MaineHealth is committed to reducing opioid overdose deaths in our communities. As part of that effort, we have adopted the following guidelines to increase access to the life-saving overdose reversal medication naloxone for those patients at highest risk of overdose.

- All patients with a history of overdose and/or a history of opioid use disorder treated in a MaineHealth facility will be offered naloxone.

- All patients treated in an Emergency Department for a condition related to opioid use disorder (e.g., drug overdose, abscess, cellulitis) will be offered naloxone at discharge.

- All patients admitted to a Hospital for a condition related to opioid use disorder (e.g., drug overdose, infection related to substance use) will be offered naloxone at discharge.

- All patients assessed and/or treated for opioid use disorder in an outpatient setting will be offered naloxone.

- All patients prescribed opioids for pain who are at greater risk of overdose (e.g., history of overdose, patients with a history of opioid, sedative or alcohol use disorder, patients prescribed opioids who have co-morbid conditions that lead to respiratory compromise (such as sleep apnea or COPD), patients taking sedatives (e.g., benzodiazepines) with opioids, and patients taking higher dosages of opioids (≥50 MME/day)) will be offered naloxone.

- Patients who are insured will have naloxone prescribed to them in the form covered by their insurance.

- Uninsured or uncompensated care patients should be offered lower cost options (intranasal kit or intramuscular injection kit) when available.

- Patients (as well as their families) who are prescribed naloxone should be educated on how to prevent, detect and respond to an overdose, including the symptoms of an opioid overdose, how to administer naloxone, and contact emergency medical services.

- Periodic trainings (at least quarterly) should be offered by IMAT (Integrated Medication Assisted Treatment) providers to patients participating in IMAT programs on overdose prevention, recognition and naloxone use.

- Any patient discharged from an IMAT program should again be offered naloxone and encouraged to obtain it from the pharmacy.