

eTable 1. *International Statistical Classification of Diseases and Related Health Problems, 10th Revision*, diagnosis codes for opioid toxicity events

<i>International Statistical Classification of Diseases and Related Health Problems (10th revision) diagnosis codes</i>	Diagnosis code description
T40.0	Poisoning by opium
T40.1	Poisoning by heroin
T40.2	Poisoning by other opioids
T40.3	Poisoning by methadone
T40.4	Poisoning by other synthetic narcotics
T40.6	Poisoning by unspecified and other narcotics

eTable 2. Opioid use disorder (OUD) definition

<p>OUD was defined as anyone who had any of the following events occur in the 5 years prior to index hospital encounter date:</p>	<p>ICD-10 (DAD, NACRS, OMHRS): F11 (mental and behavioural disorders due to use of opioids)</p>
	<p>ICD-9 (Ontario Health Insurance Program): 304 (drug dependence, drug addiction)</p>
	<p>ICD-9 (OMHRS): 304 (opioid dependence-unspecified), 305.5 (opioid abuse-unspecified)</p>
	<p>OHIP Fee code (Ontario Health Insurance Program): K682 (opioid agonist maintenance program monthly management fee – intensive), K683 (opioid agonist maintenance program monthly management fee – maintenance), K684 (opioid agonist maintenance program monthly management fee - team maintenance)</p>
	<p>Prescription for methadone or buprenorphine/naloxone</p>

eTable 3. OAT initiation from 0-7 days after hospital discharge for opioid toxicity

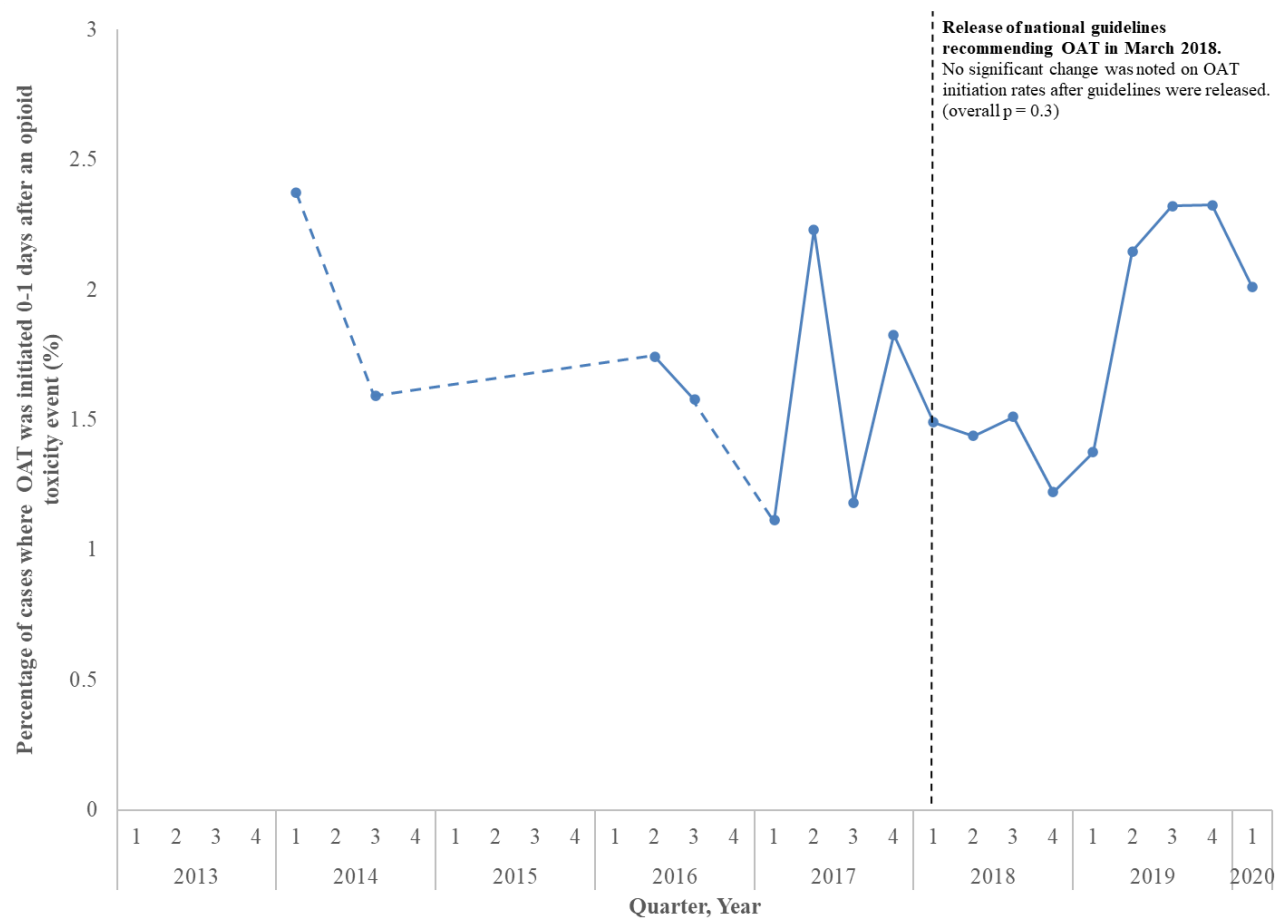
Days following discharge from hospital	Frequency of OAT initiation events	Percentage of OAT initiation events
Day 0 (day of discharge)	127	14.9
Day 1	180	21.2
Day 2	125	14.7
Day 3	95	11.2
Day 4	88	10.3
Day 5	101	11.9
Day 6	70	8.2
Day 7	65	7.6

eTable 4. Results of monthly and quarterly ARIMA models examining the association between rate of OAT initiation and the release of OUD clinical management guidelines

	Model 1: Overall OAT initiation			Model 2: Methadone initiation			Model 3: Buprenorphine initiation		
Quarterly ARIMA model	Model (p, d, q)	Estimate (95% CI)	p-value	Model (p, d, q)	Estimate (95% CI)	p-value	Model (p, d, q)	Estimate (95% CI)	p-value
	(5, 1, 0)	0.14 (-0.11, 0.38)	0.3	(2, 1, 0)	0.07 (-0.12, 0.25)	0.5	(2, 1, 0)	0.04 (-0.26, 0.34)	0.8
Monthly ARIMA model	Model (p, d, q)	Estimate (95% CI)	p-value	Model (p, d, q)	Estimate (95% CI)	p-value	Model (p, d, q)	Estimate (95% CI)	p-value
	(5, 1, 0)	0.05 (-0.14, 0.25)	0.6	(5, 1, 0)	0.03 (-0.08, 0.14)	0.6	(5, 1, 0)	0.01 (-0.12, 0.15)	0.8

Abbreviations: OAT, opioid agonist therapy; OUD, opioid use disorder; ARIMA, autoregressive integrated moving average; CI, confidence in Model specification represented as (p, d, q): p is the number of lags of the dependent variable, representing the autoregressive nature of the model; d represents the number of times the data have to be differenced to ensure stationarity, and q is the number of lags for the error term, representing the moving average part of the model. Note that stationarity for all models was confirmed using the augmented Dickey-Fuller test.

Figure 1. Overall OAT initiation rate 0-1 days after an opioid toxicity event resulting in hospitalization or emergency department visit



Note: Dashed lines are used to connect data points where event counts ≤ 5 have led to suppression of quarterly data.