



INFORMATION FOR PATIENTS WITH PERSISTENT or CHRONIC PAIN

You, as a patient, have a right to a comprehensive assessment of your persistent pain including physical, mental, behavioral health and alcohol and drug assessment. We have learned new information from scientific studies about the safety and efficacy of narcotic analgesics in the treatment of chronic pain.

1. Opiates may not be effective for chronic pain in the long term.
2. **Opiates cause significant harm and increase the risk of death. High doses of opiates are particularly dangerous.**
3. Opiate may lead to addiction and use of illegal drugs such as heroin, cocaine, and methamphetamines.
4. Opiates also increase the risk of falling, cause loss of function and motivation, and dental problems.
5. Overall, Oregon as a state has one of the highest incidences of prescription opiate deaths.

Our highest priority is YOUR SAFETY. Therefore, it is important for you to know, you will NOT receive prescriptions for narcotic pain medications on the initial visit. It will take 6-12 weeks to determine whether narcotic pain medications are recommended as part of your treatment plan.

The goal of treatment is to help you function better and do more of the things that you would like to be doing. Since medicine will not make all the pain go away, it is important for you to learn what other things you can do to improve your pain. With or without medication, chronic pain only improves in small steps and with continued effort.

Although we may prescribe opioid (narcotic) pain medicine as part of the overall treatment plan, some types of pain are improved with these medicines but many are not. **For example, narcotic pain medications are not recommended for most types of back and neck pain, chronic headaches, migraine headaches, and fibromyalgia.**

We have a new policy to help assure that we are providing you with the safest and most effective treatment.

- **There are some medications we do not prescribe for New Patients.** These include **Methadone, Long-Acting Oxycodone (Oxycontin®), Fentanyl (Duragesic®), Tramadol (Ultram®), Alprazolam (Xanax®), Promethazine (Phenergan®), Propoxyphene/Acetaminophen (Darvocet®), and Carisoprodol (Soma®).**
- **We do not prescribe benzodiazepines**(tranquilizers/sleep aids such as Lorazepam (Ativan®), Diazepam (Valium®), Alprazolam (Xanax®), Clonazepam (Klonopin®), Temazepam (Restoril®), and others **and narcotics at the same time.** Narcotics by themselves may cause respiratory depression (difficulty breathing) and death. Narcotics taken with tranquilizers (listed above) increase the risk of respiratory depression (difficult breathing) and death.
- **We do not prescribe stimulants such as Ritalin® and narcotics at the same time.**
- **We do not allow you to use both medical marijuana and narcotics at the same time.**
- **If narcotic pain medication is recommended, there is maximum dose that may be prescribed.**

Your provider has an obligation to provide compassionate, appropriate and safe care for you. We will provide this care within the guidelines of federal and state regulations for prescribing controlled substances and within the Virginia Garcia Memorial Health Center Guidelines for Managing Patients with Chronic or Persistent Pain. We will use clinic visits to set realistic goals for things you want to do and help you to figure out ways to accomplish them.

EXPECTATIONS OF NEW PATIENTS REQUESTING NARCOTIC PAIN MEDICATIONS

- We will ask you to sign a release to obtain all medical records from previous providers including primary care, specialists, imaging reports, mental health, and drug and alcohol treatment before prescribing opiate medications.
- You must agree to an evaluation by our behavioral health provider. This generally requires at least 3 visits and must occur prior to our multidisciplinary committee's review. This will include:
 - A complete history of your chronic pain, functional impairment, treatments tried, and current expectations around pain management.
 - Assessment for depression
 - Assessment of your risk of becoming addicted to narcotic medications.
- You must agree to a urine and/or blood screen for drugs, opiates, drugs of abuse and alcohol before beginning treatment and, on request, during the time you are receiving treatment.
- Based on Virginia Garcia's policy, a multi-disciplinary committee will make the determination of whether narcotic pain medication is an appropriate option for you in treating your chronic pain and can be prescribed safely. If the committee recommends treating you with narcotic pain medication, then
 - You must read carefully and sign a detailed consent for treatment with narcotics. We will give you a copy for your records.
 - You must sign an agreement about your behavior regarding telephone calls and respectful communication.
 - You must agree to bring your medications to each visit so that we may count the number of narcotic pills remaining in your bottle(s).
 - You must agree to complete a series of group classes designed to help you understand and manage your pain, if recommended by our behavioral health provider.
 - You must agree to other specialty evaluation if felt to be indicated by your provider.

Please read your Rights and Responsibilities on the reverse side and the following page

PATIENTS RIGHTS

1. Be treated with dignity and respect
2. Get timely attention to your health care needs in the language you speak
3. Have your health information be confidential
4. Get information about health conditions, including treatment options, benefits, risks and costs when it comes to your care, including treatment of pain
5. Make decisions about your provider's recommendations, and ask questions about anything you do not understand.
6. Be billed at a cost based on your family size and income, and arrange payment plans as needed
7. Express concerns and opinions to staff and get feedback about any expressed concerns
8. Get information about the clinic's owners, license, funding and operations.

Additional Rights for Patients Requesting Treatment for Persistent Pain:

9. Receive a thorough assessment and management of complaints of pain
10. Receive full disclosure of diagnosis and prognosis of condition, proposed treatments and their benefits, risks and costs
11. Participate fully in decisions about pain management, including the right to refuse specific treatments

PATIENT RESPONSIBILITIES

1. Build and maintain a partnership with your provider and clinic staff based on trust, cooperation, and open communication.
2. Choose one provider for most of your medical care.
3. Treat clinic staff with dignity and respect
4. Live a healthy lifestyle and lower your health risks
5. Play a part in planning your care, ask questions, and share concerns when you do not understand or agree with your provider's care recommendations
6. Keep appointments and call ahead at least 24 hours if your need to cancel or change an appointment
7. Pay for the services you receive.

Additional Responsibility for Patients Requesting Treatment for Persistent Pain:

8. Read, understand, and adhere to the medication contract which will include behavioral expectations. Keep a copy of the contract.
9. Fill out a complete medical history, including a history of specific evaluations, treatments and expectations for relief of persistent pain.
10. Refrain from alcohol and illicit drug use and misuse
11. Disclose all alcohol or drug use/misuse currently and/or in the past
12. Report all visits to the emergency department, to other providers, and to mental health providers
13. If on probation or parole, sign a release of information to permit communication with probation or parole officer.
14. Adhere to the schedule of refills and dosing for medications for pain agreed upon with your provider.
15. Bring all of your medications to each appointment and agree to pill counts
16. Agree to random urine and blood tests for drugs—controlled drugs and drugs of abuse.
17. Refrain from giving pain medications to others or borrowing pain medications from others
18. Obtain pain medication and other controlled substances prescriptions only from your primary care provider or the covering provider at your clinic site.