

Emergency Medical Services (EMS)

Buprenorphine (Bup) Field Initiation Protocol



This protocol is intended for patients showing signs of opioid withdrawal, including those who have recently received naloxone.

Assess for signs and symptoms of opioid withdrawal.

Opioid Withdrawal Signs & Symptoms: Patient must display ≥ 2 objective signs to be considered for bup treatment.

Objective Signs:

- Yawning
- Rhinorrhea or lacrimation
- Dilated pupils
- Tachycardia
- Diaphoresis
- Restlessness and/or agitation
- Vomiting, diarrhea
- Piloerection

Subjective Symptoms:

- Nausea
- Stomach/abdominal cramps
- Body aches
- Achy bones/joints
- Restlessness
- Hot and cold
- Nasal congestion

Assess for exclusion criteria.

Exclusion Criteria: Patient is not a candidate for EMS bup if any of the following are present.

- Under 14 years old
- Any methadone use in the past 72 hours
- Severe medical illness
- Altered and cannot consent or cannot comprehend risks/benefits

Exclusion criteria present?

No

Yes

COWS score ≥ 8 ?

(Clinical Opioid Withdrawal Scale)

No

Not eligible for buprenorphine field initiation.

Yes

Offer patient bup and counseling on treatment options.

Consider med control for complex cases.

If patient denies treatment

1. Provide local resource/med brochure.
2. Provide naloxone.
3. Offer transport to local hospital.

Patient agrees to treatment

Administer buprenorphine 16 mg SL.

Reassess after 10 minutes.

If symptoms improve

1. Confirm patient contact information for potential hospital follow-up.
2. Supply naloxone and a brochure detailing local resources and medication information.
3. Conduct and record a second COWS.
4. Advise transport to the hospital.
5. If the patient refuses transport, notify them that a navigator might reach out to offer additional support.

If symptoms worsen or persist

Re-dose with bup 8 mg SL.

*Consider additional redose if long transport w/ongoing symptoms
Total maximum dose 32 mg.