

OPIOID MANAGEMENT

CHECKLIST #2

MANAGING DRUG SEEKING PATIENTS

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.

		YES	NO
1.	A complete review of the patient's pertinent history is performed, and a thorough medical evaluation is conducted. All objective signs and symptoms of pain are addressed and documented.		
2.	Concern is exercised when caring for 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, or request an immediate narcotic prescription.		
3.	Caution is used if a new patient has an unusual knowledge of controlled substances, or requests a specific controlled substance, and is unwilling to try any other medications.		
4.	A trial of non-narcotic medication and/or physical therapy is instituted and documented prior to prescribing the patient a controlled substance.		
5.	If you are able to identify a true source of the patient's pain, document that and any positive test results in the medical record.		
6.	The I-Stop registry is consulted before prescribing any Schedule II, III or IV controlled substances.		
7.	The patient's informed consent for treatment of chronic pain with controlled substances is documented.		
8.	The patient signs a written pain management agreement.		
9.	Drug treatment outcomes and the rationale for medication changes are specifically documented.		

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MANAGING DRUG SEEKING PATIENTS (continued)		NO
10. An assessment of whether further treatment for addiction or pain management is completed, this is discussed with the patient and documented. If necessary, the patient is referred for consultation, to a pain management clinic, or to a rehabilitation facility.		
11. Official New York State Prescription pads are carefully monitored and protected, if they are in use. Unless an exemption is applicable, prescriptions for controlled substances are electronically dispensed.		
12. When electronically issuing or writing a prescription for controlled substances, the quantity and the strength of drugs is written in both letters and numbers to prevent alteration.		
13. Patients who are reasonably believed to be habitual users or abusers of controlled substances are reported to the New York State Bureau of Controlled Substances. This is required by New York State Public Health Law §3372.		

The law firm of Fager Amsler Keller & Schoppmann, LLP should be contacted to discuss how to address a patient who is believed to be selling/diverting narcotics, or altering, forging, or stealing prescription pads.

Sample pain management agreements are available from Fager Amsler Keller & Schoppmann, LLP for use when prescribing controlled substances for chronic pain. They can be reached at **(855) FAKS-LAW** (855-325-7529).