

Clinical Testing Protocol-Comparative Case Study

CLINIC A	CLINIC B
TYPE OF PRACTICE	
Buprenorphine Treatment	Buprenorphine Treatment
TESTING PROTOCOL	
<p>Drug testing occurs infrequently and inconsistently</p> <p>Tests when “use” is suspected, or every few visits</p> <p>Patients are only seen once a month. Due to the infrequent appointment schedule, the likelihood of abuse increases as patients are aware of when their next appointment is and may adjust their use of illicit drugs around these appointments.</p>	<p>Patients tested at the time of admission to the program</p> <p>During the first couple of months, patients are tested four times a week. If they haven’t had any inconsistent reports and are following the program, they move into a less restrictive phase. Once in this phase, patients are able to “carry,” meaning that they are able to come in, get dosed for that day, and leave with a dose or two of Suboxone (Buprenorphine) for the following days.</p> <p>During this phase they are typically tested each time they are in the clinic, which would be about two to three times a week.</p> <p>The last phase of the program allows for patients to carry up to six doses, and those people are tested weekly.</p>
POINT-OF-CARE OR LAB TESTING?	
No point-of-care (onsite testing). When patients are tested, urine is collected and sent to the laboratory for comprehensive panel testing.	All patients are tested using point-of-care (onsite testing) with a 12 panel CLIA-Waived cup. All samples are sent to the lab for comprehensive panel testing.
HOW IS PROTOCOL COMMUNICATED TO PATIENTS?	
Practice has a sign on the door indicating that all addiction patients will be tested every visit. Although this is stated, very seldom are patients tested as this is not enforced throughout the practice.	Patients are informed of the strict protocol and consequences of inconsistent results prior to receiving treatment. Signed contracts for treatment in which consent is given to frequent drug testing protocol required.
CONSEQUENCES OF INCONSISTENT TEST RESULTS	
If illicit are found, a conversation is initiated with the patient. Despite this intervention, there are no severe ramifications within the program unless abuse continues over a long period of time.	If there are inconsistent reports (alcohol, other drugs/medications detected, Buprenorphine not detected), the patient is tested daily until they have a consistent report with no abnormal results. Illicit use, or any other inconsistent results oftentimes result in patients being dropped from the program.
SUMMARY OF CASE STUDY FINDINGS	
<ul style="list-style-type: none"> • 45.83% consistency found over a three-month period • 54.17% inconsistency found over a three-month period • 2x more illicit drugs detected <p>Summarized data from the Practice Overview Report supports the claim that the lack of an established protocol for drug screening, coupled with inconsistencies in testing frequency throughout the practice, equates to an increase in overall noncompliance. Due to the testing protocol not being enforced by the practice, it is very difficult to determine the magnitude of the problems. Prescribing physicians are also left to make judgment calls not based on rapid results.</p>	<ul style="list-style-type: none"> • 87.52% consistency found over a three-month period • 12.48% inconsistency found over a three-month period <p>Summarized data from the Practice Overview Report supports the claim that established drug monitoring throughout the practice, with a well-defined protocol assists in overall patient compliance. The established baseline testing, coupled with the ability to drug test patients onsite at the clinic, allows for immediate action to be taken. Patients are awarded for following guidelines, while practicing physicians have clear and defined guidelines to follow for inconsistent results.</p>

Consistent Results = Medications/metabolites are consistent with the established treatment protocol, including the presence of declared prescriptions and the absence of illicit drugs.

Inconsistent Results = Medications/metabolites are inconsistent with the established treatment protocol, including the absence of declared prescriptions and/or the presence of illicit drugs.