

HEALTHWEST

Practice Guideline

No. 12-001

Prepared By:

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Subject: Antabuse/Campral/Naltrexone  
Administration Protocol

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I. PRACTICE GUIDELINE

Antabuse (Disulfiram), Acamprosate (Campral), Naltrexone (Revia) protocol.

II. PURPOSE

It is the commitment of HealthWest to provide quality health care that includes addiction treatment for alcohol use, with patient safety as a priority.

III: APPLICATION

All HealthWest employees, volunteers, student interns, interpreters, affiliated providers, and persons under contract with HealthWest.

IV: PROTOCOL

A. Assessment

1. The objectives of the patient assessment are to determine a given patient's eligibility for treatment, to provide the basis for a treatment plan, and to establish a baseline measure for use in evaluating a patient's response to treatment.
2. The client shall undergo the following screenings and lab work prior to starting treatment:
  - a. The screening can be done by any appropriately credentialed staff member. They shall evaluate the client's alcohol problem based on a clinical assessment.

- b. A HealthWest psychiatrist, physician assistant (PA), or a nurse practitioner (NP) shall evaluate for psychiatric appropriateness and capacity to use medicated assisted treatment.
- c. Releases of Information shall be obtained.
- d. Registered Nurse will collect a health history via documentation in order to collaborate care.
- e. Tests shall include the following (refer to Appendix G):
  - i. Pregnancy test, if the client is capable of getting pregnant, will be administered at baseline and at provider discretion.
  - ii. Lab work shall include a Comprehensive panel, liver function tests, Acute Hepatitis Panel and HIV screens as well as an electrolyte baseline.
  - iii. An ECG shall be obtained at baseline at prescriber's discretion.
- f. Once the assessments and labs are complete, the psychiatrist shall decide if Disulfiram, Naltrexone, or Antabuse is appropriate.

#### B. Treatment and Monitoring

1. The Cravings Assessment (Form C377) will be completed and reviewed with the prescriber at each contact.
2. The HealthWest psychiatrist, PA/NP or nurse shall provide complete information (orally and in writing) about the medication and its effects and side effects, and the client shall give informed consent (C363) to take one of the above medications.
3. The client shall be seen at least monthly for the first 90 days by a HealthWest nurse, physician, PA or NP for routine monitoring, including blood pressure monitoring.
4. The client shall be seen at least quarterly by the prescribing psychiatrist, PA, or NP.
5. Liver function tests (LFTs: AST, GGT, alkaline phosphatase), cholesterol, and triglycerides, and other studies as indicated medically, shall be obtained by HealthWest staff every three months after treatment is indicated.
6. A comprehensive panel shall be run at baseline and every 6 months following treatment.
7. Disulfiram, Acamprosate, and Naltrexone use shall preferably be conducted in parallel with other ongoing substance abuse (dual diagnosis) treatment by HealthWest and/or other agencies.

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- a. An individual session with their treatment team, as well as weekly group therapy is required.
- b. Participation in a peer led support group is strongly recommended.

V: REFERENCES

MDCH Medication Assisted Treatment Guidelines for Opioid Use Disorders, Corey Waller MD, MS

BD/hb