

Tools to accompany *Recommendation 9*:

- Checklist for Adverse Effects, Function, and Opioid Dependence
<http://health.utah.gov/prescription/pdf/guidelines/checklist%20for%20adverse%20effects.pdf>
- Signs of Substance Misuse
http://health.utah.gov/prescription/pdf/guidelines/signs_substance_misuse.pdf
- Pain Management Evaluation Tool
<http://health.utah.gov/prescription/pdf/guidelines/PainManagementWorksheet.pdf>
- Dosing Guidelines
http://health.utah.gov/prescription/pdf/guidelines/dosing_guidelines.pdf
- Strategies for Tapering and Weaning
http://health.utah.gov/prescription/pdf/guidelines/Strategies_tapering_weaning.pdf

Evaluating the Opioid Treatment Trial

10. Continuing opioid treatment should be a deliberate decision that takes into consideration the risks and benefits of chronic opioid treatment for that patient. Patients and health care providers should periodically reassess the need for continued opioid treatment, weaning whenever possible, as part of the comprehensive pain care plan. A second opinion or consultation may be useful in making that decision.

The health care provider should clearly explain to the patient that initiation of opioid treatment is not a commitment to long-term opioid treatment and that treatment will be stopped if the trial is determined to be unsuccessful. The trial should be for a specific time period with pre-determined evaluation points. The decision to continue opioid treatment beyond the trial period should be based on the balance between benefits, including function and quality of life, and adverse effects experienced. A second opinion or consult may be useful in making the decision to continue or discontinue opioids after the treatment trial.

Discontinuing Opioid Treatment

11. Opioid treatment should be discontinued if adverse effects outweigh benefits, or if aberrant, dangerous, or illegal behaviors are demonstrated.⁹

11.1 Discontinuation of opioid treatment is recommended if any of the following occurs:

- Dangerous or illegal behaviors are identified;
- Patient claims or exhibits a lack of effectiveness;
- Pain problem resolves;
- Patient expresses a desire to discontinue therapy; and
- Opioid treatment appears to be causing harm to the patient, particularly if harm exceeds benefit.¹⁴

The decision to discontinue opioid treatment should ideally be made jointly with the patient and, if appropriate, the family/caregiver.¹⁷ This decision should include careful consideration of the outcomes of ongoing monitoring.

11.2 When possible, offer to assist patients in safely discontinuing medications, even if they have withdrawn from treatment or been discharged for agreement violations.¹⁴

The goal is to taper all patients off opioid medications safely. If the patient is discharged, the health care provider is obliged to offer continued monitoring for 30 days post-discharge. Possible complications of opioid