

Prescribing Controlled Dangerous Substances and Pain Management

The Board expects physicians to provide competent, compassionate pain management services, to practice medicine, and to document this good practice.

A thorough, in person evaluation should occur including history, assessment of both physical and psychological status, co-existing conditions, history of substance abuse, nature, severity and frequency of pain, diagnosis, treatment plan and follow up care. Since there is the potential for abuse or dependence when prescribing CDS, the dosage limits are 120 or a 30 day supply (whichever is less), unless the patient has pain associated with Cancer, intractable pain (defined as pain refractory or resistant to management with standard methods of treatment or for which insufficient relief has been found after reasonable efforts), or a terminal illness (defined as a prognosis of less than one year of life). Even though you can order more than the usual 120 dosage limit on a prescription, you still cannot write for more than a 30 day supply at one time. It's not acceptable practice to write postdated prescriptions on the same day to be filled at future monthly intervals. You may write one CDS prescription per prescription blank, and must write words in addition to numbers (2 and two).

You will need to develop and document a treatment plan, including a diagnostic work up. Your plan should include consideration of past present and contemplated treatments with the objectives of, for example, pain relief, increased physical and/or psychological functioning. The risks and side effects of particular CDS should be discussed, along with the benefits and clear goals for treatment. You should also research and discuss alternative treatment available including non-CDS treatments. Unless it's clinically contraindicated, reasonable efforts should be made to taper, stop or reduce CDS use, or to try other treatments or drugs. Referring your patient for independent evaluation, and/or consultation with a pain management specialist or addiction medicine specialist can be part of your treatment plan. And you should always keep in mind the potential for misuse or diversion when prescribing CDS.

You must document the reevaluation of your patient at least every 3 months if you continuously prescribe CDS for 3 months or more.

It's recommended that you read The Federation of State Medical Boards publication "Responsible Prescribing of Controlled Dangerous Substances".

Lost or stolen prescription blank(s) must be reported immediately to the Office of Drug Control Enforcement at the Division of Consumer Affairs' office in Newark. Their phone number is 973-504-6558. You also should consider reporting the incident to your local police authorities.