

Opioid safety

Prescription opioids

Prescription opioids (also called narcotics) carry serious risks of addiction and overdose, especially when you take them for a long time.

It is important that you:

- Always supervise children and teenagers when they are around medicines.
- Do not allow children and teens to give themselves opioid medicines.

Why your doctor prescribed an opioid

Opioids are powerful pain relievers. They treat newly diagnosed moderate, acute, or severe pain for a limited amount of time.

How to give the opioid

- Give the opioid exactly as ordered.
- Talk to your doctor before making any changes in the dose or time.
- When using patches, always remove the old pain patch before putting on a new one.
- Use an accurate medicine measuring spoon or medicine cup.
- Never cut, chew, crush, or dissolve long acting opioid tablets, capsules, or patches.

Safety when taking opioids

- Do not share opioid medicines.
- Do not drink alcohol while taking opioids.
- Do not use street drugs.
- Check with your doctor before taking other pain medicines.
- Keep opioids in the original box or bottle.
- Do not drive or use heavy machinery until your doctor tells you it is OK.

Storage of opioids

- Parents and caregivers: It is your responsibility to store all medicines in a secure location.
- Store opioids in a dry and cool place.
- Store in a place that is out-of-reach and sight of children and pets.
- To protect your children, the safest way to store opioids is in a locked box.

Possible serious side effects of opioids

Call your doctor if your child:

- Has slurred speech.
- Stumbles when walking.
- Feels dizzy.
- Seems confused.
- Is very sleep and is hard to arouse.

Call 911 if your child



- Has trouble breathing.
- Cannot stay awake and is in a deep sleep.
- Cannot talk or walk normally.

Other side effects of opioids

- Nausea and vomiting
- Constipation
- Depression
- Itching
- Dry mouth
- Increased sensitivity to pain
- Sleepiness

3 very important risks to remember when taking opioids

Tolerance

This means you need to take more of the pain medicine for the same pain relief.

Physical dependence

This is when you feel symptoms of withdrawal when a pain medicine is stopped.

Addiction

This happens when you need, and even crave the pain medicine just to feel good.

Getting rid of opioids

Also called disposing of medicines.

Opioids can be very dangerous if children or pets eat them. They also make tempting targets for theft.

Cook Children's Pharmacy

You can bring unused medicine, both liquids and tablets, back to the Cook Children's Pharmacy.

Community medicine take-back programs

- Ask your doctor or pharmacist for more information.
- Visit: https://www.dea.gov/operational-division/diversion to learn more.
- Call your local waste management company to ask if there is a take-back program in your community.

Flushing unused medicine

Opioids often come with instructions for flushing unused medicine. Check with your pharmacist about how to throw out unused medicines.

Even used patches still have enough medicine in them to be dangerous or deadly to pets,

children, and others with a low tolerance for opioids.

- FDA recommends always flushing used and leftover pain patches down the toilet.
- To dispose of a pain patch, fold it in half so the sticky sides stick together, then flush it immediately and wash your hands.



DO NOT throw patches into a trash

Google search

Search for "medicine disposal near me". This provides a list of pharmacies with medicine drop boxes for disposal.

Poison Prevention

For questions about potential poisons or medicine doses visit:

<u>cookchildrenscommunity.org/injury-</u> <u>prevention/poison</u> **or**



Retail Pharmacy

For contacts or locations to talk to a pharmacist visit:

<u>cookchildrens.org/services/pharmacy/contact-us/</u> or



Pain Management

For contacts and locations visit:

cookchildrens.org/services/pain-management/

or



These instructions are only general guidelines. Your healthcare provider may give you special instructions. If you have questions or concerns, please call your healthcare provider.

The healthcare provider talked to me about the information in this handout. **Patient Name** I know what I need to do. I know why doing this is important. • All my questions have been answered. Patient, Parent, or Legally Authorized • I have a copy of this handout. Representative **Printed Name** Signed Name Your Relationship to the Patient a.m. / p.m. Time Date For staff use only_____ **Opioid-Safety Healthcare Provider** MRN (Medical Record Number) Printed Name Signed Name <u>a.m. / p.m.</u> Date Time Interpreter Signed Name **Printed Name** Interpreter Number _a.m. / p.m. Time Date Print or imprint Patient Information



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