## Process for lorazepam and methadone tapers at discharge

- 1. When the patient has been stabilized on a taper schedule without the need for supplemental PRN doses (of morphine or lorazepam) and discharge is anticipated to be within 48-72 hours, write discharge prescriptions for lorazepam and methadone.
- 2. The prescription for methadone needs to be written by an attending physician on a Schedule 2 prescription with the attending's name, contact information, and DEA number. Write the remainder of the wean from the anticipated discharge date/time and the anticipated amount of methadone needed. Always use the 1mg/mL concentration. Write "Pharmacy: draw up each dose in oral syringe".

Example: Methadone 1mg/mL, on 7/2/13 give 1 ml po TID, on 7/3/13 give 1 ml po BID, on 7/4/13 give 1 ml po qday. Disp: 6 mL. No refills.

3. The prescription for lorazepam can be entered into Compass as a discharge prescription by any prescriber. Write the remainder of the wean from the anticipated discharge date/time and the anticipated amount of lorazepam needed. Always use the 2mg/mL concentration. Due to the expiration of lorazepam and outpatient regulations, doses will not be drawn up into syringes.

Example: Lorazepam 2mg/mL, on 7/2/13 give 0.5 ml PO TID, on 7/3/13 give 0.5 ml po BID, on 7/4/13 give 0.3ml po BID. Disp: 3.1 mL. No refills.

- 4. Send BOTH scripts to Seton Central Outpatient Pharmacy (SCOP) at least 48 hours prior to discharge, regardless of the patient's insurance. Scripts should ALWAYS be sent to SCOP because they will take any insurance, will always have the liquid formulations of these drugs in stock, and will always draw up methadone doses in oral syringes for tapers that are 28 days or less.
- 5. If the patient does not have insurance, order a financial counselor consult (meds might qualify for charity).
- 6. Contact the pharmacist for discharge medication teaching. The pharmacist will counsel the caregivers on the schedule for the remaining lorazepam and methadone doses. A copy of the schedule will be given to the family and one will be placed in the patient's chart.
- 7. At discharge, please dictate a PCP notification letter for the lorazepam and methadone (script on the evidence based website) and include the remaining lorazepam and methadone weaning plan in the discharge summary. Please call PCP at discharge to alert about wean plan.
- 8. Instruct the caregivers to take a copy of the lorazepam and methadone weaning plan to their PCP if there are any problems after discharge.