

Buprenorphine/naloxone (Suboxone) To Go

Traditional Initiation



Store and lock this medication out of reach of children and pets



Buprenorphine/naloxone is a medication used to treat opioid use disorder.



Naloxone will not cause withdrawal when taken by mouth, but can if it is injected or snorted.

For this medication to work well, you will need to **stop taking other opioids and wait until you go into moderate withdrawal and feel sick**. Before starting buprenorphine/naloxone, you must have 3 or more of these symptoms:

- Stomach cramps, nausea, vomiting, or diarrhea
- Heavy yawning
- Bad chills or sweating
- Running nose and tears in your eyes
- Twitching, tremors, or shaking
- Feeling anxious or irritable (or both)
- Enlarged pupils
- Joint and bone aches
- Goose bumps
- Feeling restless and cannot sit still



Stop all opioids before taking your first dose of buprenorphine/naloxone



Taking buprenorphine/naloxone too early can cause symptoms to feel much worse. To avoid severe withdrawal, **wait as long as possible** before taking your first tablet.



Name and phone number of your support person:



- Wait at least 12 hours since last heroin or hydromorphone use.
- Wait at least 24 hours since last fentanyl or slow-release oral morphine (Kadian) use.
- Wait 48–72 hours since last methadone use.



Do not take this medication with alcohol or sedatives.



You can take medications to help manage withdrawal symptoms.

Clonidine: Take as prescribed.

Body aches: Advil/Motrin (ibuprofen): 400mg every 4 hours, max 2,400mg/day.

Tylenol (acetaminophen): 325–1000mg every 4–6 hours, max 4,000/day.

For older adults or those with liver impairment, max 2,000/day.

Nausea/vomiting: Gravol (dimenhydrinate): 50–100mg every 6 hours.

Diarrhea: Imodium (loperamide) 2–4mg every 6 hours, max 16mg/day.



Dosing schedule
on the other side

Adapted with gratitude from Vancouver Coastal Health

Vancouver
Coastal Health

BRITISH COLUMBIA
CENTRE ON
SUBSTANCE USE
Networking researchers, educators & care providers

Buprenorphine/naloxone Traditional Initiation Instructions



Before starting, wait until you feel very sick and have at least 3 symptoms (on the previous page). Taking buprenorphine/naloxone too early can cause your withdrawal to feel much worse.



Keep tablet(s) **under tongue** until fully dissolved. It takes about 10 minutes.

Do not: Talk, swallow, drink, smoke

Day 1 (Cross off each dose as you take it and enter time dose was taken)			
Dose	Amount	Time	
1	2mg		<ul style="list-style-type: none"> Your tablet may be a circle or a hexagon . On this chart, = 2mg. Your tablet may have a different dose. Be sure to double check.
If you still feel sick after Dose 1, take 1 tablet every hour as needed. Up to a total of 8 tablets in Day 1.			
2	2mg		At any time on Day 1, stop if you: <ul style="list-style-type: none"> Feel better, or Finish all 8 tablets, or If you feel dopesick (withdrawal symptoms), get help from your prescriber, addiction team, or emergency department.
3	2mg		
4	2mg		
5	2mg		
6	2mg		
7	2mg		
8	2mg		
	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> = Day 1 total dose		
Day 2 (Cross off each dose as you take it and enter time dose was taken)			
1	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> + 2mg		If you had withdrawal symptoms at end of Day 1, add 1 more tablet to your Dose 1.
If you still feel sick after Dose 1, take 1 tablet every hour as needed. Up to a total of 16 tablets in Day 2.			
2	2mg		At any time on Day 2, stop if you: <ul style="list-style-type: none"> Feel better, or Finish all 16 tablets
3	2mg		
4	2mg		
5	2mg		
6	2mg		
7	2mg		
8	2mg		
	<div style="border: 1px dashed black; width: 40px; height: 20px; display: inline-block;"></div> = Day 2 total dose		
On Day 3, go to one of the clinics listed at the bottom for a new prescription.			
1	<div style="border: 1px dashed black; width: 40px; height: 20px; display: inline-block;"></div>		if you have enough tablets, take your Day 2 total dose before going to the clinic.

To continue your Suboxone or to discuss other treatment options, see your primary care provider or an addiction clinic on Day #3. For after-hours or urgent care, visit the emergency department where you received this kit.

(Insert clinic information here)



More info
on the other side

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