

New opioid treatment
(expected duration > 1 week)

Follow-up after 3-4 days

Follow-up every 1-2 weeks

Continued treatment
> 3 weeks, move to
stable opioid
treatment

Stable opioid treatment
(unchanged dose > 3 weeks)

Risk
assessment
*

High

Follow-up every month

Moderate

Follow-up every 3. months

Low

Follow-up every 6. months

Need for higher dose
>1 week, move to
increased dose group

Increased dose
(expected treatment > 1 week)

Follow-up after 3-4 days

Follow-up every 1-2 weeks

No dose increase
within 3 weeks, move
to stable opioid
treatment

* Risk factors:

- Psychiatric disorders such as depression or post traumatic stress disorder.
- Current or previous abuse history by patient or family.
- Current use of benzodiazepines or similar sleep disorder medicine
- Medical co-morbidity with the potential to increase risk of opioid adverse effects, such as COPD, obstructive sleep apnea disorders, high age, as well as liver or kidney insufficiency
- Patients with a stable dose of over 100 mg of morphine equivalents are to be followed up as high risk patients.