not cover the care of patients on naltrexone. Consider expert consultation.

Program Partners

This document is not meant to be directive, comprehensive, or a substitute for independent clinical judgement and does not constitute legal, medical, or organizational advice.