



## NorthStar Rehab + Pain Clinics

### Patient/Provider Opioid Agreement

The purpose of this agreement is to give you information about the medications you will be taking for pain management. It is also to assure that you and your health care provider comply with state and federal regulations concerning the prescribing and use of controlled substances.

Opioids (narcotic analgesics) are a class of medications that are prescribed to help with pain. They can be very helpful in the management of acute episodes of pain and acute postoperative pain. It is important to understand some of the side effects of these medications. Opioids may cause drowsiness that can be worsened by the use of alcohol, benzodiazepines, and other sedating medications. If you are unsure about mixing any medication with an opioid, please ask your health care provider or pharmacist. You must avoid any activity that may be dangerous to you or someone else if you feel drowsy or are not thinking clearly.

The long-term use of opioids for pain management is controversial because of uncertainty regarding the extent to which they provide long term benefit. Patients entering the practice while currently on a maintenance course of prescribed opioids for chronic pain may need to obtain their maintenance prescription medications from the original prescriber.

Physical dependence will develop with regular use. This does not indicate addiction, but means that a physical withdrawal syndrome will develop if you stop your medication abruptly. Tolerance may develop to the pain relieving effects of opioids, meaning that pain relief may decrease over time. In chronic pain states, this usually occurs slowly, if at all.

Some pain conditions, including post-operative pain, may not improve with opioids. A frequent need to increase doses may indicate that opioids are not effective for a particular pain problem. It could also indicate an underlying problem with addiction or psychological dependence. Discontinuation of opioid medications may occur if pain relief is not adequate in spite of escalating doses, persistent side effects, if goals of opioid therapy are not being met, or there is inability to comply with the treatment agreement.

Opioid medications have potential for abuse or diversion and strict accountability is necessary. For this reason the following policies are agreed to by you, the patient, as consideration for, and a condition of, the willingness of the physician/ physician assistant (PA) whose signature appears below to consider the initial and/or continued prescription of controlled substances to treat your chronic pain.

1. All prescriptions must come from the physician/PA whose signature appears below or, during his or her absence, by the covering physician, unless specific authorization is obtained for an exception. (Multiple sources can lead to untoward drug interactions or poor coordination of treatment.)

2. All prescriptions must be obtained at the same pharmacy, whenever possible. Should the need arise to change pharmacies, you should try to stay within the same pharmacy chain and you MUST inform our office. The pharmacy that you have selected is:

\_\_\_\_\_ Phone: \_\_\_\_\_

3. You are expected to inform our office of any new medications or medical conditions, and of any adverse effects you experience from any of the medications that you take.
4. The prescribing physician has permission to discuss all diagnostic and treatment details with dispensing pharmacists or other professionals who provide your health care for purposes of maintaining accountability.
5. Stopping opioids abruptly can cause flu-like withdrawal symptoms such as nausea, vomiting, diarrhea, and sweating. While not dangerous, this can be very uncomfortable. It is best to wean from opioids as instructed by your health care provider.
6. You CANNOT share, sell, or otherwise permit others to have access to these medications.
7. Prescriptions and bottles of these medications may be sought by other individuals with chemical dependency and should be closely safeguarded. Since the drugs may be hazardous or lethal to a person who is not tolerant to their effects, especially a child, you must keep them out of reach of such people. It is expected that you will take the highest possible degree of care with your medication and prescription. It is best to lock up your medication in a safe or lock box. You should not leave your medications where others might see or have access to them.
8. Medications may not be replaced if they are lost, get wet, are destroyed, left on an airplane, have been stolen, etc. It is your responsibility to keep your medications safe.
9. Early refills will generally not be given. Prescription refills may be issued early if the physician/PA or patient will be out of town when a refill is due. These prescriptions will contain instructions to the pharmacist that they not be filled prior to the appropriate date.
10. Renewals are contingent on keeping scheduled appointments. Please do not phone for prescriptions after hours or on weekends as covering providers will not prescribe refills for opioids.
11. It should be understood that any medical treatment is initially a trial, and that continued opioid prescription is contingent on evidence of benefit. The risks and potential benefits of these therapies are explained in the informational piece of this agreement.
12. It is understood that failure to adhere to these policies may result in cessation of therapy with opioid prescribing by this physician/PA or referral for further specialty assessment.
13. You affirm that you have full right and power to sign and be bound by this agreement, and that you have read, understand, and accept all of its terms.

\_\_\_\_\_

Provider Signature

Date: \_\_\_\_\_

\_\_\_\_\_

Patient Signature

Date: \_\_\_\_\_

Anjum S. Khan, MD

Provider Name (Printed)

\_\_\_\_\_

Patient Name (Printed)

## Opioid Facts

An opioid is a strong prescription pain medication. Some possible side effects include nausea/vomiting, sleepiness/dizziness, and/or constipation.

Common Names of Opioids:

- Hydrocodone (Vicodin, Norco)
- Oxycodone (Percocet, OxyContin)
- Morphine
- Codeine (Tylenol #3, Tylenol #4)
- Fentanyl
- Tramadol (Ultram)
- Methadone
- Hydromorphone (Dilaudid)
- Oxymorphone (Opana)

Only use your opioids for the reason they were prescribed.

### Using Opioids Safely:

- Do not mix opioids with benzodiazepines (i.e. Valium, Xanax, and Ativan), alcohol, muscle relaxers, sedatives or street drugs. It can affect your ability to breathe and could cause death.
- Your opioids are only for you. Do not share your pills/patches with others.
- Diversion (sharing or selling) of opioids is considered a felony.
- Do not drive while you are taking opioids. You can be charged with a DUI (driving under the influence) in the state of Michigan.
- For a female who is pregnant or plans to become pregnant: exposing the fetus to opioids could have long term effects including fetal addiction.
- Safely store opioids out of the reach of infants, children, teens, and pets. Lock your medication if possible.
- Safely dispose of unused opioids
- Unused opioid medication prescribed by NorthStar Rehab + Pain should be returned to our office for disposal.
- Pharmacy and police station drop-boxes
- Medication Take-Back Drives

### Opioid Addiction:

You are at a higher risk of developing a dependence or addiction to opioids if you:

- Have a history of depression or anxiety or have long term chronic pain
- Have a history of using or abusing alcohol, tobacco, prescription drugs, or street drugs
- Take more medication than prescribed by your physician

## **Michigan's Opioid Legislation/Additional Policy Procedures:**

In 2017, the Michigan state legislature passed several new laws aimed at curbing the opioid epidemic. Outlined are some of the laws implemented:

- At every visit and every refill (including phone refills), our staff will be required to ask our patients what other controlled substances they are on, and this must be recorded in the chart. This will be cross-referenced with the MAPS Report (see below).
- MAPS (Michigan Automated Prescription Monitoring System) Report - Must be run at every visit and every refill. The new law requires the prescribing provider to review these reports prior to prescribing any opioid medications. Examples of what the providers will be reviewing these reports for include: multiple opioid prescribers, inconsistencies between patient's medical record, patient's verbal report and MAPS reports.
- By law, MAPS reports may not be released to the patient or other healthcare providers, or with a medical records request by any entity.
- Informed Consent, i.e. "Start Talking Form" – The state has provided a "Start Talking" form that must be filled out at the start of every new opioid prescription, and signed by the patient. The purpose of this form is to educate patients of risks associated with opioid use. You can expect to sign a new "start talking" form at every visit where medications are reviewed and prescribed and/or any time a new opioid medication may be started for you.
- Additionally, many insurance companies are putting new policies into place that limit the types and amounts of opioids that can be prescribed and are also requiring evidence that a patient has attempted weaning from opioids and have tried other non-opioid methods of pain control. We are committed to decreasing patients' reliance on opioids for pain control, utilizing a comprehensive and multi-disciplinary approach to chronic pain management.
- We also require patient's undergo several random drug screens/year to monitor for compliance to the patient/provider opioid agreement. The results of the screens will be discussed with the patients and their prescriptions refilled based on these results.