



Consent for Treatment with BRIXADI®

Buprenorphine is a medication used to treat opioid use disorder. It is an opioid that reduces cravings and withdrawal symptoms and blocks the effects of stronger and more dangerous opioids to reduce overdose risk. Buprenorphine can be taken as a daily pill or film or as a subcutaneous (under the skin) injection. This consent form is about the monthly shot called BRIXADI®.

Buprenorphine can be used for withdrawal management or maintenance therapy. Opioid use disorder is a chronic condition, and maintenance therapy with buprenorphine can continue as long as medically necessary. Longer engagement in treatment is associated with better patient outcomes. It is recommended that buprenorphine treatment lasts for at least six (6) months.

BRIXADI® is an extended-release form of buprenorphine that has two (2) formulations: a weekly injection and a monthly injection.

- BRIXADI® weekly is administered every 7 days. It comes in four (4) different doses: 8mg, 16mg, 24mg, and 32mg.
- BRIXADI® monthly is administered every 28 days. It comes in three (3) different doses: 64mg, 96mg, and 128mg.

Your clinical team will work with you to determine the most appropriate formulation (weekly or monthly) and dose for you. Both formulations of BRIXADI® can be administered subcutaneously in one of four (4) areas: abdomen, buttock, thigh, or upper arm.

The patient information you need to know about BRIXADI® and its side effects is attached. We will review that material with you before we ask you to sign this form for treatment.

I have read this form and the patient medication form or had them read to me. I understand what they say. I was given the opportunity to ask questions. All of my questions were answered. I believe I have enough information to consent to the BRIXADI® shot. By signing this form, I authorize my clinical team to perform subcutaneous injections of BRIXADI® into one of four locations—abdomen, buttock, thigh or upper arm—as medically appropriate.

Patient Signature

Date

Provider Signature

Date

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