

NARCOTIC AND CONTROLLED DRUGS:

6.2 METHADONE

1. Physicians receive authorization to prescribe methadone for pain management from the BC College of Physicians and Surgeons, and for opioid addiction from the BC Centre on Substance Use.
2. Initial in-patient methadone orders for other prescribers (i.e. physicians or nurse practitioners or dentists without a full exemption):
  - a. Any prescriber can prescribe methadone only for patients on methadone therapy prior to admission.
    - i. For pain: any prescriber can order the same methadone dose as on prior to admission, or adjust methadone dosing and frequency.
    - ii. For addiction: any prescriber can order the same methadone dose as on prior to admission. However, dose or frequency changes must be ordered **ONLY** by an authorized methadone prescriber with a full exemption.
  - b. To initiate *de novo* methadone therapy, either for pain or addiction, an authorized VA prescriber with a full methadone exemption must be contacted. Contact CPAS, Palliative Care or Consult Liaison Psychiatry.
3. Reorders of existing in-patient methadone orders:
  - a. There is no automatic stop date for methadone.
  - b. If patient was on methadone prior to hospital admission:
    - i. For pain: any prescriber can re-order methadone at the same dose, or adjust methadone dose and frequency. This includes postoperative continuation of a pre-operative order.
    - ii. For addiction: any prescriber can re-order the same methadone dose as on prior to admission. This includes postoperative continuation of a pre-operative order.
  - c. If methadone was initiated *de novo* in-hospital, **ONLY** an authorized methadone prescriber with a full methadone exemption may re-order methadone.
    - i. Continuation of a pre-operative order may be authorized by any prescriber in the immediate post-operative period as long as the dose and frequency remain unchanged.