



Patient Name (printed): _____ Date of Birth: _____

Provider Name (printed): _____ Effective Date: _____

Our goal is to provide safe, effective care for all of our patients. The success of treatment is dependent on mutual trust and honesty in the doctor/patient relationship and full agreement and understanding of the risks and benefits of the prescribed treatment. Medications can be used to improve your quality of life and reduce symptoms. Some medications, known as controlled substances, are regulated by federal and/or state laws that aim to control the danger of addiction, abuse, physical or mental harm, the trafficking by illegal means, and the dangers from actions of those who have used the substances. Such drugs may be considered illegal for use without a prescription, but may be legally dispensed under a valid physician's prescription.

Because your treatment may result in the use of one or more of these medications for longer than 30 days, your understanding of the policies, risks, and benefits of this treatment is critical.

The purpose of this agreement is to provide you with the requirements, risks, and benefits for ongoing treatment using controlled substances.

Benefits of Treatment using Controlled Substances

Controlled substances can minimize pain and other symptoms to improve quality of life

Risks of Treatment using Controlled Substances

- Controlled substance medications can have side effects such as constipation, difficulty in thinking, sleepiness, nausea or vomiting, etc.
- Controlled substance medications may make it unsafe to drive or operate machinery.
- Inappropriate use of controlled substances can have adverse effects on breathing which can lead to brain damage or death.
- Combining medications and drugs, such as benzodiazepines, narcotics, and/or alcohol can have additive effects which can also lead to respiratory depression, brain damage or death.
- Sharing or selling prescribed controlled substances may cause serious injury or death to others and is a federal offense.
- Abruptly stopping prescribed controlled substances without your doctor's knowledge may cause serious withdrawal symptoms.
- Controlled substances may cause addiction.
- Controlled substances may lower sex hormones which may affect energy levels, sexual desire, sexual performance and/or fertility.
- In a woman who is pregnant and takes controlled substances, the baby may be harmed.
- Over time, people taking a controlled substance can develop a tolerance to the medication resulting in an increase in dosage in order to reduce symptoms.
- Taking high doses of controlled substances for pain can result in a condition called hyperalgesia where increasing the controlled substance dosage can increase pain.

Patient Behavior Requirements

- A complete treatment history, including all current medications, including herbal remedies, past medical records, past treatments, drug or alcohol use, including marijuana.
- Any new medications or medical conditions and any adverse effects from any of the medications you take in case of a medical emergency must be reported to the provider's office within two business days.
- Use of illegal controlled substances like cocaine, heroin, methamphetamine, etc. is prohibited while taking prescribed controlled substances. As a result, it may be necessary to stop continued use of the controlled substance medication and perhaps terminate the provider/patient relationship.
- Use of alcohol and legally prescribed marijuana while taking prescribed controlled substances is discouraged and may result in dangerous health complications.
- Controlled substances must be taken using the prescribed route and not greater than the prescribed dose and frequency.
- In order to continue therapy, you must consistently keep all appointments, treatments, or consultations as requested by the provider.
- Prescribed controlled substances may not be shared or sold to others.
- Timely cooperation is required for requested urine or blood toxicology screens.
- Controlled substance medications must be kept in a safe and secure place to minimize loss or theft. Stolen medications should be reported to your doctor immediately and you will need to file a police report. It is the discretion of the provider to replace lost or stolen medications.
- For women, if you are planning to become pregnant or learn that you are pregnant, immediately notify your physician.

Provider Requirements

- Your provider is allowed to contact any health care professional, pharmacy, legal or regulatory authority to obtain information about your care.
- Controlled substance therapy requires regular assessment of how the medication is working, any side effects, and how you are taking it.
- Unapproved dose increases, loss or changes to your prescriptions, or failure to follow the agreement may result in termination of the provider/patient relationship.
- Your provider has the right to stop controlled substance prescriptions.
- Your provider may require a random drug screen to insure medications are being used appropriately and illegal medications are not being used.
- It is up to the discretion of your provider if they will prescribe controlled substances in the event you are prescribed controlled substances, such as marijuana or narcotics, from other providers.
- With the awareness of trying to use the least amount of an opioid to help a patient, the number of pills and the absolute dosage for treating pain is ultimately based on the judgment of the prescribing physician.

Prescription Requirements

- Controlled substance prescriptions for the health condition being treated must come from our office, except in an emergency, unless specific authorization is obtained for an exception.
- If it is medically necessary for you to received controlled medications from another office or physician, you must contact our office promptly (next business day) to inform us of this change in your medical condition. All controlled substance must be obtained at the same pharmacy, whenever possible. If there is a change in the pharmacy, you will notify us in writing.
 - Pharmacy Name:_____
 - Pharmacy Address:_____
 - Pharmacy Phone Number:_____
 - Pharmacy Fax Number:_____
- Controlled substance prescriptions may be mailed to the identified pharmacy whenever possible.

Other Instructions

Department specific instructions would go here

I have read and understand this agreement. I have had all my questions answered. By signing this form I give consent for treatment of my symptoms with controlled substance medications. A copy of this agreement will be included in my medical record.

Patient Signature_____

Date:_____

Provider Signature_____

Date:_____