UBCH OR Suite Patient Selection Criteria: Opioid Tolerance

VA Department of Anesthesiology & Perioperative Care: March 2022

PRESCRIBED OPIOID	DOSE / 24 HRS	ACC CONSULT	DISCHARGE SAME DAY	SAME DAY ADMIT	
			(Day Care Surgery)	(Inpatient S	urgery)
			ACCEPTABLE AT UBCH ?	ACCEPTABLE AT UBCH ?	CPAS consult (& HAU bed postop at UBCH)
MORPHINE	60 - 250 mg	YES	YES	YES	DISCRETIONARY*
	> 250 mg	YES	YES	YES	YES
HYDROMORPHONE	12 - 50 mg	YES	YES	YES	DISCRETIONARY*
	> 50 mg	YES	YES	YES	YES
OXYCODONE	40 - 160 mg	YES	YES	YES	DISCRETIONARY*
	> 160 mg	YES	YES	YES	YES
TRAMADOL	300 - 1,250 mg	YES	YES	YES	DISCRETIONARY*
	> 1,250 mg	YES	YES	YES	YES
TAPENDATOL	150 - 600 mg	YES	YES	YES	DISCRETIONARY*
	> 600 mg	YES	YES	YES	YES
FENTANYL PATC H	25 - 100 mcg/h	YES	YES	YES	DISCRETIONARY*
	> 100 mcg/h	YES	YES	YES	YES
METHADONE	up to 60 mg	YES	YES	YES	DISCRETIONARY*
	> 60 mg	YES	YES	YES	YES
SUBOXONE#	up to 12 mg	YES	YES	YES	YES
(buprenorphine + naloxone)	> 12 mg	YES	DISCRETIONARY#	NO	if proceeding at UBCH
	, and the second				
NALTREXONE	up to 25 mg	YES	YES	YES	DISCRETIONARY*
(or CONTRAVE naltrexone +	<u> </u>		DISCRETIONARY#		YES
buproprion)	> 25 mg	YES	DISCRETIONARY "	YES	YES
DIAMORPHINE§	any dose	YES	DISCRETIONARY#	NO	YES
STREET OPIOID USE	any dose	YES	DISCRETIONARY#	NO	YES

^{*}consult CPAS if significant pain management challenge expected, or if on maintenance therapy for opioid use disorder

- equivalent *injectable* dose of hydromorphone is ~ ½ the *injectable* dose of diamorphine
- equivalent *oral* dose of morphine is ~ 3 times the *subcutaneous* dose of diamorphine

Patients using street opioids

- <u>not</u> acceptable for SDA (inpatient) surgical procedures at UBCH (prescribed dose equivalency impossible to determine)
- <u>potentially</u> acceptable for DSD (day care) procedures at UBCH, but only if if the procedure is not associated with significant pain postoperative pain (e.g. dental procedure & superficial soft tissue procedures)

[#]patients on naltrexone > 25 mg, suboxone > 12 mg / 24hrs, or diamorphine (prescribed heroin), can potentially have a surgical daycare procedure (not inpatient procedure) at UBCH if the procedure is not associated with significant pain postoperative pain (e.g. dental procedure or superficial soft tissue procedures). Anesthesiologist allowing case to proceed at UBCH should notify slated U1 and POAU in advance of day of surgery.

[§]approximate diamorphine (prescribed heroin) equivalencies:

- patients on supervised opioid maintenance therapy can have their morning dose ordered for administration in the preoperative hold/PCC
- VGH/UBCH pharmacist can verify with community pharmacy/case worker if opioid maintenance therapy was administered or held that morning

Book HAU bed for inpatient procedure if postop pain management challenge anticipated

• monitored bed: ketamine, and/or lidocaine, and/or continuous opioid infusion a possibility