

Fentanyl Patch 4 Patch Initiative¹²

- Fentanyl patch return program
- Endorsed by **Ontario Association of Chiefs of Police**
- Program developed with input from key partners:
 - Ontario College of Physicians and Surgeons
 - Ontario Medical Association
 - Ontario College of Pharmacists
 - Ontario Pharmacists Association
 - Ministry of Health and Long-term Care



PATCH4PATCH
I N I T I A T I V E

Fentanyl Abuse Prevention – A Shared Responsibility

Ontario Association of Chiefs of Police – Substance Abuse Committee 2014

Bill 33 – ‘An Act to reduce the abuse of fentanyl patches’¹⁰

- Private Member’s Bill 33 – Victor Fideli, MPP (Nipissing)
 - North Bay first community coalition to collaborate and implement a fentanyl patch return program
 - Bill enacts the ***Safeguarding our Communities Act (Fentanyl Patch for Patch Return Policy) 2014***⁸
 - Sets out rules for **prescribing** and **dispensing** fentanyl patches
 - Provides that a **contravention** of any requirements set out would **constitute an act of professional misconduct**
 - Outlines authorities for the Lieutenant Governor in Council regarding regulations, including those related to record-keeping by prescribers and dispensers



Impact of legislation

- Ontario study by Gomes et al. published in CMAJ in 2014¹¹
 - Assessed impact of ***Narcotics Safety and Awareness Act*** (Nov 2011) and **Narcotics Monitoring System** (May 2012)
 - ‘Potentially inappropriate opioid prescriptions’* decreased after enactment of legislation
 - Down 12.5% in 6 months (**1.6%** in October 2011 to **1.4%** in April 2012; $p = 0.01$)
 - By May 2013, prevalence dropped to **1.0%**
- Authors suggest that regulatory interventions can promote appropriate prescribing which may be applied to other jurisdictions and drugs of concern

**Prescription was deemed ‘potentially inappropriate’ if dispensed within 7 days of earlier prescription and was for at least 30 tablets of drug in the same class as earlier prescription, but from different physician and pharmacy*

Fentanyl Patch 4 Patch Initiative¹²

- OACP released resource document outlining suggested **prescribing, dispensing, and disposal** practices for fentanyl patches
- Voluntary initiative is a “...collaboration between physicians, pharmacists, and patients to promote the safe, effective and responsible use of fentanyl patches”
- Includes **tools for implementation** – other health units are using in their local communities



Fentanyl Patch Return Programs

- Originally developed by the **North Bay and Area Drug Strategy**
 - Coalition of healthcare providers, law enforcement, emergency service providers, community members
 - North Bay reports success in reducing fentanyl diversion
- Other communities and health units in Ontario have implemented similar strategies
 - Peterborough
 - London-Middlesex
 - Durham
 - Sudbury



Fentanyl Patch Return Programs

- How to prescribe, dispense, and dispose according to 'Patch 4 Patch'...
- Fentanyl information and adaptable patch return tools have been developed for Leeds, Grenville and Lanark
 - Available on: <http://www.healthunit.org>



Physician's responsibilities

- At patient encounter with physician:
 - Patient education to promote safe use of fentanyl patches
 - Fentanyl treatment agreement (narcotic contract)
 - Signed by both the physician and patient, with copy forwarded to the pharmacy



Sample fentanyl treatment agreement

I understand that I am receiving fentanyl patches from Dr. _____ to treat my pain condition.

I agree to the following conditions under which this medication is prescribed:

1. I will not seek fentanyl patches or opioid medication from another physician. Only Dr. _____ will prescribe fentanyl and other opioids for me.
2. I will not take fentanyl patches or opioid medication in larger amounts or more frequently than is prescribed by Dr. _____.
3. I will not use fentanyl patches in any way other than applied to my skin as directed by Dr. _____ and my pharmacist.
4. I will not give or sell my medication to anyone else, including family members; nor will I accept any opioid medication from anyone else.
5. I will not use over-the-counter opioid medications (for example, 222's and Tylenol® No. 1).
6. I understand that if my prescription runs out early for any reason (for example, if I lose the medication or take more than prescribed), Dr. _____ may not prescribe extra medication for me; I may have to wait until the next prescription is due.
7. I understand that to refill my prescription, I will return all of my used and unused fentanyl patches to the pharmacy in order for my new fentanyl patches to be dispensed.
8. I understand that the pharmacy may not dispense more than ten fentanyl patches (or one month supply) at a time.
9. I will fill my prescriptions at one pharmacy. Pharmacy name: _____
10. I will store my medication in a secured location.
11. I understand that if I break these conditions, Dr. _____ may choose to change, taper, or cease my opioid prescription.

Prescribing fentanyl

1. Prescription directs the pharmacist to collect used or unused patches before dispensing a refill
2. Recommended that only 10 fentanyl patches be dispensed at a time (1 month supply)
3. **Contingency plan:** Dispense 1 patch if all used patches not returned and consider call to MD
4. Pharmacy name is identified on the prescription – to fill only at indicated pharmacy
5. Pharmacy should be notified in advance/prescription faxed
6. Treatment agreement is also forwarded to pharmacy

Sample fentanyl prescription

Rx	Dr. John Doe CPSO: XXXXXX Brockville, ON (613) XXX-XXXX
	Date: September 15, 2015
Jane Doe OHIP: XXXX-XXXX-XXXX Date of Birth: XX-XX-XXXX	
Pharmacy Name King Street, Brockville, ON Fax: (613) XXX-XXXX	
Prescription Renewal Fentanyl 25 mcg/h apply 1 patch q72hrs M: 30 patches total, dispense 10 patches q28days	
Instructions to Pharmacist <ol style="list-style-type: none">1. Please cancel all previous fentanyl prescriptions2. Dispense maximum 10 patches every 28 days3. Patient must return all used and unused patches, intact, in order to receive next refill4. If any discrepancies, dispense 1 patch and call MD5. Fill only at pharmacy indicated	
Signature _____	



Pharmacist's responsibilities

- **Patient education** regarding safe use of fentanyl patches, e.g.
 - Apply only as directed to skin
 - Store all used and unused patches in secure place
- Provide '**Patch Return Sheet and Patient FAQ**' and instructions to return all patches to receive next refill
- Ensure all patients are **referred to pharmacist** to review fentanyl prescription and patch return policy

Fentanyl Patch Return Sheet

Your doctor and pharmacy are participating in a patch return program to promote the safe use and disposal of fentanyl patches. When you get a prescription for a fentanyl patch, you are asked to return ALL used patches on this form (or piece of paper) before you can fill your next prescription.



1. Stick your used patches on this sheet in the numbered boxes.
2. Store this sheet out of the reach of children/pets in a safe place.
3. After applying your last patch, return this whole sheet to the pharmacy to pick up your next supply.

1
PLACE USED PATCH HERE

2
PLACE USED PATCH HERE

3
PLACE USED PATCH HERE

4
PLACE USED PATCH HERE

5
PLACE USED PATCH HERE

6
PLACE USED PATCH HERE

7
PLACE USED PATCH HERE

8
PLACE USED PATCH HERE

9
PLACE USED PATCH HERE

10
PLACE USED PATCH HERE

Patient Name: _____ Rx #: _____

Pharmacist's responsibilities

- Upon patch return by patient:
 - Follow your pharmacy documentation protocol – see sample **“Fentanyl Patch Return Tracking Sheet”**
 - Count fentanyl patches returned and inspect for damage or tampering
 - **Discuss suspected misuse, patch damage, or tampering with physician**
 - Report as per Ontario College of Pharmacist policy
 - **If patches are not returned or if any discrepancies, follow contingency plan until used patches are returned and consider contacting physician**
 - Suggested contingency plan: Dispense 1 patch at a time
 - Dispose of patches as per pharmacy protocol – recommended daily disposal



Pharmacy staff responsibilities

1. Ensure all patients are referred to pharmacist to review fentanyl prescription and patch return policy
2. When filling fentanyl prescription, include comment “return all used and unused patches to pharmacy to receive next refill” at the end of the direction line
3. When filling fentanyl prescription, include **“Fentanyl Patch Return Sheet and Patient FAQ”**
4. Questions regarding fentanyl return policy should be referred to pharmacist
5. Dispose of returned patches as per pharmacy protocol – recommended daily disposal

Implementation and Perspectives from Ontario Public Health Units

- **North Bay** was first to implement patch return strategy in 2013, with several other communities following
- **Peterborough** and **Durham** have shared many of their ‘lessons learned’
 - Difficult to implement unless both physicians and pharmacists work collaboratively
 - Concerns with loss of business and ‘policing’



Implementation and Perspectives from Ontario Public Health Units

- Limited evidence thus far for patch return in reducing harm
- Concerns regarding proposed legislation as well as ‘professional misconduct’
- Concerns about creating barriers for those in need of opioid therapy
- Limiting access will not reduce addiction, rather lead to other methods and drugs of choice

...All perspectives highlight a shared responsibility

Leeds, Grenville & Lanark District

HEALTH UNIT

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