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# SCREEN FOR MENTAL ILLNESS

Don't guess, assess. Individuals with depression and anxiety are 3x more likely to abuse opioids.

- ✓ Patients with a mental health diagnosis are at a greater risk for opioid abuse.
- ✓ Tools such as a Psychological Risk Assessment can help identify these individuals.
- ✓ 65% of prescription opioid deaths include an individual with a current mental health issue.
- ✓ Mental health issues can increase pain intensity and interfere with successful rehabilitation.
- ✓ Before prescribing, always consider if non-opioid treatments or therapies are appropriate.



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# CHECK THE DATABASE

Clinicians fail to identify opioid abusers 86% of the time.

The Utah Controlled Substances Database (CSD) is a prescription monitoring program that assists prescribers and pharmacists in learning more about their patients' prescription history.

Prescription data can be used to identify potential cases of drug over-utilization, misuse, and over-prescribing of controlled substances throughout the state.

## REQUEST ACCESS

If you don't have access to the database, please fill out the request form at [dopl.utah.gov/programs/csdb](https://dopl.utah.gov/programs/csdb).



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# EXPLAIN THE RISKS

Prescription opioids are as dangerous as heroin.

- ✓ Take the time to make sure your patients understand the potential risks of opioids, even when taking as prescribed.
- ✓ Talk about the warning signs of dependency and addiction. After all, 80% of heroin users start with prescription opioids.
- ✓ Six Utahns die every week from opioid overdose. Make your patients aware of the possibility of overdose.
- ✓ Discuss non-opioid treatment methods.



# PROVIDE SAFEGUARDS

Talk to your patients about ways to mitigate the dangers of prescription opioids.

## ✓ SAFE STORAGE & DISPOSAL

Review safe storage and proper disposal methods. Give them a list of drop box locations in their area.

## ✓ EMERGENCY OVERDOSE PLAN

Review the signs and symptoms of an opioid overdose with your patient and their family/caretaker. Remind them to always call 9-1-1 in case of an overdose, even if they have naloxone.

## ✓ NALOXONE SAVES LIVES

Make sure your patient, as well as their family/caretaker, understands what naloxone is, where to get it, and how to administer it.



**“WE, AS CLINICIANS, ARE UNIQUELY POSITIONED TO TURN THE TIDE ON THE OPIOID EPIDEMIC.”**

— VIVEK H. MURTHY, M.D., M.B.A.  
FORMER U.S. SURGEON GENERAL

**FOLLOW THE UTAH CLINICAL GUIDELINES**

For more information visit  
[opidemic.org/providers](http://opidemic.org/providers).

**STOP THE OPIDEMIC**

**CLINICIAN ACTION GUIDE**

**TO COMBAT UTAH'S OPIOID EPIDEMIC**



**STOP THE OPIDEMIC**