

Perinatal Hope Program – Team Members

Medical Director - Dr. Mark Caine

Program Director – Deb McDonald

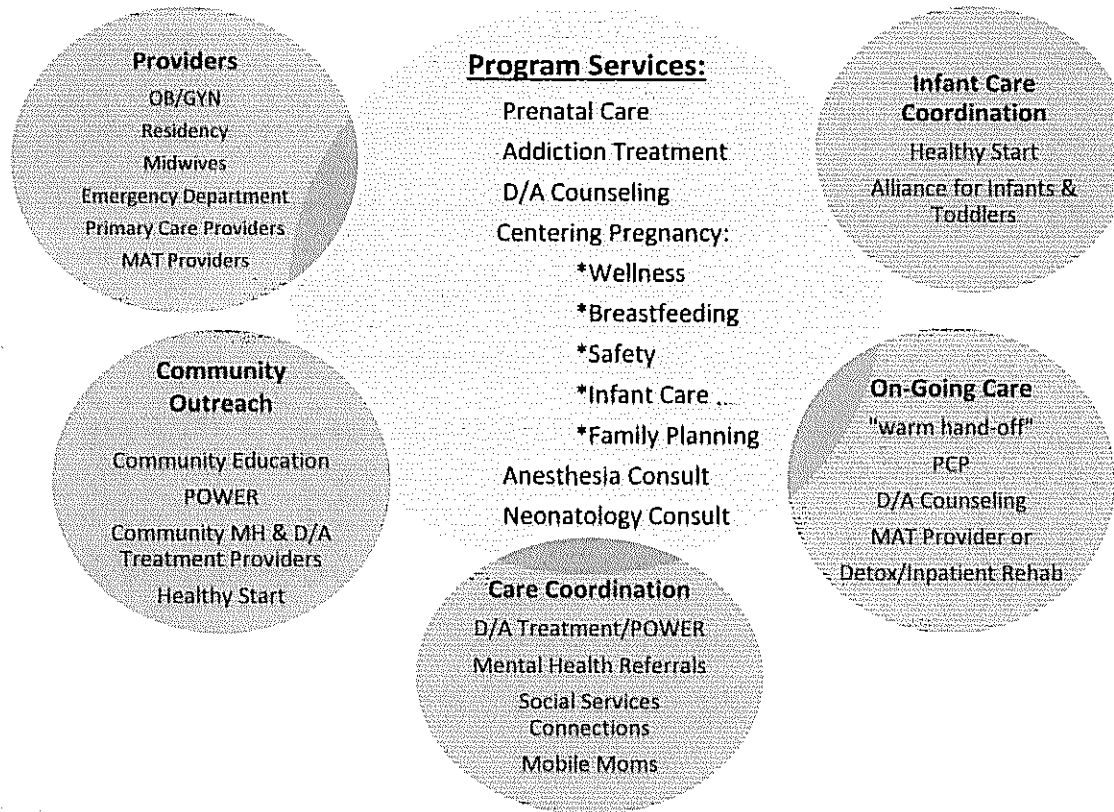
- **“Traveling Team”**
 - **Program Coordinator and SW, Krista Flaherty**
 - **CRNP, Katrina Siders**
 - **POWER, D&A therapist**
- **Providers at each site for obstetrical care and MAT**
 - **Obstetricians, Midwife, Family Medicine**
- **Office support staff (registration, rooming patient, etc.)**

Some Alarming Statistics

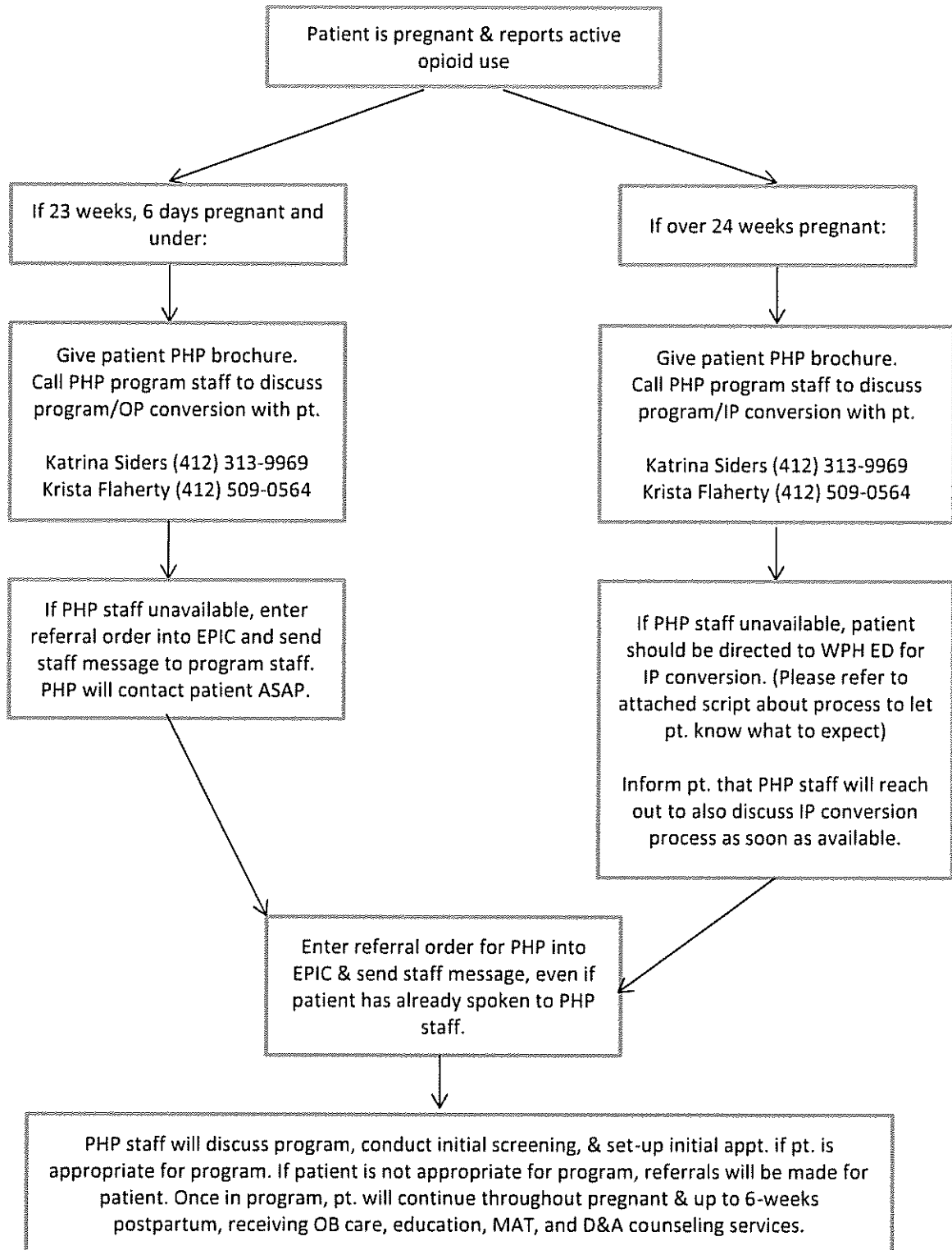
- In 2017, approximately 19.7 million people aged 12 and older had a substance use disorder
 - 2.1 million had an opioid use disorder
- It is estimated that by 2020, mental health and substance use disorders will surpass all physical diseases as a major cause of disability worldwide.
- Drug overdoses are the #1 cause of accidental death in the United States. Opioids make up 75% of these.
 - There were 613 overdose deaths in Allegheny County in 2016.
 - 31% of those were females
 - The majority fell within the 24-34 year old range

Perinatal Hope Program

A care-coordinated continuum of services to provide better outcomes for moms and babies.



Perinatal Hope Program Referral Process – Active Opioid Use

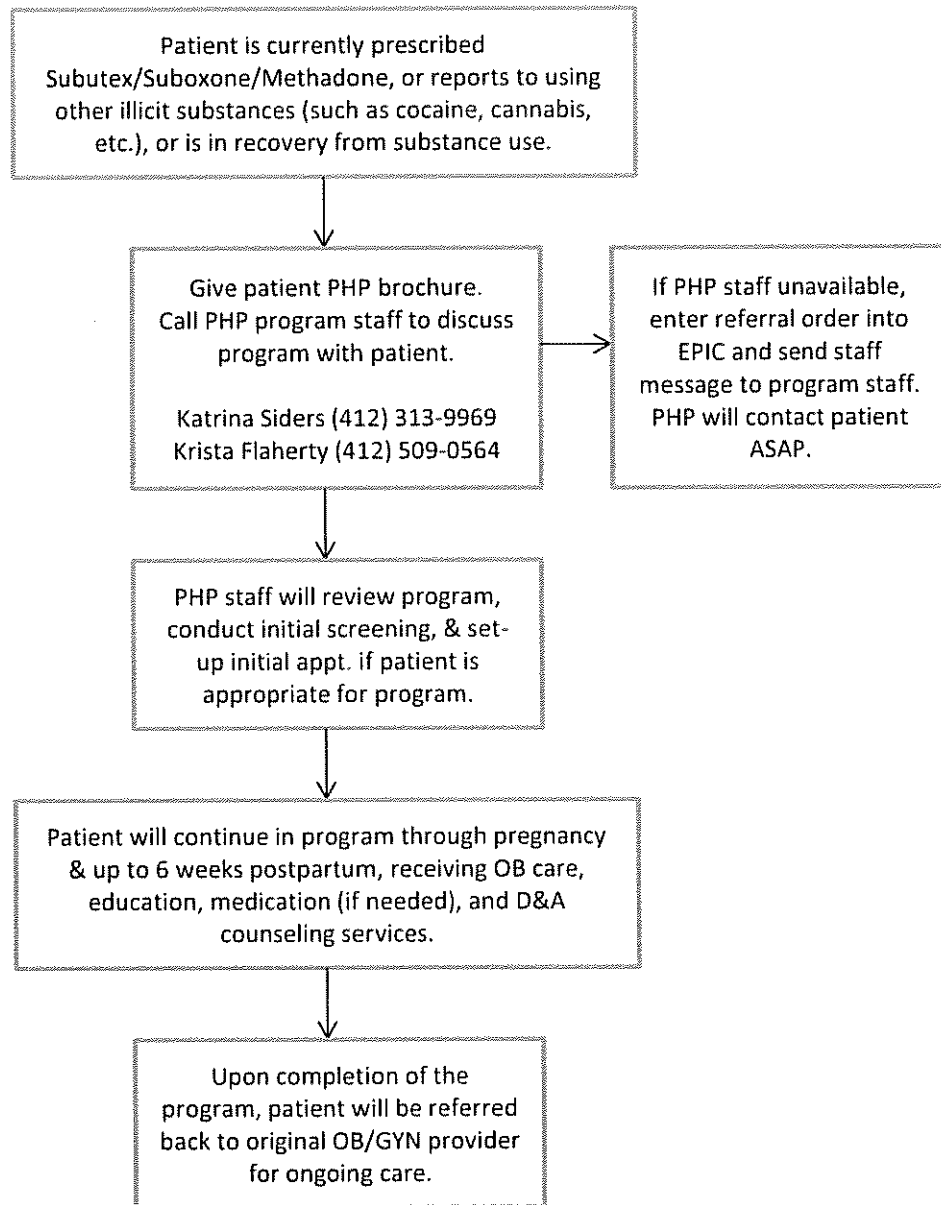


Perinatal Hope Program: (412) 578-5575

Katrina Siders, CRNP: cell – (412) 313-9969 / office – (412) 578-1418 / katrina.siders@ahn.org

Krista Flaherty- Program Coordinator-Office: (412) 315-3318// Cell (412) 509-0564 // Email: Krista.flaherty@ahn.org

Perinatal Hope Program Referral Process (No Conversion Needed)



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Perinatal Hope Program – Additional Info:

Through our comprehensive, all-inclusive program, patients are able to receive multiple services at the same time during their scheduled visit.

These services include:

- Prenatal care
- Education using CenteringPregnancy
- Medication-assisted treatment (Subutex), as needed
- On-site D&A counseling through POWER
- Care coordination/case management services
- Referrals for social services
- Transportation assistance through Traveler's Aid/Mobile Moms

***Note:** Patients typically do need to transfer their OB care to the program's provider. The only exception to this would be if the patient's current OB provider is located at the same site as the PHP program site. If that is the case, we would ask that OB provider to see the patient on the same day that the PHP is scheduled, to maintain the all-inclusive nature of the program. If patient does transfer care, we do refer the patient back to her original provider for ongoing care beyond the postpartum period, as our program concludes at 6-weeks postpartum.

IP Conversion Info for Patient:

These are only done at WPH at this time. Patient should present to the ED at WPH.

Once presented to the ED, they should inform them that they are there for conversion to Subutex. Someone from the OB team will assess patient, and patient will be admitted to one of the upstairs OB units while the conversion is completed over the course of a couple of days. These typically 2-3 take, depending on how long it takes to stabilize the dosage needed. Please let patient know that they will not sit in the ER long before they are admitted to one of the OB floors.

PHP staff will attempt to reach patient to review the process with them as well before they present. Once admitted to the unit, the PHP staff will meet with the patient on the floor to review the program with them in-depth and to initiate enrollment in the program.

How to enter referral order for Perinatal Hope Program in EPIC:

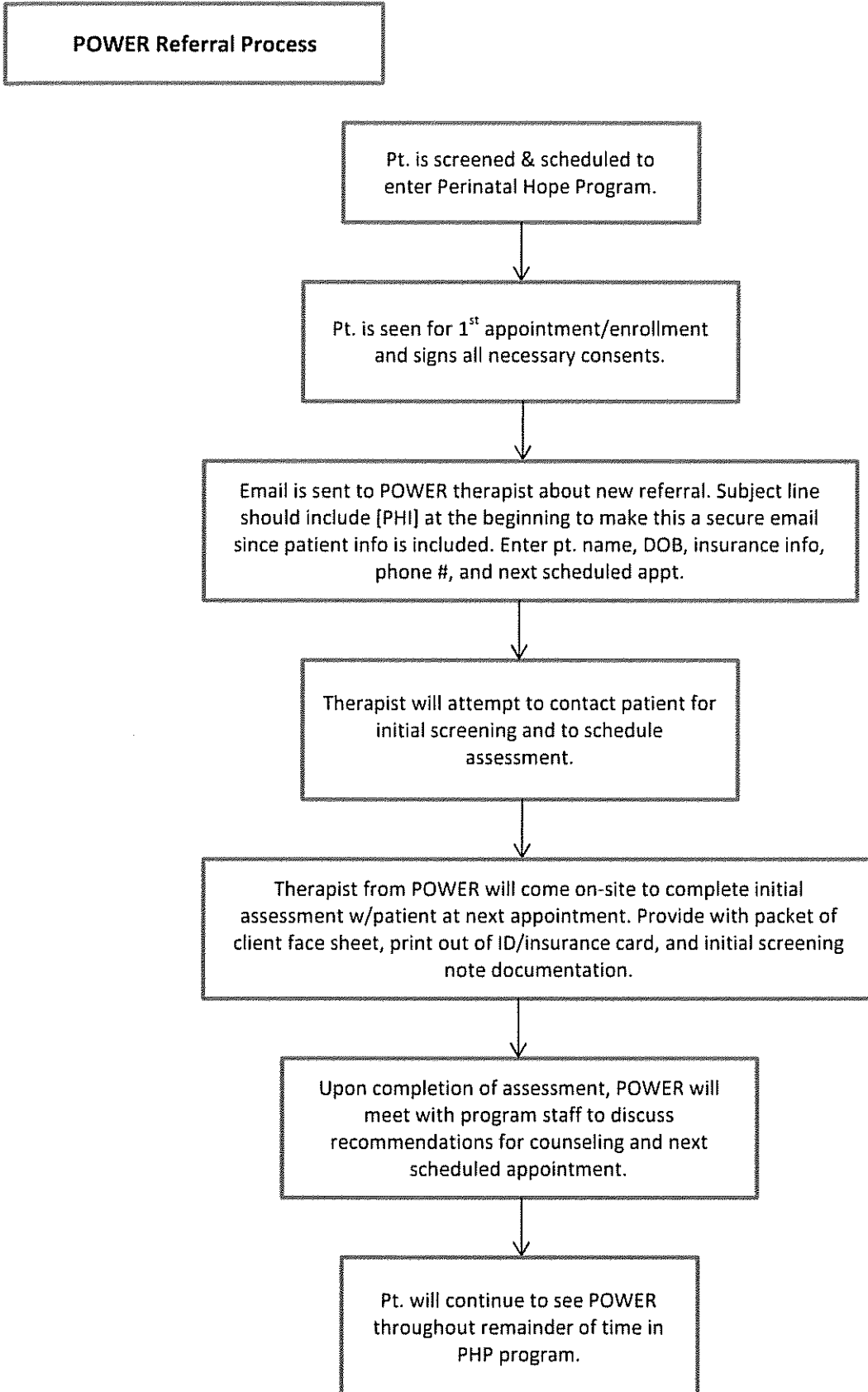
- Search under Medications & Orders for "Referral to Perinatal Hope Program."
- Select correct referral and click Accept.
- Complete required fields:
 - Provider: Mark Caine
 - Order Status: Future
 - Expected Date: Today
- Click Accept.

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Allegheny Health Network Perinatal Hope Program (PHP)



Allegheny Health Network Perinatal Hope Program

Protocol Buprenorphine Outpatient Inductions

Day 1

(under 24 weeks pregnant/short-acting opioids)

Pt. advised not to use for 12-24 hours prior to scheduled induction & should arrive in mild-moderate withdrawal.

Withdrawal symptoms assessed using COWS score.
(Withdrawal symptoms = COWS score \geq 10)

Per physician orders, administer 4mg under supervision. Observe 1-2 hours.

If COWS goes up, precipitated w/d may have occurred. Talk with patient to identify cause and manage by either continuing induction with additional doses of medication until w/d subsides, up to the target dose, or treat withdrawal symptomatically.

Repeat COWS scoring. If withdrawal persists, administer another dose per orders, usually 4mg. Observe 1-2 hours.

Repeat COWS scoring.
Still experiencing withdrawal?

NO

Day 1 dose established

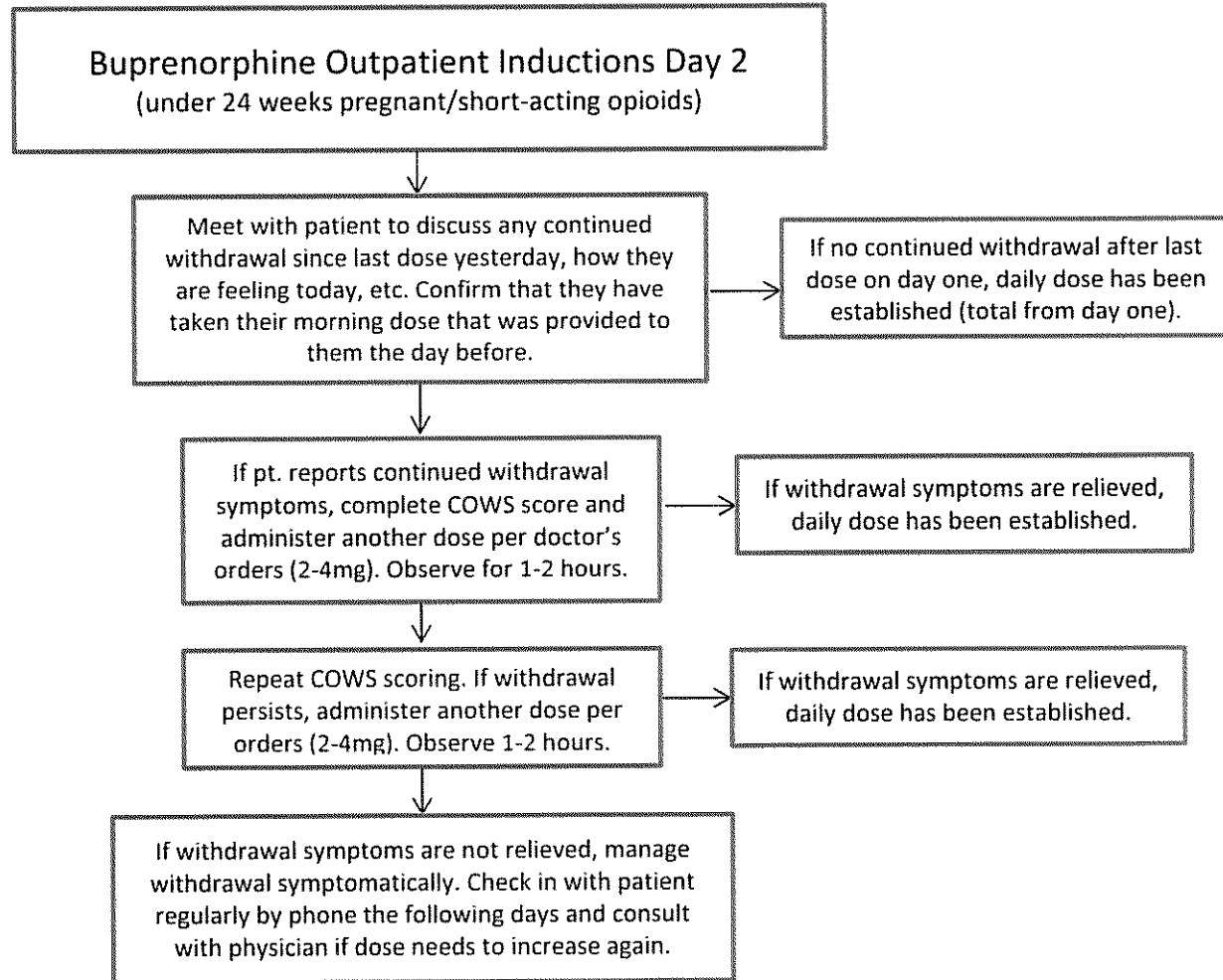
YES

Repeat COWS scoring. If withdrawal persists, administer another dose per orders (2-4mg). Observe 1-2 hours.

Continue until COWS \leq 5-7
(depending on symptoms), or total of 16mg has been given.

Manage any additional withdrawal symptomatically. Provide patient with total day-1 dose to take next morning. Schedule a time for pt. to return to office the following

Allegheny Health Network Perinatal Hope Program



We are here to help!

Please contact us with any questions or comments that you may have?

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