

## **Foothills Neurology Controlled Substance Policy**

You are being prescribed a medication considered by the Drug Enforcement Agency (DEA) to have moderate to high abuse potential (schedule II or III controlled substance). Controlled substances have a potential to be misused, abused, or diverted to someone other than whom the medicine was prescribed. We have been granted a license by the DEA to prescribe controlled substances to our patients, but we must adhere to certain guidelines. You will be expected to follow our policy. We will not make exceptions for any patient.

**You must take your medication exactly as prescribed.** You will be prescribed an amount of medication that we expect to last one month. If your prescription was written to include refills, each refill is expected to last one month. If you run out of medicine and there are no more refills, you must come in for an appointment to be evaluated for further prescriptions. **DO NOT CALL US FOR REFILLS.** We will not authorize refills by fax or over the phone. You must schedule a follow up visit to discuss your progress and the provider may write another prescription at that time.

**Refills.** Some controlled substances (schedule III) can be refilled at your pharmacy, but we expect each refill to last one month. If a refill is available on your bottle, you may fill it, but it is your responsibility to monitor your use of the medicine. Each refill must last one month. If you are using your medicine faster than this, **do not call us for more**, you need to come in and be seen by a provider to discuss whether a greater quantity, stronger dose or other medicine is needed. If no refills remain on your prescription, **do not call us for more**; you need to schedule a follow up visit to be evaluated for further prescriptions.

**Frequent Visits.** Some controlled substances can not be refilled at your pharmacy; to get more medication you must follow up with a provider and have a new prescription written. This can be accomplished by monthly or more frequent visits. The provider who writes you the prescription will hand you the new prescription. It will not be passed across the front counter. You may be asked to bring your pills to your office visits to be counted. You will need to account for every pill we prescribe.

**Stable Patients.** Occasionally when a patient has demonstrated good compliance and their dose has been stable, follow up visits may be extended to every two months at the discretion of the provider. In this case, two identical prescriptions may be written that will provide enough medication for the next two months. Both prescriptions will be dated the day of the visit. If a change in dosage is required, more frequent visits may be necessary again.

**Special Circumstances.** In rare situations, a patient may not be able to make it for a follow up visit to obtain a new prescription for a controlled substance. In this case, a designated friend or family member may be seen by a provider; a history will be obtained and the prescription written at that time. A visit will be charged and a copay may be applicable. At no time will a prescription for a controlled substance be given to a patient or family member without an evaluation and visit.

**Quantity of Medicine.** Prescriptions for controlled substances will be written for a one month supply. It is anticipated that your prescription will last one month. We will not write a prescription for a three month mail order even if your pharmacy or insurance company allows it.

**Changes in Dosage.** If you are having increased pain and believe more medication is required, you need to schedule a follow up visit to discuss this. If you are having difficulty after hours or on a weekend, you may call the Foothills Neurology doctor on call and discuss what to do. If the provider authorizes an increase in your dosage, remember that you may run out before your next scheduled visit. It is your responsibility to schedule a sooner follow up visit to get a new prescription written. If a provider does not allow an increase in your dosage, do not take more than prescribed.

**Emergency Room Visits.** If you feel your pain is greater than you can handle at home, you may visit a local Urgent Care or Emergency Room. If you visit an UC/ER you must tell them about the controlled substance that you are taking. If an UC/ER provider prescribes you a controlled substance for short term use, you may fill the prescription and use it as prescribed, but you must tell us about this medication at your next scheduled visit. If we feel your condition is worsening despite our recommendations, we may refer you to another office for further treatment.

**Urine Drug Screens.** From time to time you will be asked to provide urine for a urine drug screen. There may be costs associated with each urine drug screen. If you refuse to provide urine when asked, we may not prescribe a controlled substance for you anymore. If you are found to have any other controlled substance in your urine other than what we prescribed or authorized, or if there is any illegal substance (including marijuana), we will not prescribe controlled substances for you any longer and we may discharge you from the practice.

**Lost or Stolen Prescriptions.** You must be responsible for your prescriptions and medication. We can not replace lost or stolen controlled substances. If you feel your prescription or medication has been lost or stolen, we will offer a non-narcotic alternative to last until your next regular visit. If you are concerned about withdrawal symptoms, you can come in for an office visit and we can prescribe you a tapering dose, but we may decide not prescribe controlled substances for you anymore.

**Immediate Discharge.** You will be immediately discharged from the practice if we suspect any of the following behaviors:

1. selling your prescription or medication
2. forging or altering a prescription
3. calling in a prescription or refill for yourself
4. giving your medication to anyone else, including a friend or family member
5. tampering with or attempting to alter a urine drug screen
6. secretly obtaining the same or other controlled substances from other providers