

## Tip #14: Managing Drug Seeking Patients

**The Risk:** Healthcare professionals share in the responsibility for minimizing prescription drug abuse and drug diversion. Physicians are tasked with differentiating patients in need of effective pain management from those who may be seeking drugs for inappropriate reasons. The following recommendations are intended to provide guidance for healthcare providers when confronted by drug seeking patients.

### Recommendations:

1. Perform a complete review of the patient's pertinent history, and conduct a thorough medical evaluation. Address and document all objective signs and symptoms of pain.
2. Exercise concern when dealing with patients who are not interested in having a physical examination, are unwilling to authorize the release of prior medical records, or have no interest in a diagnosis or a referral, saying they want the prescription immediately.
3. Be cautious if a new patient has an unusual knowledge of controlled substances, or requests a specific controlled substance, and is unwilling to try any other medication.
4. Document a trial of non-narcotic medication and/or physical therapy before choosing to place the patient on a controlled substance.
5. If you are able to identify the true source of the patient's pain, document that and any positive test results in the medical record.
6. New York State physicians must consult the I-Stop registry prior to prescribing any Schedule II, III or IV controlled substances. To establish a Health Commerce System account to enable you to do so, access the website at <https://hcsteamwork1.health.state.ny.us/pub/top.html>.
7. Document the patient's informed consent for treatment of chronic pain with controlled substances. Have the patient sign a written pain management agreement (available from Fager Amsler Keller & Schoppmann, LLP) when prescribing controlled substances for chronic pain.

8. Specifically document drug treatment outcomes and the rationale for medication changes.
9. Assess whether further treatment for addiction or pain management is appropriate, and document this discussion with the patient. If necessary, refer the patient for consultation, to a pain management clinic, or to a rehabilitation facility.
10. Carefully monitor and protect Official New York State Prescription pads if you use them. Unless an exemption is applicable, prescriptions for controlled substances are to be electronically dispensed.
11. When electronically issuing or writing a prescription for controlled substances, write the quantity and the strength of drugs in both letters and numbers to prevent alteration.
12. Report patients who are reasonably believed to be habitual users or abusers of controlled substances to the New York State Bureau of Controlled Substances. This is required by New York State Public Health Law § 3372.
13. Contact the law firm of Fager Amsler Keller & Schoppmann, LLP to discuss how to address a patient who you believe is selling/diverting narcotics, or altering, forging, or stealing prescription pads.