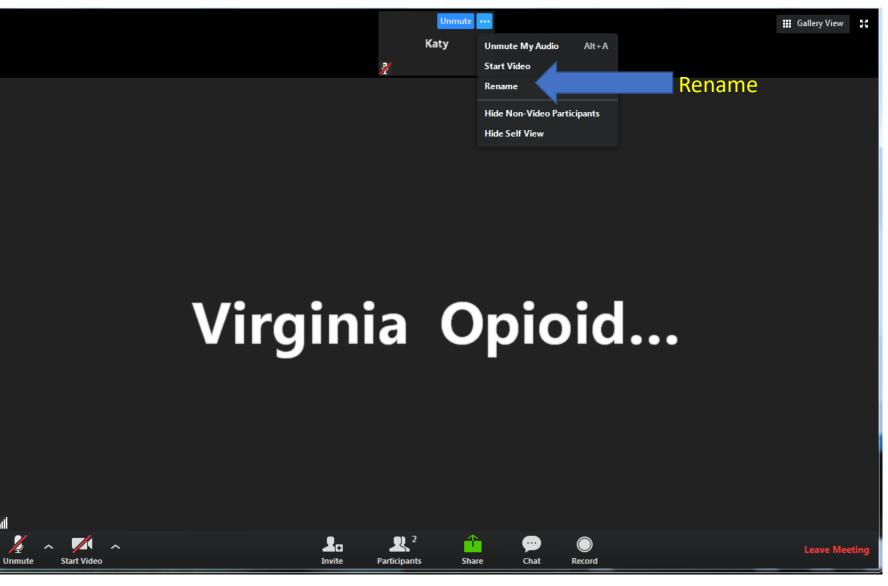


# Virginia Opioid Addiction ECHO\* Clinic March 12, 2021

\*ECHO: Extension of Community Healthcare Outcomes



## **Helpful Reminders**

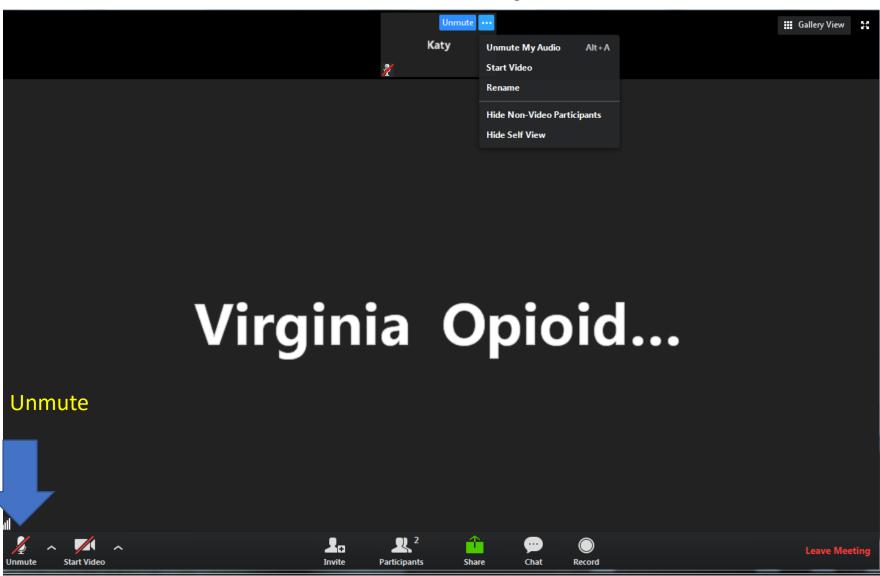




 Rename your Zoom screen, with your name and organization



## **Helpful Reminders**

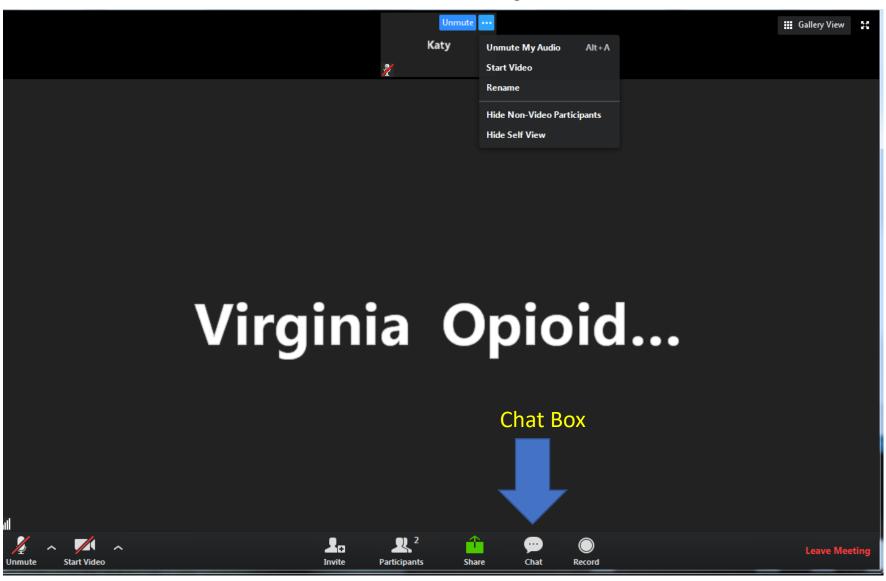




- You are all on mute please unmute to talk
- If joining by telephone audio only, \*6 to mute and unmute



## **Helpful Reminders**





- Please type your full name and organization into the chat box
- Use the chat function to speak with IT or ask questions



### **VCU Opioid Addiction ECHO Clinics**











- Bi-Weekly 1.5 hour tele-ECHO Clinics
- Every tele-ECHO clinic includes a 30 minute didactic presentation followed by case discussions
- Didactic presentations are developed and delivered by inter-professional experts
- Website Link: <u>www.vcuhealth.org/echo</u>



#### **Hub and Participant Introductions**



VCU Team				
Clinical Director	Gerard Moeller, MD			
Administrative Medical Director ECHO Hub	Vimal Mishra, MD, MMCi			
Clinical Experts  Panel Discussion	Lori Keyser-Marcus, PhD Courtney Holmes, PhD Albert Arias, MD Megan Lemay, MD Salim Zulfiqar, MD Thomas Bannard Omri Morisson			
Program Manager	Raymond Barnes Erin Trinh  Bhakti Dave, MPH			
Practice Administrator	David Collins, MHA			
IT Support	Vladimir Lavrentyev, MBA			

- Name
- Organization

Reminder: Mute and Unmute screen to talk

\*6 for phone audio

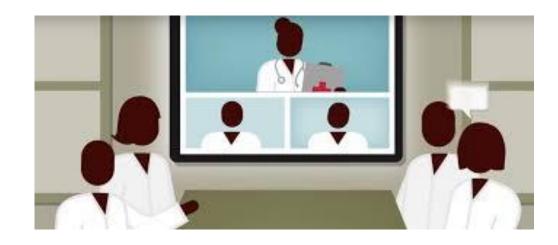
Use chat function for Introduction



#### What to Expect



- I. Panel Discussion
- II. Case presentations
  - I. Case 1
    - I. Case summary
    - II. Clarifying questions
    - III. Recommendations
  - II. Case 2
    - I. Case summary
    - II. Clarifying questions
    - III. Recommendations
- III. Closing and questions



Lets get started!
Didactic Presentation







## Disclosures

Thomas Bannard, Erin Trinh, Omri Morrison, and Ryamond Barnes have no financial conflicts of interest to disclose.

There is no commercial or in-kind support for this activity.





## Questions?









- 12:35-12:55 [20 min]
  - 5 min: Presentation
  - 2 min: Clarifying questions- Spokes
  - 2 min: Clarifying questions Hub
  - 2 min: Recommendations Spokes
  - 2 min: Recommendations Hub
  - 5 min: Summary Hub

Reminder: Mute and Unmute to talk

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Use chat function for questions



#### **Main Question**



You transitioned a patient to PO naltrexone because of adverse effect of IM naltrexone then you learned that pt wasn't using PO naltrexone, should you transition pt back to IM naltrexone?

#### **Demographic Information**

35 yo AA male patient who showed up to the clinic without prior arrangements or schedule. He handed over a letter from the court stating that he is obligated to initiate treatment at the clinic. Pt completed high school. Currently unemployed because of recent incarceration.

#### **Background Information**

Claims prior diagnosis of MDD and PTSD. Complains of low mood, poor appetite, and frequent nightmares. Unable to provide prior records but prescription history from the pharmacy confirms sertraline 50 mg and quetiapine 25 mg in the past. Pt claims that he was receiving these medications while he was incarcerated.

History of opioid and cocaine use but denies use in the jail and denies use since release from the incarceration because he is currently under probation.



#### **Previous Interventions**

Agreed to resume sertraline and quetiapine. Discussed about SUB tx options and pt agrees with IM naltrexone. On initial visit pt started with PO naltrexone then transitioned over to IM naltrexone on the follow up. Pt continued with IM naltrexone for 4 months. UDS negative on all substances every visit. Pt asks for a letter on every visit to give to his probation officer.

Pt refused to rotate the injection site because of previous GSW. Only right gluteal used for 4 IM naltrexone injection while monitoring his response. IM naltrexone manufacturer advised against using other muscles. Pt complained of low appetite and low libido due to IM naltrexone

After 4th injection pt complained of mild edema and discomfort around injection site. Agreed to transition out to PO naltrexone. Pt continued on PO naltrexone for another 2 months. UDS remain negative for all substances. Pt disappeared after total of 6 months of treatment

#### Plans for Future Treatment/ Patient's Goal

2 months after last follow up pt called stating that he needs a letter stating that he is in treatment and are on naltrexone for substance use to present to the court. Called pharmacy to confirm his last naltrexone and learned that pt never picked up PO naltrexone and 2 unused prescriptions were still on file at the pharmacy.

Provided a letter confirming that pt received 4 months' worth of IM naltrexone but last 2 months of treatment are questionable and he is no longer engaged with the clinic.

After the court date pt called requesting to return to the clinic but refusing to be on IM naltrexone again.

#### **Main Question**

You transitioned a patient to PO naltrexone because of adverse effect of IM naltrexone then you learned that pt wasn't using PO naltrexone, should you transition pt back to IM naltrexone?







- Case studies
  - Submit: <u>www.vcuhealth.org/echo</u>
  - Receive feedback from participants and content experts
  - Earn \$100 for presenting



### Thank You

The success of our telehealth program depends on our participants and those who submit case studies to be discussed during clinics. We recognize the following providers for their contributions:

- · Ademola Adetunji, NP from Fairfax County CSB
- . Michael Bohan, MD from Meridian Psychotherapy
- . Diane Boyer, DNP from Region Ten CSB
- · Melissa Bradner, MD from VCU Health
- · Kayla Brandt, B.S. from Crossroads Community Service Board
- . Susan Cecere, LPN from Hampton Newport News
- . Michael Fox, DO from VCU Health
- . Shannon Garrett, FNP from West Grace Health Center
- . Sharon Hardy, BSW, CSAC from Hampton-Newport News CSB
- . Sunny Kim, NP from VCU Health
- · Thokozeni Lipato, MD from VCU Health
- · Caitlin Martin, MD from VCU Health
- · Maureen Murphy-Ryan, MD from AppleGate Recovery
- . Faisal Mohsin, MD from Hampton-Newport News CSB
- Stephanie Osler, LCSW from Children's Hospital of the King's Daughters
- · Jennifer Phelps, BS, LPN from Horizons Behavioral Health
- · Crystal Phillips, PharmD from Appalachian College of Pharmacy
- Tierra Ruffin, LPC from Hampton-Newport News CSB
- Manhal Saleeby, MD from VCU Health Community Memorial Hospital
- Jenny Sear-Cockram, NP from Chesterfield County Mental Health Support Services
- Daniel Spencer, MD from Children's Hospital of the King's Daughters
- · Cynthia Straub, FNP-C, ACHPN from Memorial Regional Medical Center
- · Saba Suhail, MD from Ballad Health
- Barbara Trandel, MD from Colonial Behavioral Health
- Bill Trost, MD from Danville-Pittsylvania Community Service
- . Art Van Zee, MD from Stone Mountain Health Services
- · Ashley Wilson, MD from VCU Health
- · Sarah Woodhouse, MD from Chesterfield Mental Health



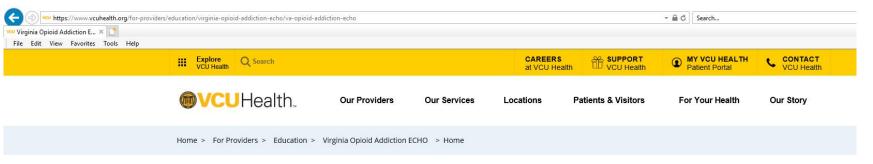


#### Claim Your CME and Provide Feedback



- www.vcuhealth.org/echo
- To claim CME credit for today's session
- Feedback
  - Overall feedback related to session content and flow?
  - Ideas for guest speakers?







#### **Virginia Opioid Addiction ECHO**



Welcome to the Virginia Opioid Addiction Extension for Community Health Outcomes or ECHO, a virtual network of health care experts and providers tackling the opioid crisis across Virginia. Register now for a



#### **Network, Participate and Present**

- · Engage in a collaborative community with your peers.
- · Listen, learn, and discuss didactic and case presentations in real-time.
- Take the opportunity to <u>submit your de-identified study</u> for feedback from a team of addiction specialists. We appreciate <u>those who have already provided case studies</u> for our clinics.
- · Provide valuable feedback & claim CME credit if you participate in live clinic sessions.

#### **Benefits**

TeleECHO Clinic!

- · Improved patient outcomes.
- Continuing Medical Education Credits: This activity has been approved for AMA PRA

  Category 1 Credit™.



Virginia Commonwealth
University





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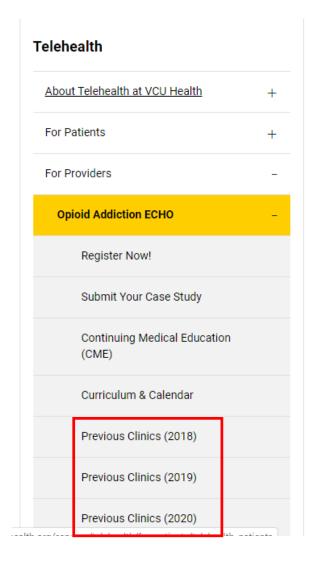




www.vcuhealth.org/echo

To view previously recorded clinics and claim credit





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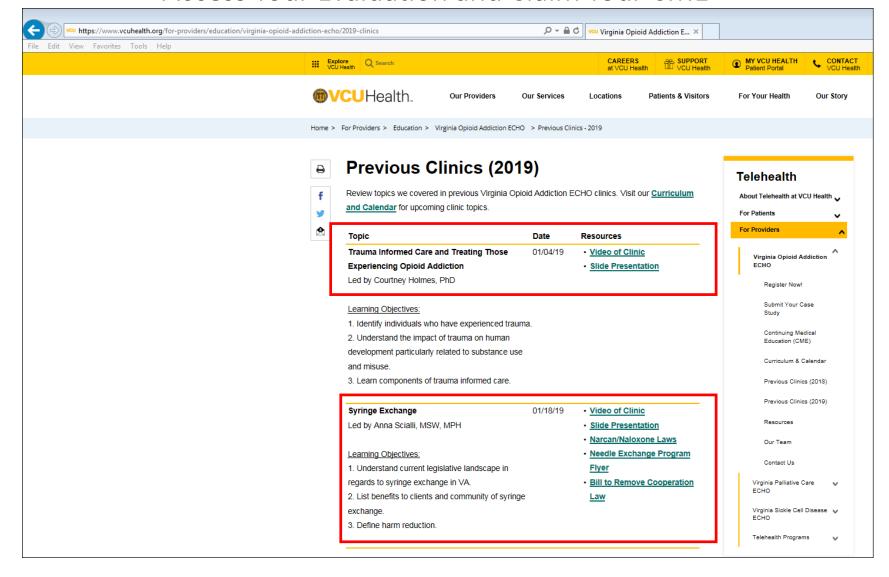
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- · Improved patient outcomes.
- . Continuing Medical Education Credits: This activity has been approved for AMA PRA Category 1















#### VCU Virginia Opioid Addiction TeleECHO Clinics

Bi-Weekly Fridays - 12-1:30 pm

#### **Mark Your Calendar --- Upcoming Sessions**

March 26: Effects of Pharmacotherapy on Cognitive Function

Gerry Moeller, MD

Please refer and register at vcuhealth.org/echo





#### **THANK YOU!**

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