

**PATIENT CARE**

**Procedure:** 916.4003  
**Origination Date:** AUG 2023  
**Last Review Date:** MAR 2025

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**SECTION:** Inpatient Pharmacy  
**TITLE:** Inpatient Methadone Dispensing and Discharge Procedure for Opioid Use Disorder  
**FACILITY:**

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|--|---|
| <input checked="" type="checkbox"/> Example Hospital and Health Center |   |
| <input type="checkbox"/> Example Medical Center                        | <input type="checkbox"/> Medical Group      |
| <input type="checkbox"/> Example Medical Center                        | <input type="checkbox"/> Urgent Care        |
| <input type="checkbox"/> Administrative / System Support Services      | <input type="checkbox"/> Lab Services       |
|  | <input type="checkbox"/> Research Institute |
|  | <input type="checkbox"/> Other:             |
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**POPULATION:**  **Adult**  **Pediatric**  **Neonate**  
(Adult > 18 years of age; Pediatric 0-18 and adult patients under care of a pediatric specialty physician  
Neonate 0-28 days and continued hospitalization in the NICU)

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**PURPOSE:**

1. To describe the process for dispensing up to a three-day supply of methadone for the indication of opioid use disorder from the inpatient pharmacy for discharging patients.

**RESPONSIBLE STAFF:**

Inpatient Pharmacy Staff will ensure proper handling of methadone, including storage, preparation, documentation, and dispensing

**EQUIPMENT/SUPPLIES:**

1. Liquid suspension methadone located in the inpatient pharmacies control substance vault
2. Inpatient and outpatient labels

**PROCEDURE:**

1. Providers intending to discharge a patient with up to three-day supply of methadone will place an Inpatient methadone dispensed for outpatient bridging place holder order located in the Inpatient methadone dispensed for outpatient bridging for hospital discharge order set to alert the pharmacy of the need to discharge a patient on methadone for opioid use disorder. (**Appendix A**)

### ▼ Methadone Dispensed for Hospital Discharge

#### Do not change Inpatient Methadone Dispensing order class from "No Print"

- INPATIENT METHADONE DISPENSED FOR OUTPATIENT BRIDGING  
 THIS ORDER IS FOR AVS AND PATIENT MEDICATION LIST DOCUMENTATION. Methadone dispensed from inpatient pharmacy to bridge patient until outpatient clinic appointment. You received a supply of \*\*\* days of methadone at \*\*\* mg per day when you left the hospital. You should attend an appointment at \*\*\* on \*\*\* to continue to receive methadone treatment. Please DO NOT THROW OUT the empty medication containers. You NEED to bring them to your first visit at the methadone clinic to show clinicians there who may ask for them as proof of last dose. Starting today, No Print
- INPATIENT METHADONE DISPENSED FOR OUTPATIENT BRIDGING  
 Not Applicable, SEE ADMIN INSTRUCTIONS, Include Now  
 THIS ORDER IS FOR MAR DOCUMENTATION FOR DISPENSE:  
 Methadone solution for hospital discharge. Patient given a \*\*\* Day Supply: of \*\*\* mg/per day. Estimated Date/Time of Discharge: \*\*\*
- naloxone (NARCAN) 4 mg/actuation nasal spray  
 Apply 1 spray (4 mg total) in the nose as needed (Suspected opioid overdose) upon signs of opioid overdose. Call 911. May repeat one time, Starting today, No Print
- Inpatient Consult to Adult Social Work: SUD/ETOH  
 Reason for Consult to Adult Social Work? SUD/ETOH  
 Pharmacy has been requested to dispense methadone for hospital discharge to bridge patient until intake at outpatient methadone clinic. The planned/estimated date of discharge is \*\*\*.

- a. Only oral solution of methadone 10 mg/mL will be dispensed (oral solution allows for incremental dosing versus using standard tablets) in individual containers.
- b. Supply will only be provided on Fridays, Saturdays, Sundays, or holidays when the patient's normal methadone-providing clinic is closed.
- c. Hours of operation: 0900-1600. **Notify inpatient pharmacist before noon on intended day of discharge in order to ensure methadone is in their possession prior to discharge.**
- d. No more than a three-day supply can be dispensed. **Expect up to 4 hours for in patient pharmacy to prepare and deliver to the bedside.**
- e. **The Emergency Department is excluded from this workflow. This may change in the future**

### PHARMACIST STEPS:

1. The unit/floor pharmacists will discuss with the provider how many days of methadone they would like to dispense. The provider will use the "Inpatient methadone dispensed for outpatient bridging" place holder order to enter the number of days supplied needed, intended dose per day, and estimated date/time of discharge in EPIC using the IP Methadone dispensing for hospital discharge order set. This order is intended to notify inpatient pharmacy that a methadone discharge order is needed.

**KEY POINT:** *If the patient's discharge date changes please re-time the dose for the expected day of discharge so the MAR entry will be visible on the day of discharge instead of immediately upon the provider signing, which could be a day or more in advance.*

- a. Inpatient pharmacists to help remind ordering provider to include a prescription for Naloxone to the outpatient pharmacy
- 2. **Print inpatient labels** to Central Pharmacy (controlled substance vault area) on day of discharge

**KEY POINT:** First print inpatient extemp labels to apply to the individual doses; then print two bulk with OP labels to label one on the baggie that serves as outpatient dispensing container and one on the OUD dispensing log for tracking

- a. Use the original inpatient medication methadone order to re-dispense the number of doses needed. (do **NOT** use the “Inpatient methadone dispensed for outpatient bridging” dummy placeholder order)

Medication	Dose	Route	Frequency	Start	End	D/C Reason	Order Set
methadone (DOLOPHINE) concentrated solution 10 mg/mL	60 mg	Oral	EVERY 24 HOURS SCHEDULED	2/21/2023 0916			

- b. Change dispense information to dispense from central
- c. Reason for dispense: Opioid Use Disorder (OUD)

Dispense from: PHARMACY

Reason for dispense: OUD

Title	Number
Opioid Use Disorder (OUD)	7

Dispense now | Schedule future dispense

- i.
- d. Change dispense amount to the number of doses you like to dispense for discharge (max 3 doses)
- e. Change dispense code: Extemp

methadone (DOLOPHINE) concentrated solution 10 mg/mL

Dispense from: PHARMACY

Reason for dispense: Opioid Use Disorder

Dispense one or more doses | Dispense days supply

Dispense: 5 dispenses of 5 mL

Dispense now | Schedule future dispense

Medication needed on: 3/31/2023 at 0935

Label lead time: 0 minutes

Dispense code: Extemp

Dispense priority:

Label comments:  Suppress label printing

Charge method: Standard  Force charge on dispense

Service date: 3/31/2023

- f. This will print inpatient labels for each container of methadone needed

### 3. Print outpatient labels

- Re-dispense the inpatient order for methadone
- Change dispense information to dispense from central
- Reason for dispense: Opioid Use Disorder (OUD)

Dispense from: PHARMACY

Reason for dispense: OUD

Title	Number
Opioid Use Disorder (OUD)	7

Dispense: Opioid Use Disorder (OUD) 7

Buttons: Dispense now, Schedule future dispense

- Change dispense amount to 1
- Change dispense code: Bulk with OP Label
- This will automatically generate two outpatient labels (one label for the baggy containing all doses and one label for tracking purposes)

methadone (DOLOPHINE) concentrated solution 10 mg/mL

Dispense from: PHARMACY

Reason for dispense: Opioid Use Disorder

Buttons: Dispense one or more doses, Dispense days supply

Dispense: 1 dispenses of 5 mL

Buttons: Dispense now, Schedule future dispense

Medication needed on: 3/31/2023 at 0935

Label lead time: 0 minutes

Dispense code: Bulk with OP Label

Dispense priority:

Label comments:  Suppress label printing

Charge method: Standard  Force charge on dispense

Service date: 3/31/2023

- Manually enter the medication manufacture name and description in the label comments field

methadone (DOLOPHINE) concentrated solution 10 mg/mL

Dispense from: PHARMACY

Reason for dispense: Opioid Use Disorder

Dispense one or more doses | Dispense days supply

Dispense: 1 dispenses of 3 mL

Dispense now | Schedule future dispense

Medication needed on: 9/12/2023 at 10:23

Label lead time: 0 minutes

Dispense code: Bulk with OP ...

Dispense priority:

Label comments:  Suppress label printing

Manufacture: Roxane/West-War  
Medication Description: Clear Liquid

**Dispense: methadone 10 mg/mL Conc**  
**Take 3 mLs (30 mg total) by mouth Every 24 Hours**  
Dispense Qty: 3 mL

**Manufacture: Roxane/West-War**  
**Medication Description: Clear Liquid**

\*No Refills Available\* Exp: 10/15/23 13:07  
Warning: State and federal law prohibits transfer of this drug to any person

4. Central or the control substance technician to prepare the patient-specific order for take home
5. When completed, central pharmacists will check the medication and complete the product labeling process.
  - a. Each inpatient label should be adhered to each individual container after pharmacist check.
  - b. One outpatient label will be used to adhere to the outer bag where all the methadone doses will be placed. Outpatient label will include the following information automatically: dispensing pharmacy information, provider name, patient name, order number, physical identification description (pharmacists will manually add to the label comments), dose, quantity, manufacturer name (pharmacists will manually add to the label comments), expiration date (30 days from dispensing), date of dispense, and area for technician and pharmacist signature.

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SC 3A-301AS-01 Ord: 4511

**Dispense: methadone 10 mg/mL Conc**  
**Take 1 mL (10 mg total) by mouth every 6 hours**  
Dispense Qty: 1 mL

**Manufacture: Roxane/West-War**  
**Medication Description: Clear Liquid**

\*No Refills Available\* Exp: 10/15/23 13:15  
Warning: State and federal law prohibits transfer of this drug to any person other than the person for whom it was prescribed  
[ REDISP REPRINT ] 9/15/23 1315 Tech \_\_\_\_\_ RPh \_\_\_\_\_

- c. Second outpatient label will be placed in the methadone dispensing log for documentation
- d. The central pharmacists will initial each label.

**6. Delivery and documentation:**

- a. The unit/floor or transition of care pharmacists will deliver the methadone to the nurse for discharge and provide bedside education if needed
- b. The unit/floor or transition of care pharmacists will hand off the methadone to the nurse and the nurse will document on the MAR as dispensed using the Inpatient methadone dispensed for outpatient bridging dummy place holder order

- c. CSM delivery form must be signed by both the delivering personal (technician or pharmacists) and
- d. the receiver personal (nursing/patient)  
 If there is a delay in discharge or discharge is after hours, the nurse will follow policy 900.3105 ([Patient Own Medication Belongings](#)) for patient own medication storage and place the methadone in the patient's belongings and provide to the patient at discharge.
- e. The unit/floor pharmacists will place a note in the patient's chart using the following dot phrase:

.Methadone OUD: The patient was dispensed \*\*\* doses of \*\*\*mg of oral methadone daily on @TD@ from inpatient pharmacy under dispensing exemption pursuant to 21CFR 1306.07 (B). They were instructed to take as ordered and advised on the risk of mixing methadone with other substances. They were instructed to keep their empty bottles and bring them to their Opiate Treatment Program (OTP) appointment as proof of dose.

## 7. Central or Control substance TECHNICIAN STEPS:

1. Receive inpatient label(s) from the zebra printer.
2. Login to control substance vault
3. From CSM Home page, click "Dispense to Patient"
4. Search for patient by last name.
  - a. Validate and select correct patient.
5. Search for "methadone"
  - a. Find and select appropriate strength.
6. Calculate dispense amount in mL
  - a. i.e., 3 doses of 4 mL (40 mg) = 12 mL (120 mg) dispense amount
  - b. In "Comments" section write:
    - i. Total number of doses dispensed.
    - ii. Order number.
  - c. Enter Epic order number in the "Prescription ID" section
  - d. Enter Provider name in the "Physician name" section
7. "Pick" the medication.
8. Withdraw methadone and place in amber prescription vial(s) with child-resistant caps to appropriate amount for prescribed dose.
9. Have pharmacist verify medication
10. After verification, the pharmacist must:
  - a. Fill out "Methadone Inpatient Dispensing Log for Discharge" for documentation (**Appendix B**)
  - b. Document date.
  - c. Place Outpatient Label in available space on form.
  - d. Enter dose
  - e. Enter total # of doses.
  - f. Enter total amount dispensed
  - g. Pharmacist documents initials into "Methadone Inpatient Dispensing Log for Discharge" form.
11. Once methadone is verified attach one inpatient label to each methadone dose.

## 8. Pharmacy Record Keeping:

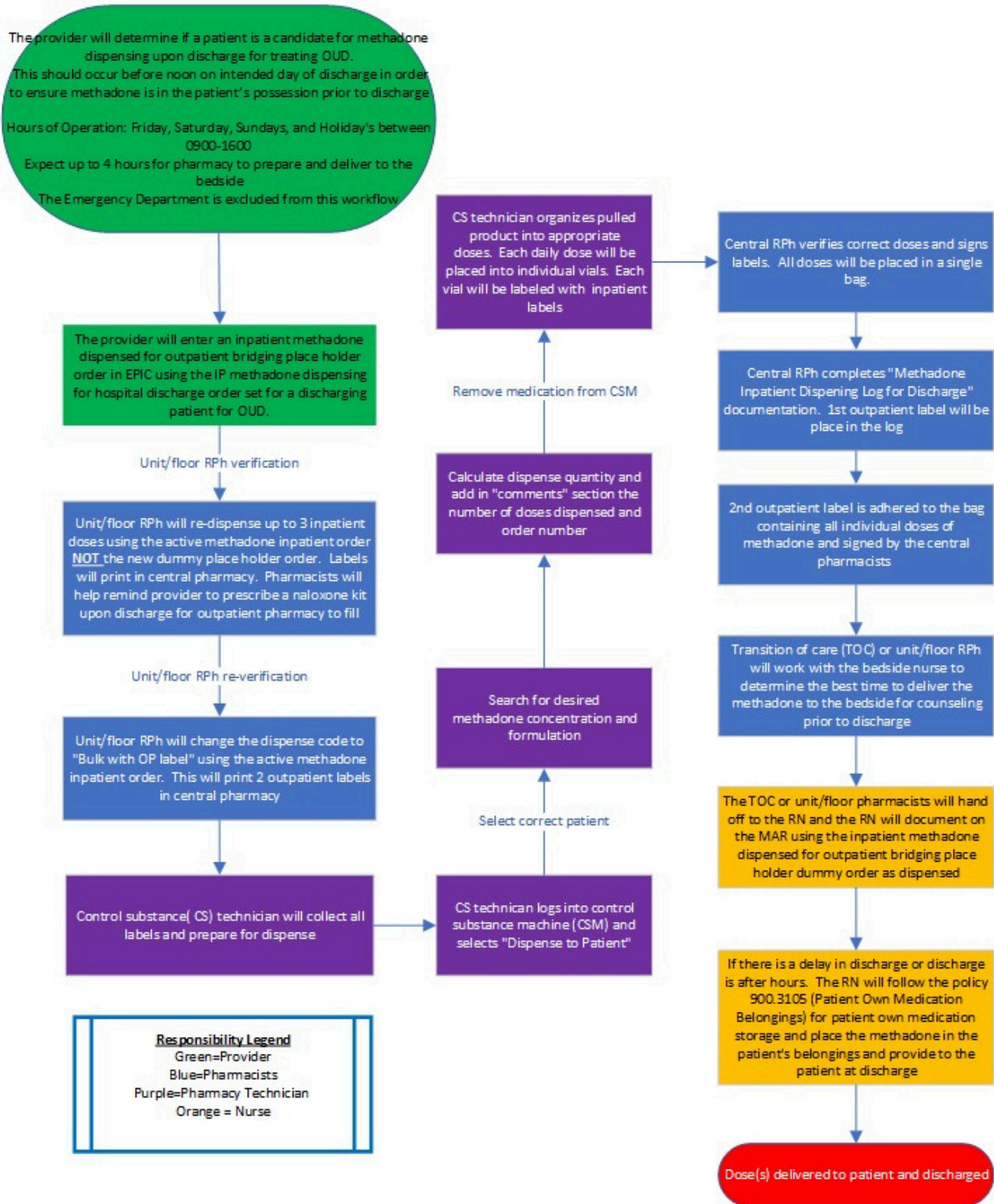
- a. Methadone Inpatient Dispensing Log for Discharge will be kept for three years
- b. Dispensing logs and other control substance paperwork will be kept with other department control substance paperwork and stored per Policy [Document Retention and Destruction.pdf](#)

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Key Words: Opioid use disorder, methadone  
 References: N/A  
 Approval: Pharmacy Operation Committee, Pain/Opioid System Steering Committee  
 Originators: Pain/Opioid System Steering Committee  
 Owner: Pharmacy Operation Committee

**Appendix A**

# Methadone Opioid Use Disorder (OUD) 72 hour Dispensing Workflow



**Appendix B**

**Methadone Inpatient Dispensing Log for Discharge**

<b>Date</b>	<b>Outpatient Label</b>	<b>Dose (mg)</b>	<b># of doses</b>	<b>Total amount dispensed (mg/mL)</b>	<b>Pharmacist</b>
