

Acute Care Opioid Treatment and Prescribing Recommendations:

Summary of Selected Best Practices

These recommendations are to be used as a clinical tool,
but they do not replace clinician judgment.

Dental

Pre-Procedure

- Opioid prescriptions should not be written prior to completing a dental procedure.
- Communicate a conservative philosophy by emphasizing the efficacy and appropriateness of over the counter medications' analgesic properties.
- Address dental pain through clinical intervention rather than opioid pain relief.
- Refer patients to a free or low-cost dental program in the absence of insurance or financial constraints.

Prescribing

- The prescription drug monitoring program (PDMP) must be accessed prior to prescribing controlled substances schedules 2-5, in compliance with Michigan law.
- Conduct full dental and medical history of the patient and include analysis of current medications.
- Identify any high-risk behaviors or diagnoses (previous substance use disorders, alcohol or tobacco use, psychiatric comorbidities including depression or anxiety).
- Non-opioid therapies (e.g., acetaminophen, ibuprofen) should be encouraged as the primary treatment.
- Non-pharmacologic therapies (e.g., acupuncture, mindful practice) should be encouraged when the patient is open to these alternative solutions to pain control.
- For breakthrough or severe pain, short-acting opioids (e.g., hydrocodone, oxycodone) should be prescribed at the lowest effective dose for no more than 3-5 day courses.
- Do not co-prescribe opioids with other sedatives or CNS depressant medications (e.g., benzodiazepines).
- Consider offering a naloxone co-prescription to patients who may be at increased risk for overdose, including those with a history of overdose, a substance use disorder, those already prescribed benzodiazepines, and patients who are receiving higher doses of opioids (e.g., >50 MME/Day).

For patients discharged with an opioid prescription

- Discuss the expectations regarding recovery and pain management goals with the patient.
- Educate patient and parent/guardian (for minors) regarding safe use of opioids, potential side effects, overdose risks, and developing dependence or addiction as required by Michigan law.
- Emphasize not using opioids concomitantly with alcohol or other sedative medications (e.g., benzodiazepines).
- Educate patient on tapering of opioids as dental/oral pain resolves.
- Refer to Michigan-Open.org for additional patient resources.
- Refer and provide resources for patients who have or are suspected to have a substance use disorder.