

**John Cobb, MD**  
Board Certified in Psychiatry  
Board Certified in Addiction Medicine

6837 82<sup>nd</sup> Suite 102  
Lubbock, Texas 79424

Voice (806) 791-5100  
Fax: (866) 560-8557

**FREQUENTLY ASKED QUESTIONS—PATIENTS**

**SUBOXONE®**

(buprenorphine HCl/naloxone HCl dihydrate) sublingual tablet

1. How much does the treatment with Suboxone cost?

**The initial evaluation cost is \$500 and follow up visits are \$80.** Insurance is not accepted since the treatment for Suboxone is more involved than normal psychiatric treatment and requires specialized training, the cost of which is not covered by insurance plans. Patients should expect to spend 4-5 hours during the initial evaluation and induction.

It is important to arrive at the visit CLEAN AND SOBER OR WITHDRAWING from opiates. If this does not happen, immediate withdrawal from opiates may take place when the first dose of Suboxone is given and this is very unpleasant. Arriving clean and sober or in withdrawal also allows treatment to begin on the day of the evaluation.

**Follow up visits take about 10-15 minutes and cost \$80.**

Patients are expected to participate in other forms of treatment such as attending 12-step meetings and going to substance abuse counselors. These activities serve to develop different coping mechanisms so that one-day dependence on Suboxone or other opiates will not be needed. Patients also will undergo routine urine drug screens.

2. Why do I have to feel sick to start the medication for it to work best?

When you take your first dose of SUBOXONE, if you already have high levels of another opioid in your system, the SUBOXONE will compete with those opioid molecules and replace them at the receptor sites. Because SUBOXONE has milder opioid effects than full agonist opioids, you may go into a rapid opioid withdrawal and feel sick, a condition that is called “precipitated withdrawal.”

By already being in mild to moderate withdrawal when you take your first dose of SUBOXONE, the medication will make you feel noticeably better, not worse.

3. How does SUBOXONE work? SUBOXONE binds to the same receptors as other opioid drugs. It mimics the effects of other opioids by alleviating cravings and withdrawal symptoms. This allows you to address the psychosocial reasons behind your opioid use.

4. When will I start to feel better? Most patients feel a measurable improvement by 30 minutes, with the full effects clearly noticeable after about 1 hour.

5. How long will SUBOXONE last? After the first hour, many people say they feel good for most of the day.

Responses to SUBOXONE

will vary based on factors such as tolerance and metabolism, so each patient’s dosing is individualized. Your doctor may increase your dose of SUBOXONE during the first week to help keep you from feeling sick.

6. Should an acquaintance come with me to the first appointment? SUBOXONE can cause drowsiness and slow reaction times. These responses are more likely over the first few weeks of treatment, when your dose is being adjusted. **PATIENTS SHOULD HAVE A FAMILY MEMBER OR FRIEND COME TO THE INITIAL EVALUATION IN CASE MEDICATIONS MAKE THEM TOO DROWSY TO DRIVE.**

7. Is it important to take my medication at the same time each day? In order to make sure that you do not get sick, it is important to take your medication at the same time every day.

8. If I have more than one tablet, do I need to take them together at the same time? Yes and no—you do need to take your dose at one “sitting,” but you do not necessarily need to fit all the tablets under your tongue simultaneously. Some people prefer to take their tablets this way because it is faster, but this may not be what works best for you. The most important thing is to be sure to take the full daily dose you were prescribed, so that your body maintains constant levels of SUBOXONE.

9. Why does SUBOXONE need to be placed under the tongue? There are two large veins under your tongue (you can see them with a mirror). Placing the medication under your tongue allows SUBOXONE to be absorbed quickly and safely through these veins as the tablet dissolves. If you chew or swallow your medication, it will not be correctly absorbed as the liver extensively metabolizes it. Similarly, if the medication is not allowed to dissolve completely, you will not receive the full effect.

10. Why can't I talk while the medication is dissolving under my tongue? When you talk, you move your tongue, which lets the undissolved SUBOXONE “leak” out from underneath, thereby preventing it from being absorbed by the two veins. Entertaining yourself by reading or watching television while your medication dissolves can help the time to pass more quickly.

11. Why does it sometimes only take 5 minutes for SUBOXONE to dissolve and other times it takes much longer? Generally, it takes about 5-10 minutes for a tablet to dissolve. However, other factors (e.g., the moisture of your mouth) can effect that time. Drinking something before taking your medication is a good way to help the tablet dissolve more quickly.

12. If I forget to take my SUBOXONE for a day, will I feel sick? SUBOXONE works best when taken every 24 hours; however, it may last longer than 24 hours, so you may not get sick. If you miss your dose, try to take it as soon as possible, unless it is almost time for your next dose. If it is almost time for your next dose, just skip the dose you forgot, and take next dose as prescribed. Do not take two doses at once unless directed to do so by your physician.

In the future, the best way to help yourself remember to take your medication is to start taking it at the same time that you perform a routine, daily activity, such as when you get dressed in the morning. This way, the daily activity will start to serve as a reminder to take your SUBOXONE.

13. What happens if I still feel sick after taking SUBOXONE for a while? There are some reasons why you may still feel sick. You may not be taking the medication correctly or the dose may not be right for you. It is important to tell your doctor or nurse if you still feel sick.

14. What happens if I take drugs and then take SUBOXONE? You will probably feel very sick and experience what is called a “precipitated withdrawal.” SUBOXONE competes with other opioids and will displace those opioid molecules from the receptors.

Because SUBOXONE has less opioid effects than full agonist opioids, you will go into withdrawal and feel sick.

15. What happens if I take SUBOXONE and then take drugs? As long as SUBOXONE is in your body, it will significantly reduce the effects of any other opioids used, because SUBOXONE will dominate the receptor sites and

block other opioids from producing any effect.

16. What are the side effects of this medication? Some of the most common side effects that patients experience are nausea, headache, constipation, and body aches and pains. However, most side effects seen with SUBOXONE appear during the first week or two of treatment, and then generally subside. If you are experiencing any side effects, be sure to talk about it with your doctor or nurse, as she/he can often treat those symptoms effectively until they abate on their own.

17. Do I need to know anything else about Suboxone before starting treatment? Yes. Patients are expected to go to the Internet site WWW.SUBOXONE.COM and become fully familiarized with the program.

PLEASE SIGN BELOW DOCUMENTING FULL UNDERSTANDING OF THE CONTENTS OF THE FREQUENTLY ASKED QUESTIONS IN THIS FORM:

Name:   X   \_\_\_\_\_ Date:   X   \_\_\_\_\_

# John Cobb, MD

Board Certified in Psychiatry  
Board Certified in Addiction Medicine

6837 82<sup>nd</sup> Suite 102  
Lubbock, Texas 79424

Voice (806) 791-5100  
Fax: (866) 560-8557

## PATIENT TREATMENT CONTRACT

Patient Name   X   Date   X  

As a participant in buprenorphine treatment for opioid misuse and dependence, I freely and voluntarily agree to accept this treatment contract as follows:

1. I agree to keep and be on time to all my scheduled appointments.
2. I agree to adhere to the payment policy outlined by this office described. The Suboxone/Subutex treatment program is a specially designed program in the treatment of opiate dependence. Accordingly, only payments accepted are cash, check, or credit card due prior to each visit. The charge for the initial evaluation is \$500 and for follow up visits is \$80.
3. I agree to conduct myself in a courteous manner in the doctor's office.
4. I agree not to sell, share, or give any of my medication to another person. I understand that such mishandling of my medication is a serious violation of this agreement and would result in my treatment being terminated without any recourse for appeal.
5. I agree not to deal, steal, or conduct any illegal or disruptive activities in the doctor's office.
6. I understand that if dealing or stealing or if any illegal or disruptive activities are observed or suspected by employees of the pharmacy where my buprenorphine is filled, that the behavior will be reported to my doctor's office and could result in my treatment being terminated without any recourse for appeal.
7. I agree that my medication/prescription can only be given to me at my regular office visits. A missed visit may result in my not being able to get my medication/prescription until the next scheduled visit.
8. I agree that the medication I receive is my responsibility and I agree to keep it in a safe, secure place. I agree that lost medication will not be replaced regardless of why it was lost.
9. I agree not to obtain medications from any doctors, pharmacies, or other sources without telling my treating physician.
10. I understand that mixing buprenorphine with other medications, especially benzodiazepines (for example, Valium®\*, Klonopin®†, or Xanax®‡), can be dangerous. I also recognize that several deaths have

occurred among persons mixing buprenorphine and benzodiazepines (especially if taken outside the care of a physician, using routes of administration other than sublingual or in higher than recommended therapeutic doses).

11. I agree to take my medication as my doctor has instructed and not to alter the way I take my medication without first consulting my doctor.

12. I understand that medication alone is not sufficient treatment for my condition, and I agree to participate in counseling as discussed and agreed upon with my doctor and specified in my treatment plan.

13. I agree to abstain from alcohol, opioids, marijuana, cocaine, and other addictive substances (excepting nicotine).

14. I agree to provide random urine samples and have my doctor test my blood alcohol level.

15. I understand that violations of the above may be grounds for termination of treatment.

X\_\_\_\_\_ Date \_\_X\_\_\_\_\_

Patient Signature