A Guide to Help Utah Pharmacists Talk to Customers About Prescription Opioids
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Partners
The following agencies have partnered to implement this campaign:
- Salt Lake Metro Narcotics Task Force
- Stop the Opioid Crisis
- 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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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.
• 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%).
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)
Brochures are available in various sizes. PDF versions of each brochure can be downloaded by clicking on the title or image below.

**Stop the Opidemic**

The *Stop the Opidemic* 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.
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.

Utah Naloxone Laws

- Individuals can report 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)

Useful Websites

- naloxone.utah.gov
- opioid.org
- useonlyasdirected.org
- utahnaloxone.org

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

YOU CAN PREVENT DEATH FROM AN OPIOID OVERDOSE

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

- 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 (Klonopin, Valium, Xanax)
- Are unfamiliar with the strength and dosage of prescription opioids and the purity of street drugs 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

YOU ARE AT HIGH RISK FOR AN OPIOID OVERDOSE IF YOU:
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:
  o have previously overdosed;
  o have had a period of abstinence from taking opioids, such as recently being released from jail/prison or detox programs;
  o are taking high doses of opioids;
  o are taking other substances with opioids, such as anti-anxiety medications, sleep aids, or alcohol;
  o are opioids for a long period of time; or
  o 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:
  o very limp body and very pale face;
  o blue lips or blue fingertips;
  o no response when you yell his/her name or rub hard in the middle of the person’s chest;
  o slowed breathing (fewer than one breath every five seconds) or no breathing at all; or
  o 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.
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 Opidemic 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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