

Introducing Care Activity: Cases

Patient 1: Sue

Sue is a 38-year-old female who is relatively new to the clinic. She has had 2 primary care visits at the clinic over the past 1.5 years. When she called the clinic for an appointment, she told the scheduler that she is experiencing depression and wants to talk with the doctor about it. She completed a PHQ-9 in the waiting room and has a score of 15.

When the PCP joins her in the room, Sue tells the provider she is depressed and that she has been using heroin for the past 8 months to help her feel normal. She heard from a friend that the clinic is offering behavioral interventions and “suboxone.” She engaged in behavioral intervention for about 3 years in her mid-twenties and found it very helpful. She wants to re-enter this kind of treatment at the clinic and start suboxone as soon as possible.

Patient 2: Dave

Dave is a 63-year-old man who has been a patient at the clinic for over 10 years. His wife of 41 years died 1 year ago from cancer. He came into the clinic today for a check-up related to Type 2 diabetes and his chronic back pain at the request of his son. He hasn't been to the clinic since his wife died. In the waiting room he completed a PHQ-9, and the NIDA-Modified ASSIST (NMA).

PHQ9: 14 – no suicidality

NIDA-Modified Assist for CHAMP (NMA): 24 (4-26 moderate risk for an OUD)

Answers

Q1 – daily prescribed opioids

Q2 – weekly strong urges to use prescribed opioids

Q4 – weekly experiences of not being able to do what was expected of him due to prescribed opioids

Q6 – in the past 3 months he has tried to control, cut down, or stop using prescribed opioids.

The PCP asks about the prescription opioids the patient endorsed getting on the NMA. The patient reports he has been seeing a pain specialist over the past year to help with his worsening pain after his wife died. Over the past few months, he describes needing more pain pills to treat his pain. He also describes intense urges to use when he starts to think about his wife or when he has to reduce his dose to make the prescription last to the next prescription. He is frustrated with himself for being in this situation and is scared to come off opioids. He would like to feel better.