

TALK TO YOUR PHARMACIST TOOLKIT

A Guide to Help Utah Pharmacists
Talk to Customers About Prescription Opioids

TALK TO YOUR PHARMACIST

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The following agencies have partnered to implement this campaign:

- Salt Lake Metro Narcotics Task Force
- Stop the Opidemic
- Use Only as Directed
- Utah Department of Health Violence and Injury Prevention Program
- Utah Department of Commerce Division of Occupational and Professional Licensing
- Utah Pharmacy Association
- Utah Drug Enforcement Administration

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TALK TO YOUR PHARMACIST

Overview

May 2017 is Talk to Your Pharmacist Month in Utah. This marks the first time for the designation and is in direct response to the increase in opioids dispensed and the number of deaths from opioids.

As health care providers, pharmacists play a vital role in prevention efforts and educating patients about the risks of opioids, signs of an opioid overdose, naloxone use, and safe storage and disposal of prescription opioids.

From 2002 to 2015, there was a 29.4 percent increase in the rate of prescription opioids dispensed, equating to nine opioid prescriptions for every 10 Utahns. Given the high number of deaths associated with prescription opioids, understanding the risks of opioids is vital to patient safety. The risks include physical dependency, addiction, or overdose. Overdose can take place even when using an opioid as directed, especially if taken with other medications such as benzodiazepines, alcohol, or sleep aids. Through focus groups, the Utah Department of Health (UDOH) found that many Utahns are unaware of which medications are opioids or the risks associated with taking them.

In addition, the U.S. Drug Enforcement Administration is holding its annual Drug Take Back Day Saturday, April 29, 2017. This is an opportunity for the public to clean out their medicine cabinets and take their unused, unwanted, or unneeded prescription medicines for safe disposal at a DEA designated location.

Purpose

The purpose of Talk to Your Pharmacist Month is to encourage pharmacists to start a conversation with patients who have been prescribed an opioid. Pharmacists will place stickers on bottles of opioids and talk about the risks of opioids, signs of an overdose, naloxone, and safe storage and disposal of prescription opioids.

Law

During the 2018 General Session of the Utah State Legislature law was passed requiring pharmacist to warn patients about the risks of taking opioids. General Session of the Utah State Legislature requiring pharmacies to warn patients of the dangers of opioids. House Bill 399 Titled: Opioid Abuse Prevention and Treatment Amendments: Requires a warning label and informational pamphlet be distributed with an opiate prescription. The Department of Health shall produce and distribute a pamphlet about opiates. For more information on this bill le.utah.gov/~2018/bills/static/HB0399.html.

Implementation

The Talk to Your Pharmacist toolkit will be provided to pharmacists in the first week of April. It includes the purpose of the campaign, available materials and how to request them, and talking points on opioid risks, signs of an overdose, naloxone, safe storage of opioids, and safe disposal of opioids.

You are encouraged to:

- Place the pill bottle stickers on top of opioid prescriptions.
- Hang the campaign posters in your pharmacy.

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- Use the talking points to your patients about the risks of opioids, signs of an overdose, naloxone use, and safe storage and disposal of opioids.
- Distribute campaign brochures to your customers.

Dissemination

The toolkit and printed materials will be disseminated to pharmacists by the UDOH staff. The toolkit will be available online at www.health.utah.gov/vipp/topics/prescription-drug-overdoses/resources.html. Printed materials can be requested by contacting Angela Stander, her contact information is below. When requesting printed material, please provide your name, pharmacy address, name of the material, quantities, and size (for posters only).

For more information, please contact Angela Stander, UDOH Overdose Prevention Coordinator, at 801-538-9370 or astander@utah.gov.

Results from 2017 Talk to Your Pharmacy Month

A total of 165 Utah pharmacies participated in “Talk to Your Pharmacist Month.” In order to assess the effectiveness of the campaign, a survey was distributed to pharmacies that participated and were asked to fill out the survey once for each location. Thirty-six responses were completed.

The majority of responses were positive, and nearly all plan to participate in the campaign in the future. Additionally, six pharmacies requested more materials at the conclusion of the survey.

Activity Participation

More than 83% of respondents reported placing pill bottle stickers on top of opioid prescriptions. Nearly 67% of respondents used talking points to talk to their patients about opioid risks. Nearly 64% distributed campaign brochures to their customers. The majority of participating pharmacies reported participating in three or all four activities (65.5%).

Customer Response

When asked about the general response from customers regarding “Talk to Your Pharmacist Month”, the majority of pharmacies said it was good or very good (75.9%), while only two pharmacies reported a poor response.

Materials Still in Use

When asked what materials pharmacies have continued to use post-campaign, the majority said pill bottle stickers (75.0%), followed by campaign posters (46.4%), and campaign brochures (39.3%).

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Campaign Materials

Campaign materials that can be utilized during the month and year round include: stickers, posters, and brochures. These materials can be requested by contacting Angela Stander at 801-538-9370 or astander@utah.gov. When requesting materials please provide the name of the material, quantities, and size (for posters only) in your material request.

Pill Bottle Sticker

At minimum during the campaign, these stickers should be placed on top of the opioid prescription lids when possible. The stickers are 1.25 inches in diameter.



Posters

Five posters are available in two sizes:

- 11 x 17
- 22 x 28

Naloxone



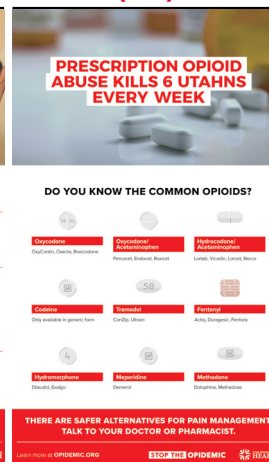
Do Your Part



Know the Risks



Common Opioids (V1)



Common Opioids (V2)



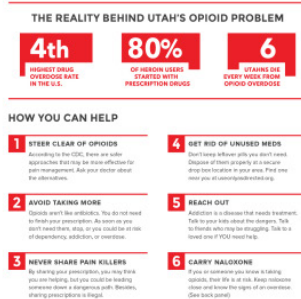
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Brochures

Brochures are available in various sizes. PDF versions of each brochure can be downloaded by clicking on the title or image below.

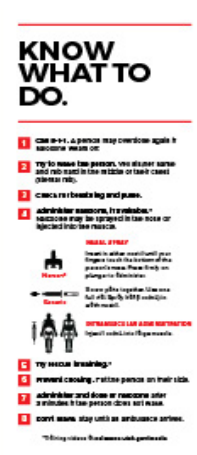
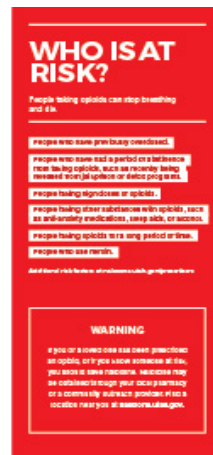
Stop the Opioid

The **Stop the Opioid** is a gate-fold brochure focuses on what are opioids, opioid risks, signs of an overdose, and how you can help someone some struggling with opioid misuse and abuse.



Naloxone

The **Naloxone** tri-fold brochure focuses on what naloxone is, who should use naloxone, and how to administer naloxone.



Use Only as Directed

The **Use Only as Directed** tri-fold brochure focuses on safe use, safe storage, and safe disposal of opioid medication.



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Pocketcard

This tri-fold pocketcard focuses on the signs of an overdose, how to respond to an overdose, who is at risk of an opioid overdose, and general information about naloxone. A PDF version of the pocketcard can be downloaded by clicking on the image below.

YOU ARE AT HIGH RISK FOR AN OPIOID OVERDOSE IF YOU:

- Are taking high doses of opioids for long-term management of chronic pain
- Have a history of substance abuse or a previous non-fatal overdose
- Have lowered opioid tolerance as a result of completing a detoxification program or were recently released from incarceration
- Are using a combination of opioids and other drugs such as alcohol and benzodiazepines (Xanax, Valium, Xanax)
- Are unfamiliar with the strength and dosage of prescription opioids and the purity of street drug like heroin
- Are alone when using drugs
- Smoke cigarettes or have a respiratory illness, kidney or liver disease, cardiac illness, or HIV/AIDS
- Have been off opioids for >72 hours and resume taking them

NALOXONE RESOURCES

Utah Naloxone Laws

- Individuals can request an overdose without fear of criminal prosecution for illegal possession of a controlled substance or illicit drug (Good Samaritan Law 2014 GS HB 11)
- Naloxone can be prescribed and dispensed to third parties (usually a caregiver, friend, or family member of a person at risk for an opioid overdose) (Naloxone Access Law 2014 GS HB 119)
- Pharmacies can dispense naloxone through the use of a standing order issued by a physician (Naloxone Standing Order 2016 GS HB 240)

Websites

- www.utah.gov
- epidemic.org
- www.utah.gov/health
- utahnaloxone.org

Phone

Call 2-1-1 for local services and treatment centers

YOU CAN PREVENT DEATH FROM AN OPIOID OVERDOSE

Recognize Overdose Warning Signs:

- Very limp body and very pale face
- Blue lips or blue fingertips
- No response when you yell his/her name or rub hard in the middle of the chest (sternal rub)
- Slowed breathing (less than 1 breath every 5 seconds) or no breathing
- Making choking sounds or a gurgling, snoring noise
- Small pupils that do not respond to light

If you see or hear any one of these behaviors, call 9-1-1 or get medical help immediately!



WHAT TO DO AFTER CALLING 9-1-1

1. Try to wake the person.
Yell his/her name and rub hard in the middle of the chest (sternal rub).
2. Try rescue breathing.
 - Make sure nothing is in his/her mouth.
 - Tilt his/her head back, lift chin, and pinch nose shut.
 - Give 1 slow breath every 5 seconds until he/she starts breathing.
3. Administer naloxone, if available.
4. Prevent choking. Put the person on his/her side.
5. Don't leave. Stay until an ambulance arrives.
6. Administer 2nd dose of naloxone, if necessary.

Call 9-1-1, get medical help, or call the Utah Poison Control Center.



WHAT IS NALOXONE?

Naloxone (Narcan) is a drug that can reverse overdoses from heroin or prescription opioids such as oxycodone, hydrocodone, methadone, morphine, and fentanyl.

There is no potential for abuse and side effects are rare; however, a person may experience abrupt withdrawal symptoms.

How long does it take to work?
Naloxone may work immediately or may take up to five minutes. More than one dose may be needed. The effects of naloxone can last 30-90 minutes.

REMEMBER, NALOXONE ONLY WORKS FOR OPIOIDS!

If you are at risk for an opioid overdose or care for someone who is at risk, call your doctor or pharmacist about getting a prescription for naloxone. For more information visit us at www.naloxone.utah.gov.

HOW IS NALOXONE ADMINISTERED?

Intramuscular Administration
Inject 2 mg in shoulder or thigh. Repeat after 2-3 minutes if there is no or minimal response.

Intranasal Administration
Genex
Spray 1 mg (1/2 of syringe) into each nostril. Repeat after 2-3 minutes if there is no or minimal response.

Brenasol (Narcan)
Spray 4 mg (full device) into one nostril. Repeat with second device into other nostril after 2-3 minutes if there is no or minimal response.

(Design and illustrations courtesy of Project for People)

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Customer Discussion

Customers may ask you or other pharmacy staff about opioids, including the dangers of using opioids, signs of an opioid overdose, or how to safely store and dispose of unused opioid medications. A script and talking points have been provided to help you talk with customers about these sensitive issues. These can be printed and placed close to your pharmacy pick-up window or cash registers. They are a great way to start a conversations with your customers.

Talking Points

Opioid Risks

- Taking opioids may put you at risk for dependency, addiction, or overdose.
- Drug tolerances build quickly, prompting a need to take more to get the same effect.
- It only takes seven days to become physically dependent on opioids.
- Stopping opioid use can lead to intense withdrawal symptoms such as shaking, vomiting, and anxiety.
- Opioids can cause reactions that make your breathing slow down or even stop.
- You are at risk of overdosing if you:
 - have previously overdosed;
 - have had a period of abstinence from taking opioids, such as recently being released from jail/prison or detox programs;
 - are taking high doses of opioids;
 - are taking other substances with opioids, such as anti-anxiety medications, sleep aids, or alcohol;
 - are on opioids for a long period of time; or
 - use heroin.

Signs of an Opioid Overdose

- Recognizing the signs of an opioid overdose can save your life or a loved one's life. These signs may include:
 - very limp body and very pale face;
 - blue lips or blue fingertips;
 - no response when you yell his/her name or rub hard in the middle of the person's chest;
 - slowed breathing (fewer than one breath every five seconds) or no breathing at all; or
 - hearing choking sounds or a gurgling, snoring noise.
- If you see or hear any of these behaviors, get medical help immediately!
 1. Call 911 and give the person naloxone.
 2. Try to wake the person by yelling his/her name and rubbing hard in the middle of their chest.
 3. Try rescue breathing and/or chest compressions.
 4. Give the person a second dose of naloxone after three minutes if there is still no reaction from them.
 5. Follow 911 dispatcher instructions.
 6. STAY WITH THE PERSON UNTIL MEDICAL HELP ARRIVES.

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Naloxone

- Naloxone is an antidote that reverses an opioid overdose and gets someone breathing again.
- Naloxone is NOT a controlled substance.
- Naloxone is for opioid medications like an epinephrine pen is for someone with an allergy.
- Anyone can administer naloxone. If you are at risk of overdosing, or have a friend or family member who is at risk, you should have naloxone
- Naloxone is safe. There are virtually no harmful side effects.
- The effects last 30-90 minutes, which allows time to seek help.

Safe Storage and Disposal

- Store prescription opioids out of reach of children and visitors.
- Know where your prescription opioids are at all times.
- Keep prescription opioids in the original bottle with the label attached, and with the child-resistant cap secured.
- Keep track of how many prescription opioids are in your bottle so you are immediately aware if any are missing.
- Dispose of all unused and expired prescription opioids properly.
- Clean out your medicine cabinet and take unused medications to collection bins located across the state for safe and legal disposal.
- Disposal bins can be found at useonlyasdirected.org/drop-off-locator/.
- Follow these steps if there isn't a safe disposal site near you:
 1. Remove all personal identification from the bottles.
 2. Crush and mix unused drugs with an undesirable substance such as coffee grounds, table scraps or dirt.
 3. Place the mixture in a sealed container and put it in your trash can on the day of pickup.

Script

Hi. My name is _____. It looks like you've been prescribed an opioid medication from your doctor. Opioids are often used to help control pain. But it's important to know that taking these medications also have serious risks, such as dependency, addiction, or even an overdose.

It's important that when you are taking these medications that you know the signs of an overdose in case anything happens. This brochure goes over what an overdose can look like and what to do if something happens. (Hand patient the Stop the Opioid epidemic brochure)

I would also like to tell you about naloxone and how to properly administer it. Naloxone is a safe medication that can reverse an overdose. It is easy to administer and can save a life. Would you like a naloxone kit? (Hand the patient the Naloxone brochure)

Lastly, here are some tips on how to safely store your opioid medications. (Hand patient the Use Only As Directed brochure) It also tells you how to safely dispose of any unused opioid medications.

Do you have any other questions for me?

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