SAMPLE: Written Policy for Physicians as required for the "Qualifying Opioid Patient"

The appropriate management of chronic pain should rely primarily on non-opioid therapies and should incorporate a multi-model treatment plan to obtain the best outcome for the patient. We utilize non-opioid therapies such as adjuvant medications, psychological assessments, physical therapy, manipulative therapy and other modalities for our patients.

We support the CDC position that opioids are not recommended for routine use in chronic pain but that they can be helpful in those patients with moderate to severe pain unrelieved by other treatment modalities.

At regular three month intervals the "qualifying opioid patient" is evaluated and a physical examination is performed. The course of the treatment is reviewed as well as any new information on the etiology of the pain. The progress of the patient toward treatment objectives is evaluated and documented. Discussion of other treatment modalities are addressed.

Periodically, reasonable efforts are made to possibly change therapy or reduce the opioid dose. At times, it may be clinically contraindicated to reduce the opioid dose or eliminate the opioid. We realize that opioids have risks that require vigilance to identify patients with Opioid Use Disorder, addiction and diversion. We rely heavily on risk mitigation strategies to achieve the best outcomes and safety for our patients. These risk mitigation strategies include, but are not limited to, urine drug screening, pill counts, PMP queries and risk assessments.
Through the utilization of the signed Patient-Provider Agreement we educate our patients on their personal responsibility to be compliant with their medication therapy and require that they read the Agreement in full and ask any questions they may have.
Our physicians realize we have an obligation to refer patients for the appropriate treatment when we are concerned that a patient exhibits behaviors consistent with abuse and addiction.

Adopted: [Date] _____

Signature: _____

[Print Practitioner Name]