



CONTROLLED SUBSTANCE AND OPIOID EDUCATION MODULE

Controlled substance education is an important and a necessary requirement to be a patient in the Symptom Medicine clinic. To obtain prescriptions for controlled substance, you will be required to disclose all of the pharmacies and physicians you receive prescriptions from. Furthermore a PAR form will be completed. (<http://ag.ca.gov/bne/pdfs/BNE1176.pdf>), and you may be required to undergo random toxicology screening. In some instances it will be required to inform the local and state authorities of misuse or illegal use of controlled substances. Please read the pamphlet completely. If you have any questions, please bring them to your clinic appointment so that they may be reviewed with you. Your acknowledgment of completing the education module will be recorded on-line, in clinic policies forms, and/or the opioid contract.

What are controlled substances?

A federally controlled substance is a drug or chemical substance whose possession, distribution (including prescriptions) and use are regulated under the DEA Controlled Substances Act, Title 21, Chapter 13. The ones Symptom Medicine is most concerned about are DEA Controlled Substances, Class 11, Class 111 and Class 1V. These substances have moderate to high potential for abuse, dependence and diversion. They include, but are not limited to opioids, benzodiazepines, tranquilizers, hypnotics, mood stabilizers, muscle relaxants, and barbiturates. They are manufactured for legitimate medical use; however, these particular substances are subject to abuse and diversion. The illegal importation, manufacture, distribution, possession and improper use of controlled substances, not only have a substantial and detrimental effect on the health and general welfare of individuals and society, it is against the law. In some instances Symptom Medicine will be required to inform the local and state authorities of misuse or illegal use of controlled substances. In addition, California has rules and regulations regarding controlled substances and prescription medications. For more information may be found at <http://www.justice.gov/dea/pubs/csa.html>, www.deadiversion.usdoj.gov, and <http://www.justice.gov/dea/pubs/scheduling.html>, <http://ag.ca.gov/bne/cures.php>. Also read the California Health & Safety Codes. Here are some HS codes that may be helpful to you-- 11550, 11470, 11351.5, 11352, 11355, 11359, 11360, 11378, 11378.5, 11379, 11379.5, 11379.6, 11380, 11842-11845.5.

Opioid narcotics, antipsychotics, mood stabilizers, anxiolytics, anti-depressants, hypnotics, and muscle relaxants are considered pharmaceutical controlled substances that can affect any part of the body. Some of these drugs can be used therapeutically to manage pain, induce anesthesia, reduce anxiety and treat depression. You need to know, they can alter cardio-respiratory system, central nervous system resulting in changes in perception, brain function, coordination, mood, consciousness, cardio-respiratory function, neuro-muscular function and/or behavior. The negative effects can be life threatening. Therefore, it is imperative to take your medications only as directed and report any side effects immediately. It is important to follow directions and be aware of the following when you are taking a controlled substance prescribed by your physician.

1. Do not drive a motor vehicle, operate any machinery, work at elevated heights, or care for others when you are taking controlled substances.
2. It can take 1-4 weeks for your body to adjust to a new medication.
3. Even though you may feel capable of regular activity, operating machinery, caring for others, and so forth, remember, if someone is injured, you may be held accountable for your actions or ill harm to others while "under the influence" of drugs or controlled substances.
4. . You must only use prescribed medications as directed by your physician.

CONTROLLED SUBSTANCE AND OPIOID EDUCATION MODULE

5. You may not share, sell or give away your prescribed medications
6. If you have any side effects, you must report them immediately.
7. Information may need to be exchanged between governmental agencies, your pharmacies and/or your health care providers regarding your controlled substances prescriptions and use.

What are examples of controlled substances?

Analgesics: opioids, NSAIDs (Motrin, Advil, Naproxen, Naprosyn, etc.), aspirin, acetaminophen, local anesthetics, muscle relaxants, anesthesia, 5HT1 agonists. Anticonvulsants: carbamazepine, clozapam, gabapentin, lamotrigine, levetiracetam, oxcarbazepine, ethosuximide, Phenobarbital, VPA, topiramate. Anxiolytics, Hypnotics and sedatives: benzodiazepines, thiopental, protocol, ketamine. Mood stabilizers and anti-depressants: heterocyclic compounds, MAOIs, SSRIs, anti-manic agents, D2 antagonists. Muscle relaxants- baclofen, carisoprodol, cyclobenzaprine, tizanidine, methocarbamol, diazepam.

What is an opioid?

An opioid is 1. any synthetic narcotic that has an opiate-like activity but is not derived from opium, 2. any narcotic having an effect similar to natural opium alkaloids and their derivatives, 3. Any member of a group of naturally occurring peptides, e.g., enkephalins, which bind at or influence opiate receptors that in the body, 4. any substance that has an opiate-like or opiate antagonist effects. Opioids and opiate are sometimes used interchangeably.

What is an opiate?

An opiate is 1. any natural opium or semi-synthetic opiate morphine that produces the same effects as drugs derived from the opium poppy. 2. Any narcotic analgesic derived from a natural source, such as morphine from the opium poppy. 3. A drug, hormone, or other chemical substance that has sedative or narcotic effects similar to those containing opium or its derivatives. Opioids and opiate are sometimes used interchangeably.

What are examples of narcotic opioids?

Natural opiates: alkaloids contained in the resin of the opium poppy, primarily morphine, and codeine. Semi-synthetic opioids: hydromorphone, hydrocodone, oxycodone, oxymorphone, diacetylmorphine (heroin). Synthetic opioids: fentanyl, methadone, tramadol and dextropropoxyphene. Endogenous opioid peptides, produced naturally in the body: endorphins, enkephalins, dynorphins, and endomorphins.

How and why of opioids

Opioids and other controlled substances are invaluable in [palliative care](#), symptom management, pain medicine and hospice. They can help decrease the suffering of terminal conditions such as cancer, and chronic non-malignant pain conditions like degenerative arthritis. Opioids exert their effect in the brain, spinal cord and the gastrointestinal tract. They do not take the pain away. Opioids affect the nervous system by slowing down the messages between the brain and the body. Because they have a profound effect on the cardio-pulmonary system, if not used properly, they can lead to death.

The reason they are used is because they can decrease the perception of pain, the response to pain, and the transmission of pain messages to the brain. However, they have not been very effective in neuropathic pain. In some instances, opioid can increase pain or not provide satisfactory relief. Being a depressant, opioids are not used for depression, sedation or anxiety because they are ineffective agents for issues such as these. Also of importance is behavioral medicine, complementary and alternative medicine techniques. They can help decrease pain, anxiety, and other symptoms which can enhance the patient's quality of life.

Managing pain and symptoms; but, all the while minimizing diversion, misuse and addictive behavior are the main goals of therapy. Opioids are safe when they are used correctly and can provide effective pain reduction. Behavioral intervention, patient evaluations, patient education and medication monitoring are

CONTROLLED SUBSTANCE AND OPIOID EDUCATION MODULE

required for any controlled substance prescription and clinic participation. Thus, open and honest communication, proper use of opioids, meticulous documentation and accountability amongst patient, caretakers, physicians, and pharmacists are the strongest prescription for proper use. Symptom Medicine aims to ensure that the benefits of using opioids and controlled substances drugs outweigh the risks of inappropriately prescribed drugs, abuse, misuse, and overdose of the drugs

What is Safe Medication Use?

If opioid and controlled substances are not taken and used as directed, dangerous side effects or even death may result. Controlled substances may be habit-forming and are at risk for aberrant drug related behavior. This is especially true, when alcohol, illicit drugs and other medications are taken in combination with them. The following rules apply to all of your prescription medications:

1. Medications are only to be used by the person it was prescribed for.
2. Medications are only to be taken as directed.
3. Medications are never to be given or shared with another person.
4. Medications are to be kept in a secure place.
5. Do not take any medications, unless it has been prescribed by your physician.
6. Do not start using a new opioid or controlled substance medication without telling your doctor at Symptom Medicine and PCP. This includes vitamins, minerals, over the counter medications, and herbal products.
7. Do not drink alcohol, use recreational or illicit drugs while you are taking controlled substances and/or opioids.
8. Disclose to your physician all prescription, recreational and illicit substances and over the counter medications that you take
9. You must disclose how much alcohol you drink per day.
10. Tell your doctor if the medicine seems to stop working and to what extent
11. Keep track of all of your medications. They will not be refilled early or replaced
12. Do not drive, operate machinery, work at elevated heights, or care for others when you are taking controlled substances or/and opioid medications.
13. Do not stop taking an opioid suddenly; it can result in withdrawal symptoms.
14. Inform your doctor at once if you have any of side effects.
15. Get emergency medical help if you have an allergic reaction- hives; difficulty breathing; swelling of your face, lips, tongue, or throat.
16. Inform your physician if you plan on becoming pregnant or become pregnant.
17. Notify your all of your physicians of any changes in your health status or medication regime.
18. Only take medications as prescribed
19. Never take more medication than prescribed

Can I do while taking controlled substances?

It is important to note the following when you are taking a controlled substance prescribed by your physician.

1. Do not drive a motor vehicle, operate any machinery, work at elevated heights, or care for others when you are taking controlled substances.
2. It can take 1-4 weeks for your body to adjust to a new medication.
3. Even though you may feel capable of regular activity, operating machinery, caring for others, and so forth. Remember, if someone is injured, you may be held accountable for your actions or ill harm to others while "under the influence" of drugs or controlled substances.
4. You must only use prescribed medications as directed by your physician.
5. Information may need to be exchanged between governmental agencies, your pharmacies and/or your health care providers regarding your controlled substances prescriptions and use.

What are some other side effects that could mean the discontinuation of controlled substances?

Respiratory depression, anxiety, over sedation, hallucinations, delirium, urticaria, psychosis, suicidal ideation,

CONTROLLED SUBSTANCE AND OPIOID EDUCATION MODULE

allergic reaction, decreased libido, inability to urinate, abdominal pain, muscle rigidity, myoclonus, pregnancy, intent to become pregnant, immune system, bleeding, cardio-vascular instability, decrease the proliferation of macrophage, lymphocytes, seizures, respiratory failure, coma.

Other circumstances that will result in the discontinuation of controlled substance prescriptions include, but are not limited to overdose, improper use, improper acquisition, selling, drug seeking behavior, violence or aggression, frequent ER visits, multiply requests from one or more physicians for controlled substance, diversion, frequent requests for medications from the Clinic, and so forth.

For females-- birth defects can occur are a potential with any pregnancy while you are on medications or on no medications at all. They cannot be pre-determined. Even though opioids are not known to cause birth defects, they can cause addiction in a fetus and withdrawal symptoms in a newborn. Furthermore, opioids can pass into breast milk and may harm a nursing baby. It is your obligation to tell your doctor if you plan a pregnancy or become pregnant during any medical treatment. You will be required to see a physician who specialized in maternal-child health, an obstetrician if you plan on a pregnancy or become pregnant. Do not use opioids without telling your doctor if you are breast-feeding a baby. Because of the potential harm on a fetus, I will need to be on some type of birth control method during my treatment at Symptom Medicine. Your physician may need periodic pregnancy screening for opioid prescriptions. If you intend on planned pregnancy or become pregnant, you must notify the clinic as soon as possible.

For Males—opioids can decrease testosterone levels. A decrease in testosterone can affect my sexual drive, mood, and physical performance. I understand that my doctor may monitor my testosterone levels.

What are drug interactions and other substances?

Drug can act differently when they are combined with other medications, drugs or alcohol. When taking medications together, they can affect each other in different ways. Some interactions are harmless, while others can be life threatening. The drugs can both act stronger or both act weaker, one drug can become one weaker and the other become stronger, one drug can make the other drug to stop working, each drug can counteract each other, either drug can even have an unplanned or unknown effect, either drug can change the way the body works.

Thus it is very important to inform your physician of all of the prescriptions and over-the-counter medications you are taking, how much alcohol you drink, and any recreational drugs you use; plus inform your physician of any drug and food allergies you have. Some examples of medications you need to notify your doctor that you are taking-- isocarboxazid (Marplan), phenelzine (Nardil), rasagiline (Azilect), selegiline (Eldepryl, Emsam), or tranylcypromine (Parnate), pentazocine (Talwin), nalbuphine (Nubain), butorphanol (Stadol), or buprenorphine (Buprenex, Subutex), meperidine (Demerol). Also important, tell your doctor if you are taking any medication you take for heart problems, asthma, lung problems, kidney disease. It is important to notify your all of your physicians of any changes in your health status or medication regime.

More important information while you are taking controlled substance

1. unless specifically prescribed by your physician do not take this medicine with other narcotic pain medications, sedatives, tranquilizers, sleeping medications, muscle relaxants, or other medicines that can make you sleepy, slow your thinking or physical response to situations, relax you or slow your breathing.
2. Do not use alcohol or recreational drugs while taking any of these medications.
3. Only take medications as prescribed.
3. Patient Activity Report (PAR) form will be sent to the State of California
4. Notify your all of your physicians of any changes in your health status or medication regime.

Because some drugs require specific level, affect the way your body, you may need dosage adjustments or special tests during treatment.

CONTROLLED SUBSTANCE AND OPIOID EDUCATION MODULE

5. Finally urine and blood toxicology screening may be necessary while receiving opioid and controlled substance prescriptions.

What is your medical history?

Before using opioids or controlled substance, your doctor needs to know your medical history and all the medications that you take. You may need dosage adjustments and special tests during treatment. Notify your all of your physicians if you have any of the following...

- Addison's disease or other adrenal gland disorders
- Allergies to any medications, food and other substances
- Anxiety
- Cancer
- Depression
- Diabetes
- Difficulty breathing, i.e. asthma, COPD, sleep apnea, or other breathing problems
- Dizziness or fainting
- Enlarged prostate, urination problems
- Epilepsy or other seizure disorder
- Gallbladder, kidney, pancreas or liver disease
- History of head injury or brain tumor
- History of heart disease
- History of recreational drug use or alcohol addiction
- Irregular heart rate or large heart
- Kidney stones
- Low or high blood pressure
- Mental illness
- Nuero-muscular or bone disorders
- Thyroid problems

Notify your all of your physicians of any changes in your health status or medication regime. Do not use alcohol or recreational drugs while taking any of these medications. Only take medications as prescribed. Because some drugs require specific level, affect the way your body functions, you may need dosage adjustments or special tests during treatment. Finally urine and blood toxicology screening may be necessary while receiving opioid and controlled substance prescriptions.

What are the common side effects?--

Common side effects of opioids: drowsiness, sleepiness, decreased response, decreased reflexes, dizziness, nausea, vomiting, constipation, diarrhea, euphoria, dilated pupils, cough suppression, dry mouth, itching, headache, anxiety, warmth, memory problems, sleep problems, insomnia, confusion, changes in hear rate, gastric stasis, decrease of blood pressure, reduced libido reduced coordination, hypothermia, slurred and slow speech and flushing of skin

How are side effects and drugs monitored?

1. Communication between patient and all health care providers
2. Notify your all of your physicians of any changes in your health status or medication regime
3. Notify your physician if you have any side effects
4. Notify your physician if the medication stops working or is too strong
5. Most side effects can be managed successfully.
6. With proper dosing, monitoring and use, severe side effects are rare. However, sometimes it is necessary to decrease your dose or discontinue opioids or controlled substances altogether.
7. Because some drugs require specific level, affect the way your body functions, you may need dosage adjustments or special tests during treatment

CONTROLLED SUBSTANCE AND OPIOID EDUCATION MODULE

8. Patient Activity Report (PAR) is obtained from the State of California.
9. Because some drugs require specific level, affect the way your body, you may need dosage adjustments or special tests during treatment
10. Urine and blood toxicology screening may be necessary while receiving opioid and controlled substance prescriptions

What are some of the terms for me to obtain controlled substance prescriptions?

DEA controlled substances Class 11 and Class 111 prescriptions will be only for a two to four week supply and will not be post dated or refilled early. Prescriptions will not be mailed. Prescriptions will only be given if you have been seen and evaluated by a physician, are taking your medications as directed displaying a beneficial effect, and having tolerable side effects.

1. Patient Activity Report (PAR) is obtained from the State of California.
2. Because some drugs require specific level, affect the way your body, you may need dosage adjustments or special tests during treatment
3. Urine and blood toxicology screening may be necessary while receiving opioid and controlled substance prescriptions
4. DEA controlled substances Class 11 and Class 111 prescriptions will be only for a two to four week supply and will not be post dated or refilled early.
5. Prescriptions will not be mailed.
6. Prescriptions will only be given if you have been seen and evaluated by a physician, are taking your medications as directed displaying a beneficial effect, and having tolerable side effects
7. In addition, to obtain controlled substance prescriptions, you will be required to disclose all of the pharmacies and physicians you receive your prescriptions from, complete a PAR form, and may be required to undergo toxicology screening.
8. In some instances Symptom Medicine will be required to inform the local and state authorities of misuse or illegal use of controlled substances.
9. Another point, you must always be under the care of Primary Care Physician (PCP,) and your referring physician and primary care physician must be in agreement with your care and medication regime at Symptom medicine
10. Sign all clinic policies, terms, and sign an substance and opioid contract
11. Undergo a evaluation by a behavioral Medicine with expertise in pain

What are examples of why I may no longer get RX?

In addition, to obtain controlled substance prescriptions, you will be required to disclose all of the pharmacies and physicians you receive your prescriptions from, complete a PAR form, and may be required to undergo toxicology screening. In some instances Symptom Medicine will be required to inform the local and state authorities of misuse or illegal use of controlled substances. Another point, you must always be under the care of Primary Care Physician (PCP,) and your referring physician and primary care physician must be in agreement with your care and medication regime at Symptom medicine

Any violation of this contract is grounds for discharge from Symptom Medicine Clinic. If it necessary to discharge you, the patient from the clinic, you will be referred back to PCP for the continuation of care, if SXM is prescribing any medications you may be given a one month's supply, a 30 day written notice and a list of pain specialists in the community. Be aware that

Circumstances that will result in the discontinuation of all controlled substance prescriptions and discharge from the clinic include, but are not limited to overdose, improper use, improper acquisition, selling, drug seeking behavior, violence or aggression, frequent ER visits, frequent clinic calls for early or additional controlled substance prescriptions. Multiply requests from one or more physicians for controlled substance, diversion, obtaining multiple prescriptions from different providers and so forth. In some instances it will be required to inform the local and state authorities of misuse or illegal use of controlled substances

CONTROLLED SUBSTANCE AND OPIOID EDUCATION MODULE

What is Tolerance?

Opioid and some controlled substances may result in a tolerance. This means that higher doses of the drug are needed to obtain similar effects. In addition, tolerance occurs to some of the physical side effects, intended effect, namely mood, itching, urinary retention, and respiratory depression. However, tolerance does not develop to constipation or miosis. All opioids and some controlled substances have the potential for tolerance. Failure to respond to opioids may be second to tolerance. Thus your physician may discontinue our opioid and choose another form of treatment or medication

What is dependence?

Physical dependence is physical adaption to medications that develops with ongoing administration of opioids and some controlled substances. It is a normal and expected process. It can be characterized by withdrawal symptoms that occur when a drug is abruptly discontinued or rapidly decreased after tolerance has developed. With opioids it is not life threatening, just uncomfortable. However, the sudden withdrawal of some medications can cause seizures, mood alterations and may be life threatening

What is Addiction?

Addiction is the process whereby physical and/or psychological dependence develops to a drug - including opioids, and the drug continues to be used even in light of its harm. It is characterized by behaviors that include one or more of the following impaired control over drug use, compulsive use, continued use despite harm, and craving. When opioids and controlled substances are used and monitored properly, addiction is rare

What is Withdrawal?

Never alter the prescribed dosage or stop an opioid without the treating physician's knowledge and advice. Withdrawal symptoms appear when drug usage is rapidly reduced or abruptly stopped. The withdrawal symptoms include severe dysphoria, sweating, rhinorea, diarrhea, depression, fatigue, vomiting, restlessness, moodiness, insomnia, yawning, abdominal cramps, diarrhea and goose bumps nausea, vomiting, stomach pain, loss of appetite; seizures, death. Slowly reducing the intake of opioids or controlled substance over weeks will reduce or eliminate the withdrawal symptoms. The acute withdrawal phase is often followed by a protracted phase of depression and insomnia that can last for months.