



Emergency Department Guidelines to Reduce Prescription Drug Abuse

Guidelines created in collaboration with the Quality Collaborative of Northeast Florida and the Rational Prescribing of Controlled Substances Working Group.

THE PROBLEM:

According to The Centers for Disease Control and Prevention, abuse of prescription painkillers is an epidemic in the U.S. Substance dependence, abuse and misuse are especially prevalent in Florida. On average, 7 Florida residents die each day from prescription overdoses. Our emergency department staff understands that pain relief is important when someone is hurt or needs emergency care. However, providing pain relief often is complex. Mistakes or misuse of pain medication can cause serious health problems or even death. Our emergency department will only provide you with the pain treatment that we feel is safe and appropriate.

THE GUIDELINES:

In order to provide you the safest, most effective and up-to-date medical care possible, Lee Memorial Health System and 15 other Florida institutions have adopted guidelines for prescribing pain medication in the emergency department (ED). Our intent is to raise awareness of a growing problem within our community and aim to reduce chemical dependence, addiction, abuse and drug diversion in Southwest Florida.

1. We strive to coordinate the care of patients with chronic or recurrent pain conditions with primary care and specialist doctors.

Management of chronic or recurrent pain is best accomplished by a single primary care provider or pain management specialist. Following your individualized care plan will optimize your treatment, while avoiding overuse of medications associated with abuse or addiction.

2. One doctor should prescribe all your narcotic or controlled medications.

We may prescribe narcotic pain medications on your first ED visit for an acutely painful condition. If you have already received a narcotic pain medication from another doctor or ED, we will treat your pain with non-narcotic pain medications.

3. Certain chronic and recurrent pain conditions may not be adequately treated using narcotic medications as a mainstay of treatment.

Many non-narcotic medications are useful in treating chronic pain. For chronic or recurrent pain, we avoid prescribing or administering many narcotic medications, such as Dilaudid, Demerol, morphine, Oxycontin, Vicodin and Percocet. These drugs are known to have the highest rates of abuse and addiction and may not be effective in many chronic pain conditions.

4. We will treat worsening of chronic or recurrent pain conditions with non-narcotic medications or we will prescribe pain medication with a lower risk of addiction and misuse when possible. We may only provide enough pain medication to last until you can contact your doctor.

5. We may access information about a patient's controlled substance prescription history from Florida's Prescription Drug Monitoring Program.

We may ask you about a history of pain medication misuse or substance abuse and may use additional information, such as urine drug testing when deciding your pain treatment. This helps us understand if you have received controlled substances from multiple physicians and can help prevent serious interactions with other medications you might be taking. These measures help us to determine a more appropriate approach to your pain treatment.

6. Prescriptions for controlled medications may only be given to patients who present a valid, government-issued photo identification.

Before you receive a controlled medication prescription, you may be asked to show a government-issued photo ID, such as a driver's license. This is generally required for ED registration and pharmacies in order to improve patient safety.

7. We will not replace lost or stolen prescriptions for controlled medications.

Pain specialists routinely state in pain management contracts with patients that lost or stolen controlled substances will not be replaced. Unfortunately, patients misusing controlled substances frequently report their prescriptions were lost or stolen.

8. We will not prescribe or administer missed doses of methadone.

We will not provide replacement doses of methadone for patients who have missed a dose.