

GUIDELINES FOR CHRONIC NARCOTIC ADMINISTRATION

The successful management of chronic pain involves many modalities including, but limited to, physical therapy, surgical consultation, injection therapy, stress reduction, biofeedback, and oral medications. Occasionally upon the mutual agreement of the patient and the pain management physician, it may be necessary to institute long term opiate administration to achieve satisfactory pain control. The following are guidelines that will be helpful in managing the long-term administration of narcotic medications. Prior to initiating this therapy the patient will read the following guidelines, and discuss them thoroughly with the provider.

Patient agrees to fill prescription medications at one pharmacy only. This pharmacy will be responsible for all medications prescribed during treatment.

Pain medication prescriptions will be obtained only from the pain clinic office. "Doctor shopping" for additional pain medications from other physicians is discouraged, and if this occurs will jeopardize the physician/patient relationship. Patients must make an office visit for their pain medication refills-no refills are done over the phone or fax.

Please take only the amount of medication prescribed. Narcotic analgesics will hopefully make your pain more tolerable, but they should not be used to relieve stress or to promote sleep. If your pain worsens or if there is a change in your symptoms, please make an appointment to be seen in the office.

Lost or misplaced medications or their prescriptions will not be refilled at an early date. After hours or weekend calls for refills are not emergencies and won't be responded to by the on-call provider.

Emergency room visits for pain medication are discouraged. The emergency room is an inefficient way to achieve pain reduction and may involve a long wait and the risk that no medication will be dispensed. It is unlikely that the pain management physician will be available for patients in the emergency room.

Pain also agrees to continue with other modalities of chronic pain management as deemed appropriate by the referring physician and the pain clinic physician. This will most likely include physical therapy, biofeedback, relaxation therapy, counseling, and other methods to help handle the stress of chronic pain.

Patient authorizes ISPINE SPORTS MEDICINE/TAPMC to obtain information concerning medications prescribed, amount and frequency from pharmacies and other physician offices.

Patient agrees to have a random drug screen when ordered by a provider, the results of which cause termination from the practice.

Patient reports to ISPINE SPORTS MEDICINE/PAIN MANAGEMENT/TAPMC any problems with memory disturbance or problems in remembering how and when to take their medications.

NARCOTIC THERAPY- SIDE EFFECTS, RISKS AND COMPLICATIONS: The patient understands that narcotic analgesics may result in physical dependence that ultimately may require slow weaning once the pain condition improves. Immediate discontinuation of this medication is not advised. Tolerance to the medication may develop after long-term usage which means that ultimately these medications may become less effective. Other side effects may include:

Respiratory depression resulting in respiratory arrest and/or death, as well resultant cardiac arrest & or death.

Tolerance and/or physical dependence necessitating tapered discontinuation of the medications.

Withdrawal phenomenon with abrupt discontinuation of the medication causing significant side effects such as palpitations, diaphoresis, elevated pulse and blood pressure.

Disorientation, resulting in falls and resultant significant injury.

Constipation and bowel obstruction, and even bowel perforation, possibly requiring surgical intervention and potentially resulting in ischemic (dead) bowel, sepsis and death.

Allergic and/or anaphylactic reactions to the medications resulting in hypotension, tachycardia, arrhythmias or cardiac arrest, and death.

Potential of other sedative medications causing additive and/or synergistic interactions and greater than expected or enhanced side-effects.

PRECAUTIONS:

1. Patients taking anticoagulants are at particularly high risk since any kind of trauma [falls, etc.] could result in life-threatening hemorrhage, intra-cranial bleeding, and death.
2. Extremes of age. The very young and the elderly may exhibit marked and dramatic side effects from narcotic medications, even in low doses.
3. Patients with other significant medical problems (heart or lung disease, other) are at increased risk for complications.
4. Patients taking sedative medications or central nervous system depressants should use narcotics sparingly if absolutely necessary and in reduced doses due to additive and synergistic effects.
5. It is especially important to keep your medications in a secure location, and preferably, under lock and key to avoid others [including children] from obtaining access to these potentially deadly substances.
6. Narcotic analgesics should not be listed during pregnancy. By signing this, I acknowledge that I am not pregnant and that it is my responsibility to notify my physician if I am planning pregnancy or if I become pregnant.

WHAT NOT TO DO WHILE TAKING NARCOTICS

Any kind of activity where judgment is required i.e. signing important documents, caring for the sick, the elderly, or the very young.

Driving or operating machinery.

Working in high risk areas (i.e. construction sites, elevated work sites, working with power tools, etc.)

Drinking alcohol or using recreational drugs is prohibited while on narcotics due to potent and unpredictable enhancement of central nervous system depression of these substances when taken together.

All questions were answered to the patient's satisfaction. The patient was encouraged to ask any additional questions or seek clarification for anything which was not clear in the guidelines. Additionally, non-narcotic management treatment options were offered. These were declined by the patient.

I have read the above guidelines and will make every effort to follow these guidelines during my chronic pain management.

MEDICATION POLICY

In order to run our practice as efficiently as possible we would like to explain our medication policy:

We do not refill medications over the phone or by fax. Please come to your appointment with all of your pain medications in the actual bottles. Please remember, the medications we prescribe should be taken only as directed, and should last until your next appointment with our office.

It is our policy not to provide or refill medications early. If medications are taken more often than prescribed, or are lost or stolen, they cannot be replaced.

If you have a change in your pain levels, we ask that you call immediately to make an appointment with our office. You will then receive an individual consultation as soon as our schedule will allow. These visits help us closely monitor your condition and your response to medications.

We ask that our medication refill telephone line be used sparingly. Spending time answering pharmacy requests prevents us from caring for patients in the office.

Remember that your pharmacist is well-educated regarding medications, and is a valuable resource for information.

THANK YOU VERY MUCH FOR REVIEWING THIS POLICY.