



# Addressing and Managing Opioid Use in Pregnancy

The Eliot Center at First Unitarian Church  
April 5, 2018

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A free, all-day Continuing Medical Education event for clinicians who work with pregnant women using opioids. Topics include screening, treatment guidelines, Medication Assisted Treatment and other considerations.

## Accreditation



This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of OHSU School of Medicine and Health Share of Oregon. The OHSU School of Medicine is accredited by the ACCME to provide continuing medical education for physicians.

## Credit

OHSU School of Medicine designates this live activities for a maximum of 5.25 *AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.



**FACULTY DISCLOSURE INFORMATION**

*In accordance with the requirements of the Standards for Commercial Support of the Accreditation Council for Continuing Medical Education, each instructor and member of the planning committee has been asked to disclose any relevant financial relationships with commercial interests (defined as: any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients). The information disclosed for this activity is listed below.*

*In addition, the planners and instructors listed have agreed that all recommendations involving clinical medicine will be based on evidence that is generally accepted within the profession as adequate justification for their indications and contraindications in the care of patients; that all scientific research used in support or justification of a patient care recommendation will conform to the generally accepted standards of experimental design, data collection and analysis; and that material to be presented will be made available for advance peer review if requested.*

**INSTRUCTORS/MODERATORS**

Amanda Risser, MD	Trainer for Merck; receives honoraria
Andrea Chiavarini, MD *	Nothing to disclose
Chelsea Barbour, MSW	Nothing to disclose
Christy Hall	Nothing to disclose
Diana Smith, CNM *	Nothing to disclose
Fred Baker, MD *	Nothing to disclose
Gracie Koester	Nothing to disclose
Hannah Kamsky, RN	Nothing to disclose
Helen Bellanca, MD *	Nothing to disclose
Joshua Reagan, MD *	Holds stock in Epic
Jeanni Dunagan *	Nothing to disclose
Julie Bennette	Nothing to disclose
Kasey Edwards	Nothing to disclose
Lydia Bartholow	Nothing to disclose
Maria Wunderbro, MSW	Nothing to disclose
MaryBeth Tyler, RN	Nothing to disclose
Megan Bell, RN	Nothing to disclose
Susie Hasty, RN	Nothing to disclose
Tanya Page, RN	Nothing to disclose
Telia Anderson	Nothing to disclose

\*Planning committee member

8:00-8:30 Registration and Breakfast			
Time	Topic	Presenters	Learning Objectives
8:30-8:45	Welcome	Helen Bellanca, MD, MPH	
8:45-9:30	Overview of Pregnancy and Opioid Use	Amanda Risser, MD	<ul style="list-style-type: none"> <li>Identify relevant diagnostic criteria for Opiate Use Disorder</li> <li>Understand terminology used when describing Use Disorders</li> <li>Understand prevalence of Opiate Use and Opiate Use Disorder in pregnancy</li> <li>Identify related co-morbid conditions including trauma</li> <li>Understand the social spectrum of disease</li> </ul>
9:30-10:15	Incorporating Trauma Informed Care into the Care of Women with OUD	Lydia Bartholow, DNP, PMHNP, CARN-AP	<ul style="list-style-type: none"> <li>Define the basic tenets and values of trauma informed care</li> <li>Identify the neurobiological and psychological overlay of trauma and addiction</li> <li>Propose a new model of trauma-informed addictions care</li> </ul>
10:15-10:30 Break and Networking Time			
10:30-11:15	Prenatal Care for Women with OUD	Diana Smith, CNM	<ul style="list-style-type: none"> <li>Demonstrate an approach to prenatal care from a trauma-informed, patient-centered, harm-reduction framework</li> <li>Incorporate a validated substance use screening tool into practice</li> <li>Describe how prenatal care for women with an Opioid Use Disorder (OUD) might differ from prenatal care for other women</li> <li>Understand Project Nurture: a model to reduce barriers to care and increase access to treatment</li> </ul>
11:15-12:00	Labor, Delivery and Postpartum Management	Josh Regan, MD Susie Hasty, BSN, MBA	<ul style="list-style-type: none"> <li>Understand key management issues regarding opioid use disorder and especially MAT in labor and delivery setting.</li> <li>Understand some of the complex social challenges presenting in care for an opioid using population on labor and delivery.</li> <li>Discuss organizational support necessary to successfully embark on care delivery improvement for patients with substance disorders.</li> </ul>

12:00-12:45 Lunch and Networking			
12:45-1:30	Neonatal Abstinence Syndrome	Fred Baker, MD Marybeth Tyler, NNP-BC, IBCLC Megan Bell, BSN, RNC-NIC	<ul style="list-style-type: none"> <li>Describe that the primary treatment for NAS is non-pharmacologic and family centered</li> <li>Describe new methods of assessing opiate exposed infants: “Eat, Sleep, Console”</li> <li>Describe the continuum of care for infants and families experiencing Neonatal Abstinence Syndrome</li> </ul>
Breakout 1:30-3:00	Medication Assisted Treatment	Tanya Page, MD Andrea Chiavarini, MD, FACOG Hannah Kamsky, RN	<ul style="list-style-type: none"> <li>Understand the basis for medication assisted treatment for opioid use disorders in pregnant women</li> <li>Describe and compare the properties of methadone and buprenorphine as used for treatment of opioid use disorder in pregnant women</li> <li>Expand knowledge of the roles providers can play in facilitating treatment for pregnant patients with opioid use disorders</li> <li>Understand the roles of all members of the health care team in providing comprehensive care for pregnant patients with opioid use disorders</li> </ul>
	Panel Discussion: Social Work & the Role of Peers and Doulas	Chelsea Barbour, CSWA Julie Bennette, CRM Kasey Edwards, CRM/Certified Doula Telia Anderson, CRM/Certified Doula Christy Hall, Certified Doula Gracie Koester, Certified Doula Maria Wunderbro, LCSW	<ul style="list-style-type: none"> <li>Understand the role of social work, peers and doulas in working with pregnant women with opioid use disorders</li> </ul>
3:00-3:30 Open Q+A/Wrap Up			



## PRESENTER BIOS

### **Amanda Risser, MD**

Dr. Risser attended college at UC Berkeley, and received her medical degree from Stanford University in 2002. She completed her residency in family medicine and public health and preventive medicine at OHSU in 2006. Her clinical interests include maternity care, reproductive health care and treatment of addiction in families, including the treatment of babies of opiate-dependent mothers. Email: [rissera@ohsu.edu](mailto:rissera@ohsu.edu)

### **Lydia Bartholow, DNP, PMHNP, CARN-AP**

Lydia Anne M Bartholow is a doctorally-prepared psychiatric nurse practitioner, substance use disorder specialist, and educator located in Portland, Oregon. She is the Associate Medical Director of Outpatient Substance Use Disorders at Central City Concern, a well-known houseless health services center. She provides direct care for dual-diagnosis clients, as well as overseeing the safety and clinical quality of all patient care. Lydia completed both her masters and her doctorate in psychiatric nursing at Oregon Health and Sciences University. Email: [lydia.bartholow@ccconcern.org](mailto:lydia.bartholow@ccconcern.org)

### **Diana Smith, CNM**

Diana is a nurse-midwife in practice in Portland, Oregon. She provides full-scope reproductive health care services at Legacy Midwifery and works on social and organizational change through the framework of health equity and reproductive justice. Diana received her Master of Science from the University of California, San Francisco in 2011. She previously worked with the faculty midwifery practice at the University of New Mexico and is a clinical instructor for OHSU and Frontier midwifery students. She served on the board of the ACNM Oregon Affiliate from 2013-2015. Diana is Clinical Lead for Legacy's Project Nurture. Email: [diansmit@lhs.org](mailto:diansmit@lhs.org)

### **Josh Reagan, MD**

Dr. Reagan is a Primary Care Physician with Providence Milwaukie Family Medicine Clinic. He is also one of the clinical leads for Project Nurture at the Providence Milwaukie site. He received his medical degree from University of California, Berkeley and San Francisco Joint Medical Program and completed his residency in Family Medicine at OHSU. Dr. Reagan is board certified in Family Medicine and focuses his practice on addiction medicine, pediatrics and obstetrics. Email: [joshua.reagan@providence.org](mailto:joshua.reagan@providence.org)

### **Susie Hasty, BSN, MBA**

With over 15 years of combined nursing leadership and executive level experience and 20 years as a Neonatal Nurse Practitioner, Susie currently serves as the Director of Perinatal Services at Providence Portland. Susie is a BSN graduate from HSU school of Nursing, she earned her Nurse Practitioner Certificate from South Dakota State University and her Executive Masters of Business Administration from the University of Washington. She is a member of National Association of Neonatal Nurses, Association of Women's Health, Obstetric and Neonatal Nurses and the Northwest Organization of Nurse Executives. Email: [susan.hasty@providence.org](mailto:susan.hasty@providence.org)

### **Fred Baker, MD**

Dr. Baker is a graduate of the University of Nevada's School of Medicine and completed his Pediatric Residency and Neonatal & Perinatal Medicine Fellowship at the University of Michigan. He has been with Northwest Newborn Specialists since 2008 and has served as the NICU Medical Director for Providence Portland Medical Center since the NICU opened in August 2014. Email: [fred\\_baker@mednax.com](mailto:fred_baker@mednax.com)



**Marybeth Tyler, NNP-BC, IBCLC**

Marybeth graduated with her Bachelor of Science in Nursing from OHSU in 1977. She received her Neonatal Nurse Practitioner certificate from Georgetown University in 1982. In 1998, she earned her Master of Science in Family Nursing from OHSU. She has been a Neonatal Nurse Practitioner at Randall Children's Hospital since 1982 where her practice focuses on specializing in the care of substance exposed newborns in the Family Birth Center. Email: [mtyler@lhs.org](mailto:mtyler@lhs.org)

**Megan Bell, BSN, RNC-NIC**

Megan received her Bachelor of Science in Nursing degree from University of Portland in 2011. She currently works as a nurse in the NICU at Randall Children's Hospital. Prior to this, she was employed with Providence Health and Services, working in the NICUs in Anchorage and Portland. Email: [mbell@lhs.org](mailto:mbell@lhs.org)

**Tanya Page, MD**

Dr. Page is a Primary Care Physician with Providence Milwaukee Family Medicine Clinic. She is also one of the clinical leads for Project Nurture at the Providence Milwaukee site. She says a number of years spent working to help homeless people taught her important life lessons and raised her awareness around fitting medical recommendations to the lives of patients. Email: [tanya.page@providence.org](mailto:tanya.page@providence.org)

**Andrea Chiavarini, MD, FACOG**

Andrea trained at OHSU for medical school then University of Arizona for residency. She previously practiced general OB/GYN in the East Multnomah County area then in Vancouver, Washington. She currently works in two part-time positions. Her first is with VIDA Integrative Medicine in Salem, Oregon, providing outpatient gynecologic care and buprenorphine treatment to both women and men. Her second is with the Trust Women Foundation providing abortion care to women in Kansas and Oklahoma. She is also working toward becoming Board-Certified in Addiction Medicine. Email: [andreachiavarini@gmail.com](mailto:andreachiavarini@gmail.com)

**Hannah Kamsky, RN**

Hannah is the Nurse Maternity Care Coordinator for OHSU Family Medicine at Richmond. She also works as part of the OHSU/CODA Project Nurture collaborative. In her work with Project Nurture, she works as part of a team to provide OHSU care onsite at CODA as a way to reduce barriers to prenatal and postpartum care for pregnant people with substance use disorders. Email: [kamsky@ohsu.edu](mailto:kamsky@ohsu.edu)

**Chelsea Barbour, CSWA**

Chelsea received her undergraduate degree in Women Studies from UC Santa Cruz. She moved to Portland in 2000 and began work in the field of domestic violence, while also practicing as a doula. She completed her Master's in Social Work at Portland State in 2006, with a focus on the interconnections between trauma, pregnancy, childbirth and early parenting. She is now serving as the social worker and project lead for Project Nurture at Legacy Midwifery. Email: [cbarbour@lhs.org](mailto:cbarbour@lhs.org)

**Julie Bennette, CRM**

Julie is a Peer Recovery Mentor and Doula for Legacy's Project Nurture Program. Julie has been a Recovery Mentor for 3 years, serving families that are at risk of or involved with the DHS child welfare system. Julie's life is a testimony for the women she serves at Project Nurture. Her story gives hope and empowerment to women who are learning to manage their life situations. Julie recently completed doula training with Mother Tree Doula



Services and is now working on her Doula certification. She received her AAS in Criminal Justice at Portland Community College in 2008. Email: [jmbennet@lhs.org](mailto:jmbennet@lhs.org)

**Kasey Edwards, CRM, Certified Doula**

Kasey has been serving substance users for the last 6 years under many different treatment models, all of them pulling from her strengths as a mother with lived experience in addiction, mental health, homelessness and domestic violence. As a part of Project Nurture she is able to apply her experience and education to support women not only as their peer, but now also as their doula, in meeting their goals and achieving their best life. Email: [kedwards@mhaoforegon.org](mailto:kedwards@mhaoforegon.org)

**Telia Anderson, PRM, Certified Doula**

Telia is a Peer Recovery Mentor and Doula for Legacy's Project Nurture Program. Telia completed doula trainings through MotherTree and International Center for Traditional Childbearing. By integrating the Peer Recovery Mentor and doula roles, Telia provides the women in Project Nurture with continuity of care from their weekly treatment groups, through labor and birth, and into the postpartum period and first year of parenting. Email: [tnanders@lhs.org](mailto:tnanders@lhs.org)

**Christy Hall, Certified Doula**

Christy is a Full Spectrum doula with extensive training and experience working with people dealing with substance use disorders, trauma survivors, and incarcerated people. She is passionate about providing trauma informed support, and facilitating informed consent for pregnant people exercising the full range of reproductive options, including parenting, abortion, and adoption. As a doula with Project Nurture at CODA, Christy works with a team to create a setting in which clients can be well-informed and confident participants in their own pregnancy and recovery-related healthcare. Email: [christythedoula@gmail.com](mailto:christythedoula@gmail.com)

**Gracie Koester, Certified Doula**

Gracie is a doula, educator, speaker, and trainer with over a decade of experience. She has attended hundreds of births, and co-directs Metta Lineage, including a unique, in depth doula apprenticeship program. Gracie works in private practice, as well as part of a collaborative care team with Project Nurture. This combination of in-the-trenches work and systems-level analysis combine with her desire to make doula work a sustainable, accessible field and a medium for transformation. Transformation for those seeking to work as a doula, for those seeking to work with a doula, and for those systems that interface with doulas. As we say at Metta, "As above, so below." Email: [gracie@mettalineage.org](mailto:gracie@mettalineage.org)

**Maria Wunderbro, LCSW**

Maria got her Master's in Social Work from PSU and went on to become a therapist in a children's community mental health clinic, where she worked closely with many families experiencing complex trauma and involvement in multiple systems, particularly Child Welfare. She now works for Providence Beginnings, a maternity case management program in the Providence system, where she mostly focuses on women/babies in Project Nurture at the Milwaukie Family Medicine clinic. Within Project Nurture, she wears many hats, including: screening/keeping track of referrals and active participants; close community partnerships and resource access; liaison and advocacy with Child Welfare; crisis management; care coordination; and clinical/therapeutic work with patients; etc. Email: [maria.wunderbro@providence.org](mailto:maria.wunderbro@providence.org)



## COMMUNITY RESOURCES

### Project Nurture

Project Nurture is a Center of Excellence model for pregnant with substance use disorders that is a team-based approach to prenatal care that includes a prenatal clinician, addictions specialist, mental health support, case management, peer and/or doula support and parenting resources. There are currently three Project Nurture sites:

CODA/OHSU: Site is based at CODA, Inc. on East Burnside, and is exclusively for pregnant women with opioid use disorders. Medication Assisted Treatment and substance use treatment on site. OHSU Family Medicine physician comes to CODA weekly to provide prenatal care and pediatric care. Deliveries occur at OHSU, facilitated by family medicine team. Weekly groups are led by doulas.  
Contact: Maria Wunderbro, LCSW | [maria.wunderbro@providence.org](mailto:maria.wunderbro@providence.org) | 503-215-9930

Legacy/Lifeworks: Site is based at Legacy Midwifery clinic on the Emanuel campus, and is for women with any substance use disorder, although Medication Assisted Treatment is not available. Lifeworks CADC comes in weekly to do substance use evaluations and treatment. Weekly groups are led by midwife and CADC together. Deliveries occur at Legacy Emanuel. Peer Recovery Mentor is a crucial team member.  
Contact: Chelsea Barbour, MSW | [cbarbour@lhs.org](mailto:cbarbour@lhs.org) | 503-413-4500

Providence Milwaukie: Site is based at Family Medicine clinic in Milwaukie. Providence uses internal behavioral health staff to provide substance use treatment as part of an integrated maternity care team. Deliveries occur at Providence Portland. Peer Recovery Mentor is a crucial team member.  
Contact: Alison Noice, MA, CADC III | [alisonnoice@codainco.org](mailto:alisonnoice@codainco.org) | 1-855-733-2632 (1-855-SEE-CODA)

### Hooper Detoxification Center at Central City Concern

Central City Concern (CCC) provides a safe space for pregnant women to get treatment for opioid use disorder at Hooper Detoxification Center, Eastside Concern, and the Letty Owings Center. CCC also partners with other support organization – like CODA and Project Nurture – to make sure you receive the right level of care during treatment. It also means you get pregnancy related healthcare during your pregnancy.

To access Hooper Center services, patients are urged to arrive (1535 North Williams, Portland) at 6:45 a.m. (Monday-Friday) for triage, which begins at 7:50 a.m. Hooper Center is often unable to admit every individual seeking treatment on a given day. Admission nurses inform individuals of other options that may include returning the following morning.

Contact: [hooperreferrals@ccconcern.org](mailto:hooperreferrals@ccconcern.org) | 503-238-2067

## STEPS TO OBTAIN YOUR MEDICATION ASSISTED TREATMENT WAIVER

### Step 1: Check your Eligibility

- To apply for a waiver you must have a valid medical license and an active DEA number. Apply for a DEA number with Drugs Enforcement Agency's Diversion Control Division (Registration Support) at: <https://www.deadiversion.usdoj.gov/>

### Step 2: Complete Buprenorphine Training Online or In-Person

- 8-hour MAT waiver course is required for MDs
- 24 hours of MAT training is required for NPs and PAs (16 hours of coursework plus 8-hour MAT waiver course)
- Training can be completed for free at: <http://pcssmat.org/mat-basics/mat-waiver-training>

### Step 3: Complete your Notice of Intent Form

- Online notification form: <http://buprenorphine.samhsa.gov/forms/select-practitioner-type.php>
- You will need your State Medical License Number and your DEA Registration Number

### Step 4: Forward your Certificates of Completion to SAMHSA

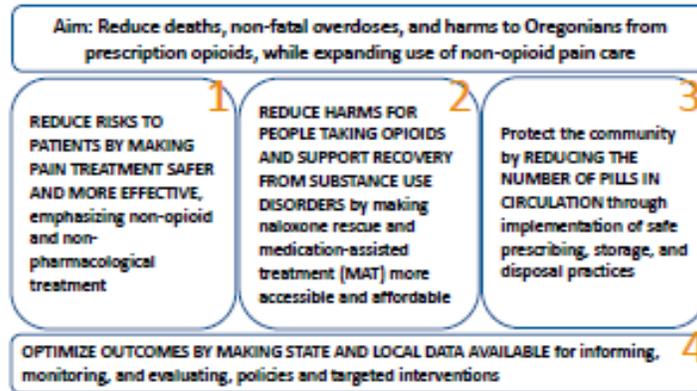
- When you complete the 8-hour waiver training (MDs, NPs, and PAs) and 16-hour training (NPs and PAs only), PCSS will send you via email your certificates of completion for each. Fax the certificates to: 301-576-5237 or email to SAMHSA at: [infobuprenorphine@samhsa.hhs.gov](mailto:infobuprenorphine@samhsa.hhs.gov)
- Once SAMHSA has obtained all documentation, the process requires approximately 45 days to issue you an "X-DEA" prescribing number

### Step 5: Begin Prescribing!

- After one year of active treatment, you can apply to increase your patient limit:
  - Year 1: 30 patients
  - Year 2: 100 patients
  - Year 3: 275 patients

## STATE OF OREGON OPIOID RECOMMENDATIONS

### The Oregon Opioid Initiative



### Oregon Pregnancy and Opioids Workgroup Charter

- Develop statewide clinical recommendations on opioid prescribing during pregnancy, identification and treatment of opioid use disorder during pregnancy and care and treatment of prenatally exposed infants.
- The recommendations are intended to help health care providers incorporate best practices when caring for women and their substance-exposed infants and encourage local efforts to provide coordinated care for families.
- Develop a shared understanding of outcomes that includes both the mother and the infant (e.g. the overall goal includes, mother, infant and family well being).

## Oregon Health Authority Opioids: Resources for Health Care Professionals and CCOs

<http://www.oregon.gov/oha/PH/PreventionWellness/SubstanceUse/Opioid/Providers.aspx>

### Prescribing Guidelines and Resources

TOPIC	SOURCE
<b>Prescribing Guidelines: Healthcare Providers</b>	
Oregon Opioid Prescribing Guidelines (pdf)	Oregon Opioid Prescribing Guidelines Task Force
Oregon Emergency Department Opioid Prescribing Guidelines (pdf)	Oregon ACOG
CDC Guidelines for Prescribing Opioids for Chronic Pain and Substitue Resources	CDC
<b>Prescribing Guidelines: Dentists</b>	
Recommended Opioid Guidelines for Dentists (pdf)	Oregon Opioid Prescribing Guidelines Task Force
Resident: Prescribing Opioids Safely as a Dentist (pdf)	Oregon Opioid Prescribing Guidelines Task Force
<b>Training on Opioid Prescribing</b>	
Applying CDC's Guidelines for Prescribing Opioids	CDC
SAFE Opioid Prescribing Training: Strategies, Assessment, Fundamentals, Education	ACOG
<b>Oregon Plans and Reports</b>	
Reducing Opioid Overdose, Misuse and Dependency: Guide for CCOs (pdf)	OHA
OD Summary: Prescribing Opioids for Chronic Pain, Guidelines are one piece of the puzzle (pdf)	OHA
<b>Oregon Health Plan (OHP) Resources</b>	
OHP Plan for expanded coverage of back and spine pain diagnosis and treatment (OHP)	OHA
Resources for supporting OHP members with chronic pain or prescriptive opioids (pdf)	OHA

Coming soon:  
Pregnancy and Opioids  
Workgroup  
Recommendations

## Pregnancy and Opioids Guidelines-DRAFT

<http://www.oregon.gov/oha/PH/PreventionWellness/SubstanceUse/Opioid/Providers.aspx>

1. Screen all women of reproductive age for their pregnancy intentions prior to initiation and continuation of any opioid or medication assisted treatment (MAT) for opioid use disorder (OUD).
2. Screen all pregnant women and women seeking preconception care for opioid use.
3. Avoid prescribing opioids for pain during pregnancy in an outpatient setting, and do so only with safeguards in place.
4. Upon discharge after a delivery, all women who need ongoing pain treatment should be encouraged to use non-opioid therapies (i.e. NSAIDs) and if indicated receive a limited number of opioid pills until scheduled follow-up or for up to 7 days of treatment.
5. Coordinate care for women with an OUD.
6. Manage OUD during pregnancy by following evidence-based approaches and the highest standards of care.
7. Prevent opioid overdose.
8. Include additional screenings and services when caring for pregnant women with OUD.
9. Provide appropriate pain control for women with OUD during labor and delivery.
10. Provide necessary postpartum services and support for women with OUD.
11. Encourage breastfeeding among women using opioid agonist medications.
12. An infant born to a mother who used opioids during pregnancy should have close monitoring and be managed with a formal protocol for evaluation and treatment of Neonatal Abstinence Syndrome (NAS).
13. Advance system changes that support families affected by OUD.



**FACULTY EVALUATION**

Please evaluate today's presentations by circling the appropriate rating; 5 = excellent, 1 = poor. Leave blank if not attended.

	Content was relevant to my practice		My knowledge of the topic has increased					Talk presented in clear/organized manner					Key points were summarized					Talk was evidence-based				
<b>Overview of Pregnancy and Opioid Use</b>	Yes	No	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1
<b>Trauma Informed Care in Practice</b>	Yes	No	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1
<b>Prenatal Care for Women with OUD</b>	Yes	No	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1
<b>Labor, Delivery and Postpartum Mgt</b>	Yes	No	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1
<b>Neonatal Abstinence Syndrome</b>	Yes	No	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1
<b>Medication Assisted Treatment</b>	Yes	No	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1
<b>Social Work &amp; the Role of Peers &amp; Doulas</b>	Yes	No	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1	5	4	3	2	1

Was the information/material presented at this CME activity free from commercial bias?  Yes  No  
If no, please explain:

Did you learn new information and strategies that you can apply to your work or practice?  Yes  No  
If yes, please describe:

Please indicate any barriers you perceive in implementing the changes identified above:

- No barriers
- Patient compliance issues
- Other \_\_\_\_\_
- Reimbursement/insurance issues
- Cost

What content areas were most helpful today?

What content areas were missing or you wish you heard more of?



If you are a medical practitioner, are you currently a Medication Assisted Treatment prescriber?

Yes       No       N/A

If no, are you interested in becoming an MAT prescriber?       Yes       No

**For medical clinicians:**

Specialty \_\_\_\_\_ Type of practice: \_\_\_MD/DO \_\_\_NP \_\_\_PA \_\_\_RN \_\_\_Resident\_\_\_Other

Years in practice \_\_\_\_\_ Have you attended this conference previously? \_\_\_Yes \_\_\_No

**For all other attendees:**

Job Title \_\_\_\_\_ Organization \_\_\_\_\_

Tell us why you were interested in this training: \_\_\_\_\_  
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**Anything else you'd like us to know:**

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