

Criteria-Based Consultation Prescribing Program

CRITERIA FOR DRUG COVERAGE

Opium Oral Tincture 10 mg/mL (morphine)

Notes:

- Quantity limits: No

Initiation (new start) and criteria for *new members* entering Kaiser Permanente already taking the medication who have not been reviewed previously: Non-formulary **opium oral tincture 10 mg/mL (morphine)** will be covered on the prescription drug benefit when the following criteria are met:

- Prescribed by or in consultation with Gastroenterology, Immune Deficiency Clinic or Oncology
- Prescribed for treatment of diarrhea in patients 18 years of age and older
- Patient has tried and failed maximum doses, intolerant to or has contraindications to the following medications:
 - Loperamide: maximum dose 16 mg per day
 - Diphenoxylate-atropine: maximum dose 20 mg diphenoxylate per day
- Patient has documented treatment failure with adequate trial of morphine sulfate (concentrate or IR tablets)
 - Adequate trial: Minimum 2 weeks of initial therapy plus at least one dose increase (at a minimum 2 week interval) without improvement

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