

Center for a Healthy Maryland, Inc.
MedChi, The Maryland State Medical Society
Substance Abuse Management and Buprenorphine Utilization Survey

The purpose of this survey is to assess current clinical practice, barriers, and resources needed by physicians in Maryland for providing substance abuse management and office-based treatment of opioid dependence with buprenorphine. All responses will remain confidential. **Return by fax to 410-649-4131 by May 21.** *Thank you for completing this survey!*

Name: _____ Phone: _____ E-mail: _____

Practice Setting: Solo Specialty: Family Practice # Physicians in practice _____
 Group Internal Medicine # Staff in practice _____
 Clinic Psychiatry # Annual patient visits _____
 Institution Other _____ Do not have direct patient care

1. Which of the following describes your current practice in *substance abuse screening*? **(Check all that apply)**
 Do not screen Only if symptomatic Based on risk factor(s) Routinely screen all
2. Which of the following describes your current practice in *substance abuse management*? **(Check all that apply)**
 Do not treat, refer if needed Screen & refer Initiate treatment and refer Treat mild Treat all
3. Which of the following describes your current practice in *substance abuse follow up*? **(Check all that apply)**
 No follow up Consult with referral provider Reassess patient at next visit Other _____
4. Which of the following describes your current practice in *managing opioid dependence*? **(Check all that apply)**
 I do not manage opioid dependence for my patients.
 I screen my patients for opioid dependence and refer for treatment.
 I am considering prescribing buprenorphine, but need more information.
 I have taken the 8-hour certification course to prescribe buprenorphine, but have not obtained my DEA waiver.
 I have met the requirements to provide buprenorphine treatment, but do not prescribe.
 I prescribe buprenorphine to stabilized patients for on-going management.
 I am prescribing buprenorphine for induction/detoxification.
 I am prescribing buprenorphine in my practice, but need to develop diversion prevention procedures.
 I am experienced in prescribing buprenorphine and have implemented diversion prevention procedures.
 I accept patient referrals for buprenorphine treatment.
 I am willing to assist/mentor physicians in providing buprenorphine treatment.
5. If you are currently prescribing, how many patients are you treating on average with buprenorphine?
 0 1-5 6-10 11-20 21-30 31-50 51-100
6. How has the increase in patient limit # from 30 to 100 for prescribing buprenorphine changed your practice?
 No change May begin prescribing Began prescribing Increased # of patients Did not know
7. Which of the following do you believe pose barriers to *providing buprenorphine treatment*? **(Check all that apply)**
 Lack of physician training/proficiency in managing opioid dependence
 Lack of internal resources (i.e. staff time, staff training, staff buy-in)
 Ability to implement additional procedures into current office practice
 Lack of external resources (i.e. counseling referral sources, treatment resources)
 Concerns about negative response from the general patient population
 Time intensiveness of managing patients with opioid dependence
 Reimbursement rates for patient management
 Pre-authorization procedures for prescribing buprenorphine
 Fear of diversion of buprenorphine by patients
 Other (specify) _____
8. Which of the following resources would be helpful to you in prescribing buprenorphine? **(Check all that apply)**
 Counseling referral list Physician referral list Physician mentors Treatment program list Training
9. Comments: _____