



HRSA Health & Recovery Services Administration

Tapering Plan for Client with Chronic, Non-Cancer Pain

Please Fax to: Narcotic Review Program (360) 725-2122

Client's Name: _____

Client ID#: _____

Short and long acting narcotics should be tapered separately; first taper the short acting agent, then taper the long acting.

Tapering short acting narcotics: As a general rule, if the % of total MED is < 10% of the initial total MED of all narcotics, taper by 10% of the initial total dose (milligrams) every 3 days. If the % of the total MED is > 10% of the initial total MED, taper by 10% of the initial total dose (milligrams) every week.

Tapering long acting narcotics: As a general rule, taper by 10% of the initial total dose (milligrams) until down to 30% of the initial total dose (milligrams). Then, taper by 10% of the remaining 30% of the initial taper (milligrams).

Go to <http://www.agencymeddirectors.wa.gov/education.asp> for information about safe prescribing of opioids.

According to the Agency Medical Directors Opioid Guidelines, symptoms of an abstinence syndrome, such as nausea, diarrhea, muscle pain and myoclonus can be managed with clonidine 0.1-0.2mg orally q6hours or Catapres-TTS 1 patch/weekly. Sleep problems can be treated with zolpidem and/or low dose tricyclic agents, such as doxepin 10-50mg qhs. **DO NOT TREAT WITHDRAWAL SYMPTOMS WITH ADDITIONAL OPIOIDS OR BENZODIAZEPINES.**

Initial Total Dose

Opioid Type	Baseline Opioid	Current mg/Day	Current MED/Day	% of Total MED
Short Acting	▼		0	
Long Acting	▼		0	
Total Morphine Equianalgesic Dose			0	

First taper Short Acting Narcotics q week if > 10% of total MED if combined with a long acting opioid.

Week	Day	Total mg/day: dosage schedule	MED of Short Acting Opioid	Week	Day	Total mg/day: dosage schedule	MED of Short Acting Opioid
1	1-7	0	0	6	36-42	0	0
2	8-14	0	0	7	43-49	0	0
3	15-21	0	0	8	50-56	0	0
4	22-28	0	0	9	57-63	0	0
5	29-35	0	0	10	64-70	0	0

Then taper long acting narcotics weekly by 10% reduction from Initial Total Dose until down to 30% of the initial dose (milligrams). Then, taper by 10% of the remaining 30% of the initial taper (milligrams).

Week	Date	Total mg/day: dosage schedule	MED of Long Acting Opioid	Week	Date	Total mg/day: dosage schedule	MED of Long Acting Opioid	Week	Date	Total mg/day: dosage schedule	MED of Long Acting Opioid
1				7				13			
2				8				14			
3				9				15			
4				10				16			
5				11				17			
6				12							

Use additional or separate sheet for client's tapering plan and attach to this form. If more than one long or short acting narcotic is in use, please complete a separate taper chart for each medication.

Prescriber Signature : _____

Date: _____