Introduction

IHA Opioid Alternative Project | Clinician Toolkit

Course Overview

Thank you for participating in the Iroquois Healthcare Association (IHA) Opioid Alternative Project. The IHA Opioid Alternative Project Clinician Toolkit provides information and resources to assist in the education of clinicians, in the following areas:

- The opioid crisis
- Use of alternatives to opioids (ALTOs), procedures and pain pathways
- IHA treatment guidelines
- Harm reduction strategies
- Treatment of addicted patients and referrals

IHA Opioid Alternative Project Training Curriculum

The IHA Opioid Alternative Project clinician training curriculum has two main components: training sessions and podcast links.

CLINICIAN ALTO TRAINING SESSIONS

The IHA Opioid Alternative Project clinician training is presented in multiple sessions, either by PowerPoint presentation by your organization’s identified trainer or recorded webinars.

PODCAST LINKS

The IHA Opioid Alternative Project training kit offers a variety of podcasts from Emergency Medical Minute, a Colorado-based non-profit, that can be accessed at the convenience of the clinician. For additional opioid-related podcasts, visit Emergency Medical Minute.

https://emergencymedicalminute.com/opioid-miniseries/
**Multi-Media Podcast Series**

**INTRODUCTION**

Thank you for joining us for the IHA Opioid Alternative Project. The following podcasts go through a history of our nation’s opioid epidemic, then focus on three major topics of the Colorado Chapter of the American College of Emergency Physicians (CO-ACEP) 2017 Opioid Prescribing & Treatment Guidelines. Part III – Alternative to Opioids from Emergency Medical Minute in Podcasts – discusses the use of alternatives to opioids (ALTOs) in the emergency department, a focus of both Colorado ALTO Project and IHA Opiod Alternative Project. These podcasts will help you begin to understand the why and how of the ALTO Projects.

**Listen to PART I: Medicine’s Greatest Folly from Emergency Medical Minute in Podcasts.**

Dr. Don Stader describes how opioids became medicine's drug of choice for pain, documenting the dubious science and market forces that helped create the opioid epidemic.  

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**Listen to PART II: Limiting Opioids in the Emergency Department from Emergency Medical Minute in Podcasts.**

Dr. Don Stader and Dr. Erik Verzemniks discuss COACEP 2017 Opioid Prescribing & Treatment Guidelines recommendations to limiting opioids in the ED, including in-depth discussion of keys to limiting opioids and speaking with patients about opioids.  

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**Listen to PART III: Alternative to Opioids from Emergency Medical Minute in Podcasts.**

Pharmacist Rachael Duncan reviews ALTO medications, how they are used and tips to using ALTOs safely and effectively.  

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**Listen to Part IV: Harm Reduction from Emergency Medical Minute in Podcasts.**

Dr. Don Stader and Harm Reduction Action Center Executive Director Lisa Raville discuss harm reduction and keys to speaking with patients with opioid use disorder and IV drug use – emphasizing points on how to keep these patients safe.  
**Multi-Media Videos**

**INTRODUCTION**

The following YouTube videos provide an overview on trigger point injections and occipital nerve blocks, two important procedures used by emergency department clinicians in the alternative treatments.

**HOW TO DO THEM**

Trigger point injections are a highly effective, easy-to-perform procedure that are extremely effective for headache, low back pain, torticollis and trapezius pain. There are multiple studies about their efficacy when performed in the ED. Learning to do trigger point injections and becoming facile in their usage is a key ALTO technique.

1. **Trigger Point Injections**
   A YouTube video on performing trigger point injections, done by Dr. Mellick, who championed trigger points in the ED.
   [https://youtu.be/0to5wzftpM](https://youtu.be/0to5wzftpM)

2. **Occipital Nerve Blocks**
   An informational YouTube video on performing occipital nerve blocks followed by "how to do an occipital nerve block."
   [https://www.youtube.com/watch?v=2zn_0xWSoKA](https://www.youtube.com/watch?v=2zn_0xWSoKA)
   [https://www.youtube.com/watch?v=JGL0aZpZwqU](https://www.youtube.com/watch?v=JGL0aZpZwqU)
Selected References

Opioid overview

Headache treatment

Low back pain treatment

Trigger point injection

Renal colic treatment

Soft tissue injury treatment

Dental pain treatment

Ketamine:

Ketorolac
**Musculoskeletal Pain**

**FIRST APPROACH:**
- Ibuprofen PO 600 mg OR Ketorolac 15 mg IV / 30mg IM
- Lidoderm Patch (if appropriate)
- Cyclobenzaprine 5 mg PO OR Diazepam 5 mg PO (if muscle spasm component)

**SECOND APPROACH:**
- Ketamine
- Gabapentin
- Trigger Point Injections
- Ketorolac (If not previously given)
- Dexamethasone

**ADDITIONAL OPTIONS AT PROVIDER DISCRETION**
- Additional IV therapy as needed
- Diazepam/Other Benzodiazepine
- Repeat and/or use additional first approach treatment

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**Abdominal Pain / Gastroparesis**

**FIRST APPROACH:**
- Haloperidol 5mg IV
- Acetaminophen 1000mg PO OR Ketorolac 15 mg IV or 30mg IM
- Capsaicin Cream (for Cannabinoid Hyperemesis)
- Metoclopramide 10 mg IV
- Prochlorperazine 10 mg IV
- Diphenhydramine 25 mg IV
- Dicyclomine 20 mg PO/IM

**SECOND APPROACH:**
- Haloperidol
- Ketamine
- Lidocaine

**ADDITIONAL OPTIONS AT PROVIDER DISCRETION**
- Repeat First Approach drugs
- Diphenhydramine as secondary medication with any other primary drug treatment

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**Renal Colic**

**FIRST APPROACH:**
- APAP 1000 mg PO or IV
- Ketorolac 15 mg IV or 30 mg IM

**SECOND APPROACH:**
- Lidocaine IV AND/OR Ketamine

**ADDITIONAL OPTIONS AT PROVIDER DISCRETION**
- 1 L NS Bolus
- Antiemetic as needed

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**Headache**

**FIRST APPROACH:**
- Prochlorperazine 10 mg PO / IV OR Metoclopramide 10 mg IV
- Ketorolac 15 mg IV OR 30 mg IM
- Sphenopalatine block, occipital block, or Trigger Point Injection
- Acetaminophen 1000 mg PO + Ibuprofen 600 mg PO
- 1 L 0.9% NS + high-flow oxygen
- Sumatriptan 6 mg SC

**SECOND APPROACH:**
- Lidocaine IV
- Caffeine
- Ketamine
- Promethazine
- Dexamethasone
- Haloperidol
- Magnesium
- Valproic acid
- Propofol

**ADDITIONAL OPTIONS AT PROVIDER DISCRETION**
- May give 2nd dose of Reglan before Second Approach treatments
- Diphenhydramine

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**Dental Pain**

- Acetaminophen 1000 mg PO
- Ketorolac 30 mg IM
- Dental Block
**Musculoskeletal**

- Ibuprofen PO 600 mg *OR*
- Ketorolac 15 mg IV/30 mg IM
- Lidoderm Patch
- Spasm

**Ibuprofen PO 600 mg or Ketorolac 15 mg IV/30 mg IM**

**Headache**

- Prochlorperazine 10 mg PO / IV *OR* Metoclopramide 10 mg IV
- Ketorolac 15 mg IV *OR* 30 mg IM
- Sphenopalatine block, occipital block, or Trigger Point Injection
- Acetaminophen 1000 mg PO + Ibuprofen 600 mg PO
- 1 L 0.9% NS + high-flow oxygen
- Sumatriptan 6 mg SC

**Prochlorperazine 10 mg PO / IV or Metoclopramide 10 mg IV**

**Lidocaine IV**

**Caffeine**

**Ketamine**

**Promethazine**

**Dexamethasone**

**Haloperidol**

**Magnesium**

**Valproic acid**

**Propofol**

**Diphenhydramine and 2nd dose of Metoclopramide at provider’s discretion**
Abdominal Pain

- Haloperidol 5mg IV
- Acetaminophen 1000mg PO or IV
- Ketorolac 15 mg IV or 30mg IM
- Metoclopramide 10 mg IV
- Prochlorperazine 10 mg IV
- Diphenhydramine 25 mg IV
- Dicyclomine 20 mg PO/IM
  (Cannabinoid Hyperemesis)
- Capsaicin Cream

Haloperidol
Ketamine
Lidocaine

Repeat First Approach drugs and diphenhydramine as secondary medication at provider’s discretion

Renal Colic

- Acetaminophen 1000 mg PO or IV
- Ketorolac 15 mg IV or 30 mg IM

1 L NS Bolus and Antiemetic as needed

Lidocaine IV AND/OR Ketamine

Dental Pain

- Acetaminophen 1000 mg PO
- Ketorolac 30 mg IM
- Dental Block
**Drug Dosage Reference Table**

<table>
<thead>
<tr>
<th>GENERIC</th>
<th>TRADE NAME</th>
<th>USUAL DOSES</th>
<th>AVAILABLE ROUTES</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACETAMINOPHEN</td>
<td>Tylenol</td>
<td>1,000 mg</td>
<td>PO, IV</td>
</tr>
<tr>
<td>CAFFEINE</td>
<td>caffeine</td>
<td>500 mg</td>
<td>IV</td>
</tr>
<tr>
<td>CAPSAICIN CREAM</td>
<td>Capsaicin Cream</td>
<td>cream, patch</td>
<td>trans dermal</td>
</tr>
<tr>
<td>CYCLOBENZAPRINE</td>
<td>Flexeril</td>
<td>5-10 mg</td>
<td>PO</td>
</tr>
<tr>
<td>DEXAMETHASONE</td>
<td>Decadron</td>
<td>8 mg</td>
<td>IV</td>
</tr>
<tr>
<td>DICYCLOMINE</td>
<td>Bentyl</td>
<td>20 mg</td>
<td>PO, IM</td>
</tr>
<tr>
<td>DIAZEPAM</td>
<td>Valium</td>
<td>5 mg</td>
<td>PO, IV</td>
</tr>
<tr>
<td>DIPHENHYDRAMINE</td>
<td>Benadryl</td>
<td>25 mg</td>
<td>PO, IV</td>
</tr>
<tr>
<td>PROPOFOL*</td>
<td>Diprivan</td>
<td>10-20 MG</td>
<td>IV</td>
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<tr>
<td>GABAPENTIN</td>
<td>Neurontin</td>
<td>300-600 mg</td>
<td>PO</td>
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<tr>
<td>HALOPERIDOL</td>
<td>Haldol</td>
<td>2.5-5 mg</td>
<td>IV</td>
</tr>
<tr>
<td>IBUPROFEN</td>
<td>Motrin</td>
<td>600-800 mg</td>
<td>PO, IV</td>
</tr>
<tr>
<td>KETAMINE**</td>
<td>Ketamine</td>
<td>0.5 mg/kg</td>
<td>IN</td>
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<tr>
<td>KETOROLAC</td>
<td>Toradol</td>
<td>15-30 mg</td>
<td>IV, IM</td>
</tr>
<tr>
<td>LIDOCAINE#</td>
<td>Lidocaine</td>
<td>1.5 mg/KG</td>
<td>IV</td>
</tr>
<tr>
<td>LIDODERM PATCH</td>
<td>Lidocaine</td>
<td>5% patch</td>
<td>trans dermal</td>
</tr>
<tr>
<td>MAGNESIUM^</td>
<td>Magnesium</td>
<td>1 gm</td>
<td>IV</td>
</tr>
<tr>
<td>METOCLOPRAMIDE</td>
<td>Reglan</td>
<td>10 mg</td>
<td>IV</td>
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<tr>
<td>PROCHLORPERAZINE</td>
<td>Compazine</td>
<td>10 mg</td>
<td>PO, IV</td>
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<td>PROMETHAZINE</td>
<td>Phenergan</td>
<td>12.5-25 mg</td>
<td>PO, IV</td>
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<tr>
<td>SUMATRIPTAN</td>
<td>Imitrex</td>
<td>6 mg</td>
<td>SQ</td>
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<tr>
<td>VALPROIC ACID†</td>
<td>Depakote</td>
<td>500 mg</td>
<td>IV</td>
</tr>
</tbody>
</table>

Doses and routes of administration are common suggestions. Actual drug choice, dose, and route of administration remain the responsibility of the individual provider.

* Can repeat q10 minutes
** Maximum dose of 50 mg
# Place in 100 mL NS and given over 10 min with a max dose of 200 mg
^ Administer over 60 min
† Place in 50 mL NS and administer over 30 min
Opioid Free Pain Options by Indication at Discharge

**Headache**

**ACUTE ATTACKS:**
- Sumatriptan 100 mg
- Acetaminophen/Aspirin/Caffeine
- Acetaminophen 1000 mg every 6 hours
- DHE 2 mg nasal spray
- Naproxen 500-550 mg twice daily
- Metoclopramide 10 mg every 6 hours
- Ibuprofen 600 mg PO every 6 hours

**PREVENTION:**
- Propranolol 40 mg twice daily
- Divalproex DR 250 mg twice daily OR ER 500 mg daily
- Topiramate 25 mg at bedtime
- Magnesium supplementation 600 mg daily

**Sore Throat**
- Ibuprofen 600 mg every 6 hours
- Acetaminophen 1000 mg every 6 hours
- Dexamethasone 10 mg once
- Viscous Lidocaine

**Fibromyalgia**
- Cardiovascular Exercise
- Strength Training
- Massage Therapy
- Amitriptyline 10 mg at Bedtime
- Cyclobenzaprine 10 mg every 8 hours
- Pregabalin 75 mg twice daily

**Simple Sprains**
- Immobilization
- Ice
- Ibuprofen 600 mg every 6 hours
- Acetaminophen 1000 mg every 6 hours
- Diclofenac 1.3% patch TD twice daily
- Diclofenac 1% gel 4 g four times daily PRN

**Uncomplicated Neck Pain**
- Acetaminophen 1000 mg every 6 hours
- Ibuprofen 600 mg every 6 hours
- Cyclobenzaprine 5 mg every 8 hours
- Physical therapy
- Lidocaine 5% patch Q12 hours

**Uncomplicated Back Pain**
- Acetaminophen 1000 mg every 6 hours
- Ibuprofen 600 mg every 6 hours
- Lidocaine 5% patch Q12 hours
- Diclofenac 1.3% patch TD twice daily
- Diclofenac 1% gel 4 g four times daily PRN
- Cyclobenzaprine 5 mg PO three times daily
- Heat
- Physical therapy
- Exercise program

**Contusions**
- Compression
- Ice
- Ibuprofen 600 mg every 6 hours
- Acetaminophen 1000 mg every 6 hours
- Lidoderm 5%

**Non-Traumatic Tooth Pain**
- Ibuprofen 600 mg every 6 hours AND
- Acetaminophen 1000 mg every 6 hours (clove oil, other topical anesthetics)
- Viscous Lidocaine topically

**Osteoarthritis**
- Diclofenac 50 mg every 8 hours
- Naproxen 500 mg twice daily
- Celecoxib 200 mg daily
- Diclofenac 1.3% patch TD twice daily
- Diclofenac 1% gel 4 g four times daily PRN (topical NSAIDs, capsaicin)

**Undifferentiated Abdominal Pain**
- Dicyclomine 20 mg every 6 hours
- Acetaminophen 1000 mg every 6 hours (clove oil, other topical anesthetics)
- Prochlorperazine 10 mg every 6 hours

**Neuropathic Pain**
- Gabapentin 300mg every 8 hours
- Amitriptyline 25 mg at bedtime
- Pregabalin 75 mg twice daily