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**OPQC OUD Clinical Care Checklist**

# Antepartum Outpatient Care

* Counsel on MAT with buprenorphine or methadone as recommended treatment for OUD during pregnancy and arrange appropriate referrals
* Obtain recommended lab testing
  + HIV
  + HepB (Consider immunizations as indicated)
  + HCV antibody (Viral load and genotype as indicated)
  + Serum Creatinine
  + Hepatic Function Panel
* Screen for co-morbidities including behavioral health and domestic violence
  + Add maternal co-morbidities including OUD to maternal problem list
* Provide referrals/consultations unless otherwise provided by treatment program while providing a warm handoff to the following:
  + Social work/Behavioral Health/Addiction Counseling/ Recovery Support Programs
  + Neonatology/ Pediatric Consult to discuss NAS management
  + Anesthesia Consult to discuss pain management in labor
* Review institutional drug testing policies
* Screen for additional substance abuse including non-prescribed drugs, alcohol, tobacco and marijuana. Reconcile all patient medications and review OARRS report.
  + Provide tobacco cessation counseling and treatment as indicated (discuss smoking cessation has been associated with lower rates of NAS)
* Obtain urine toxicology with confirmation (consent required) including alcohol metabolites
* Introduce plan of safe care and the process for Child Protection Services in the county/Ohio
  + Opportunity to promote benefit of regular prenatal care, regular negative toxicology screens and receiving MAT
* Provide standardized patient education for pregnant women with OUD on:
  + Opioid use and NAS
  + Importance of breastfeeding for eligible opioid exposed infants
  + Importance of maternal participation in newborn care for infants with NAS (i.e. Rooming in, breastfeeding, Finnegan Scoring)
* Discuss Narcan rescue and provide Rx to patient and consider to friends/family if applicable.
* Provide comprehensive contraceptive counseling and document plan
* Sign release for obstetric provider to communicate with MAT treatment center/addiction counseling/recovery support program

# Third Trimester Care

* Repeat recommended lab testing:
  + HIV
  + HepB (Consider immunizations as indicated)
  + HCV antibody (Viral load and genotype as indicated)
  + GC/CT
  + RPR
* Ensure second trimester anatomy scan was complete and provide growth/fluid ultrasound
* Obtain urine toxicology with confirmation (consent required) including alcohol metabolites (ethyl glucuronide/ethyl sulfate)

# Third Trimester Patient Education

* Review plan of safe care and the process for Child Protection Services reporting in Ohio
* Discuss pain management options for labor, birth and postpartum
* Review standardized education for pregnant women with OUD which includes:
  + Opioid use and NAS
  + Importance of breastfeeding for eligible opioid exposed infants
  + Importance of maternal participation in newborn care for infants with NAS
* Provide comprehensive contraceptive counseling and document plan

# Maternal Discharge

* Review plan of safe care including safe discharge plans for mom/infant
* Discuss Narcan as a potential lifesaving strategy and provide prescription for patient and/or patient’s family
* Discuss the need to close follow-up with infant’s pediatrician
* Ensure appointment is scheduled for ongoing support services including MAT, social work, and behavioral health counseling/ recovery support services prior to maternal discharge
* Schedule early postpartum follow up visit within 2 weeks
* Provide contraception or confirm contraception plan

**Ohio Crisis Text Line:**

Throughout Ohio, individuals can **text the keyword “4HOPE” to 741741** to be connected to a trained Crisis Counselor within 5 minutes.

**SBIRT Billing Codes:**

**G0396:** Alcohol and/or substance abuse structured screening and brief intervention services; 15 to 30min

**G0397:** Alcohol and/or substance abuse structured screening and brief intervention services greater than 30min