



ECHC Narcotic Policy

Revised 04/04/2022

Extended Care House Calls is following the recommendations of the National Opioid Task Force, Centers for Disease Control and Prevention and the Drug Enforcement Administration along with all state guidelines for treating chronic pain.

Our guidelines are not intended for patients who are in active cancer treatment, palliative care, or end-of-life care.

Non pharmacologic therapy and nonopioid pharmacologic therapy are preferred for chronic non-cancerous pain.

Controlled substances are intended to decrease pain and improve activity short term. Controlled substances will never alleviate pain 100%. Long term use of any controlled substance increases the risk of tolerance, addiction, and adverse side effects.

Long term controlled substance combination therapy with a benzodiazepine (Xanax) or opioid (Norco/hydrocodone) or gabapentin (Neurontin/Lyrica) has been shown by research to increase the risk for dizziness, falls, sedation, nausea with vomiting, constipation, physical dependence, tolerance, respiratory depression and even death.

All patients of ECHC are required to comply with all guidelines which include:

- No Provider is required to provide controlled prescription drugs on the first visit unless warranted for acute issues based on a full in person assessment by our Providers.
- No Provider is obligated to refill or continue any controlled prescription drugs at doses prescribed by another physician.
- All patients requiring controlled prescriptions will undergo a full assessment based on state and federal guidelines.
- All patients requesting controlled prescription drugs will be screened for substance use, misuse, and abuse.
- All patients requiring controlled prescription drugs will undergo screening and monitoring practices in accordance with state and federal laws including drug screens and pill counts.
- All patients requiring controlled prescription drugs will complete and sign a Narcotic Agreement that outlines appropriate behaviors for safe use and consequences of misuse.
- No refills or new prescriptions will be written or called or faxed to a pharmacy over the weekend unless in an emergency and no more than a 72-hour supply will be provided with owner discretion.

Our office will be notifying you if you are on multiple prescriptions that we plan to taper and /or discontinue your prescriptions or offer you a referral to a specialist of choice to further assess your needs.

If you are on a controlled substance prescribed by another specialist or practice group, it is ECHC policy that we will not prescribe any controlled substances to you. Our policy is one pharmacy and one provider for all controlled substances.

ECHC will make exception to our policy for short term pain management on a case by case basis in nonsurgical cases with review by the Provider and the Narcotics Team. If long term usage is indicated, then a referral will be made to a pain management Provider or other specialist for further evaluation.

ECHC will also make exception to our policy regarding benzodiazepines usage on a case by case basis as long as there is specialist documentation and/or justification for usage upon review by the Provider and the Narcotics Team.

Our office will provide you with a list of Pain Management specialists as needed. We will also direct other outpatient referrals to specialists as needed.

Below are some References and Resources:

- “Opioid Complications and Side Effects.” Pain Physician 2008; 11: S105-S120
- “Guidelines for Prescribing Opioids for Chronic Pain.”
www.cdc.gov/drugoverdose/prescribing/guideline.html
- “Alternatives to Opioids: Medications.” Florida Dept of Health, Office of Communications (09-20-19)
- Practitioner’s Manual. An Informational Outline of the Controlled Substances Act. 2006 Edition. United States Department of Justice, Drug Enforcement Administration. Office of Diversion Control.
- “Benzodiazepines: A versatile clinical tool.” Current Psychiatry Vol 11, No.4 April 2012.
- Substance Abuse and Mental Health Services Administration (SAMHSA);
www.samhsa.gov/
- American Society of Addiction Medicine (ASAM); www.asam.org/
- NIH-National Institute on Drug Abuse (Drugs of Abuse); www.drugabuse.gov/drugs-abuse
- Find Help Now in KY; Findhelpnowky.org



NARCOTIC CONSENT FORM

I _____ AGREE TO ALL TERMS BELOW:

1) All Pain medicine/narcotics will be obtained from:

PHARMACY: _____ PHARM PH # _____

I WILL INFORM EXTENDED CARE HOUSE CALLS IF THERE IS A CHANGE OF PHARMACY

- 2) I WILL NOT SEEK PAIN MEDICINE/NARCOTICS FROM ANOTHER DOCTOR/PROVIDER.
- 3) I WILL ADHERE TO DOSING INSTRUCTIONS AS PRESCRIBED AND WILL NOT SELF INCREASE
- 4) I WILL NOT GIVE OR SELL MY PAIN MEDICINE/NARCOTICS TO FAMILY OR ANYONE ELSE.
- 5) I WILL NOT RECEIVE PAIN MEDICINE/NARCOTICS FROM ANYONE ELSE.
- 6) I WILL BE RESPONSIBLE AND KEEP PAIN MEDICINE/NARCOTICS SAFE AT ALL TIMES.
- 7) IN THE EVENT OF LOST, STOLEN OR ANY MISHAPS I WILL NOT REQUEST REPLACEMENT OF PAIN MEDICINE/NARCOTICS.
- 8) I WILL KEEP ALL SCHEDULED DR. APPOINTMENTS, TREATMENTS AND MEETINGS
- 9) I MAY BECOME DEPENDENT ON PAIN MEDICINE/NARCOTICS AND EVEN A SMALL RISK OF ADDICTION. I WILL SEE AN ADDICTION EXPERT IF MY DOCTOR FEELS IT NECESSARY. I CAN ALSO CALL THE KENTUCKY HELP CENTER AT 1-833-859-4357. NATIONALLY, I CALL THE SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION AT 1-800-662-4357 24/7,365 DAYS A YEAR.
- 10) IF I STOP TAKING MY PRESCRIBED MEDICATION OR TAKE LESS THAN PRESCRIBED, I COULD EXPERIENCE WITHDRAWAL.
- 11) I WILL BE COMPLIANT WITH BLOOD AND/OR URINE TEST FOR DRUG MONITORING WHEN ASKED BY MY PROVIDER OR WHEN RANDOMLY SELECTED.
- 12) I WILL AVOID THE USE OF ANY MOOD-ALTERING SUBSTANCE, SUCH AS TRANQUILIZERS, SLEEPING PILLS, ALCOHOL OR ILLICIT DRUGS (SUCH AS CANNABIS(POT), COCAINE, HEROIN OR HALLUCINOGENS).
- 13) I WILL EXERCISE COMPLETE HONESTY WITH MY DOCTOR AND ANY OTHER HEALTH CARE PERSONS INVOLVED IN MY PAIN MANAGEMENT, SUCH AS PHARMACISTS, OTHER DOCTORS, EMERGENCY DEPARTMENTS, ETC. IN REPORTING ALL PAIN MEDICATION/NARCOTICS.
- 14) I UNDERSTAND I MAY BE CALLED IN FOR A RANDOM PILL COUNT, FAILURE TO COME IN FOR COUNT COULD BE GROUNDS FOR DISMISSAL.
- 15) WE WILL OBTAIN KASPER REPORTS PER STATE LAW.
- 16) WE WILL CHECK THE STATE PHARMACY BOARD PERIODICALLY TO ENSURE YOU ARE NOT OBTAINING CONTROLLED PRESCRIPTIONS FROM OTHER PROVIDERS OR USING MULTIPLE PHARMACIES.
- 17) FAILURE TO ADHERE TO THIS AGREEMENT COULD JEOPARDIZE MY DOCTOR/PATIENT RELATIONSHIP THUS STOPPING THE PRESCRIBING OF PAIN/NARCOTIC MEDICATIONS AND MAY EVEN RESULT IN MY DISMISSAL FROM THE PRACTICE.

PATIENT SIGNATURE: _____ DATE _____

Printed Name: _____ Date of Birth _____

WITNESS SIGNATURE: _____ DATE _____



HOME BASED DRUG TESTING NOTIFICATION

As a patient who is receiving controlled substance prescriptions from Extended Care House Calls, we will take many precautions to ensure that your treatment is safe and effective. You have already signed a controlled substance agreement that warns you of the risks associated with your pharmacological treatment that includes the necessity to use precautions such as the use of one pharmacy, pill counts when requested and random drug screens.

Over the last several years there have been more regulations put upon Providers who treat patients suffering from chronic conditions. These regulations are designed to protect you and our medical practice and ensure that you have access to the medications we feel are appropriate for you.

Effective May 1, 2018 Extended Care House Calls implemented **Home Based Drug Testing** for all patients to further enhance our medication monitoring and compliance programs. The components of this program include:

1. A call or text message from our laboratory of choice for this service, Cordant Health Solutions, informing you that you have been selected for a drug test.
2. Communication to schedule this test within 48 hours once notified to occur within the home.
3. Other instructions regarding your drug test.
4. You will have 48 hours from the time you are notified to comply with this drug test.

Being selected for a drug test is not an indication that we believe you are not taking your medication. Drug testing is not only recommended but required by the CDC, the Centers for Medicare and Medicaid Services and many other authorities.

Failure to comply with this testing will be interpreted as a "Failed Test" and will be handled that way by our practice. If in the event that you know that you the patient will be unable to comply with the testing, you must communicate with Cordant Health Solutions prior to the expiration of the 48-hour notice and **CALL 1-888-324-4363**. *Exceptions to this time frame will be granted in only the most extenuating circumstances.* By not completing your ordered drug test, Extended Care House Calls reserves the right to no longer prescribe your controlled substance medication.

Thankyou,

Extended Care House Calls

What You Need to Know About Opioid Pain Medicines

This guide is for you! Keep this guide and the Medication Guide that comes with your medicine so you can better understand what you need to know about your opioid pain medicine. Go over this information with your healthcare provider. Then, ask your healthcare provider about anything that you do not understand.

What are opioids?

Opioids are strong prescription medicines that are used to manage severe pain.

What are the serious risks of using opioids?

- Opioids have serious risks of addiction and overdose.
- **Too much opioid medicine in your body can cause your breathing to stop – which could lead to death.** This risk is greater for people taking other medicines that make you feel sleepy or people with sleep apnea.
- **Addiction** is when you crave drugs (like opioid pain medicines) because they make you feel good in some way. You keep taking the drug even though you know it is not a good idea and bad things are happening to you. Addiction is a brain disease that may require ongoing treatment.

Risk Factors for Opioid Abuse:

- You have:
 - » a history of addiction
 - » a family history of addiction
 - You take medicines to treat mental health problems
 - You are under the age of 65 (although anyone can abuse opioid medicines)
- **You can get addicted to opioids even though you take them exactly as prescribed, especially if taken for a long time.**
- If you think you might be addicted, talk to your healthcare provider right away.
 - If you take an opioid medicine for more than a few days, your body becomes physically “dependent.” This is normal and it means your body has gotten used to the medicine. You must taper off the opioid medicine (slowly take less medicine) when you no longer need it to avoid withdrawal symptoms.

How can I take opioid pain medicine safely?

- Tell your healthcare provider about **all** the medicines you are taking, including vitamins, herbal supplements, and other over-the-counter medicines.
- Read the Medication Guide that comes with your prescription.

- Take your opioid medicine exactly as prescribed.
- Do not cut, break, chew, crush, or dissolve your medicine. If you cannot swallow your medicine whole, talk to your healthcare provider.
- When your healthcare provider gives you the prescription, ask:
 - » How long should I take it?
 - » What should I do if I need to taper off the opioid medicine (slowly take less medicine)?
- Call your healthcare provider if the opioid medicine is not controlling your pain. Do not increase the dose on your own.
- **Do not share or give your opioid medicine to anyone else.** Your healthcare provider selected this opioid and the dose just for **you**. A dose that is okay for you could cause an overdose and death for someone else. Also, it is against the law.
 - Store your opioid medicine in a safe place where it cannot be reached by children or stolen by family or visitors to your home. Many teenagers like to experiment with pain medicines. Use a lock-box to keep your opioid medicine safe. Keep track of the amount of medicine you have.
- Do not operate heavy machinery until you know how your opioid medicine affects you. Your opioid medicine can make you sleepy, dizzy, or lightheaded.



What should I avoid taking while I am taking opioids?

Unless prescribed by your healthcare provider, you should avoid taking alcohol or any of the following medicines with an opioid because it may cause you to stop breathing, which can lead to death:

- Alcohol: Do not drink any kind of alcohol while you are taking opioid medicines.
- Benzodiazepines (like Valium or Xanax)
- Muscle relaxants (like Soma or Flexeril)
- Sleep medicines (like Ambien or Lunesta)
- Other prescription opioid medicines

What other options are there to help with my pain?

Opioids are not the only thing that can help you control your pain. Ask your healthcare provider if your pain might be helped with a non-opioid medication, physical therapy, exercise, rest, acupuncture, types of behavioral therapy, or patient self-help techniques.

What is naloxone?

- Naloxone is a medicine that treats opioid overdose. It is sprayed inside your nose or injected into your body.
- Use naloxone if you have it and call 911 or go to the emergency room right away if:
 - You or someone else has taken an opioid medicine and is having trouble breathing, is short of breath, or is unusually sleepy
 - A child has accidentally taken the opioid medicine or you think they might have
- Giving naloxone to a person, even a child, who has not taken an opioid medicine will not hurt them.

Naloxone is never a substitute for emergency medical care. Always call 911 or go to the emergency room if you've used or given naloxone.

Where can I get naloxone?

- There are some naloxone products that are designed for people to use in their home.
- Naloxone is available in pharmacies. Ask your healthcare provider about how you can get naloxone. In some states, you may not need a prescription.
- When you get your naloxone from the pharmacy, read the Patient Information on how to use naloxone and ask the pharmacist if anything is unclear.
- Tell your family about your naloxone and keep it in a place where you or your family can get to it in an emergency.

When you no longer need your opioid medicine, dispose of it as quickly as possible. The Food and Drug Administration recommends that most opioid medicines be promptly flushed down the toilet when no longer needed, unless a drug take-back option is immediately available. A list of the opioid medicines that can be flushed down the toilet is found here: <https://www.fda.gov/drugdisposal>

What things should I know about the specific opioid medicine that I am taking?

- Your healthcare provider has prescribed _____ for you. Read the Medication Guide for this medicine, which is information provided by your pharmacy.
- Remember this other important information about your opioid medicine:

Dosing instructions: _____

Any specific interactions with your medicines: _____

What if I have more questions?

- Read the Medication Guide that comes with your opioid medicine prescription for more specific information about your medicine.
- Talk to your healthcare provider or pharmacist and ask them any questions you may have.
- Visit: www.fda.gov/opioids for more information about opioid medicines.