

Accurate Clinic

2401 Veterans Memorial Blvd. Suite16 Kenner, LA 70062 - 4799 Phone: 504.472.6130 Fax: 504.472.6128

www.AccurateClinic.com

Opioid medications prescribed in this clinic for chronic pain include such medications as: tramadol, codeine, hydrocodone, oxycodone, hydromorphone, oxymorphone, morphine, methadone, fentanyl, tapentadol and buprenorphine as well as others.

Goals for taking opioid medications:

Maintain adequate pain relief to allow for activities of daily living including those activities necessary to meet the patient's social, domestic and employment needs.

Proposed duration of use:

Indefinite, to be determined by your pain doctor based on your medical condition and response to treatment.

Conditions of chronic opioid management:

• Successful pain management entails employing multiple interventions, including active participation in a home exercise program and the use of psychological coping strategies. A pattern of passive reliance on medications, resistance to physical treatments, and/or repeated failure to demonstrate the implementation of psychologically based coping strategies that have been taught to you may lead to discontinuation of opioid medications and/or referral to another provider or treatment center.

• Coordination of care between your pain management physician and other physicians managing your other medical conditions is important for your safety, especially regarding medication management. You agree to provide consent for allowing your pain management physician to share your pain management information with your other managing physicians.

• Drug testing and other policies as described in the "Controlled Substances Agreement."

Risks and considerations of chronic opioid management:

The use of opioids may lead to addiction in susceptible individuals, particularly those with a past history or family history of substance abuse and/or alcoholism. While it has been determined that the actual incidence of precipitating opioid addiction with chronic opioid pain management is in fact very low, it remains a potential risk which must be understood when deciding to use opioids for chronic pain management.

Physical dependence will develop with regular use, but does not by itself indicate addiction. Physical dependence means that a withdrawal syndrome will develop if you stop or suddenly reduce the dose of your opioid medication abruptly. The typical withdrawal syndrome from opioids includes restlessness, vomiting, diarrhea, muscle aches and severe malaise. Tolerance may develop to the pain-relieving effects of opioids which means that your pain relief from opioids may decrease over time. Tolerance to opioids in chronic pain usually occurs slowly, if at all. Not all pain conditions respond to opioids. Some pain may only be partially responsive to opioid therapy. Total elimination of pain is an unrealistic goal and is discouraged as a goal. Escalating dosages may indicate that opioids are not effective, or even possibly contributing to increased pain (Opiate Induced Hyperalgesia), or that there is an underlying problem with addiction or substance abuse.

Opioids may compromise your judgement or cause drowsiness that can be worsened if taken with alcohol, benzodiazepines, or other medications such as those prescribed for anxiety, depression, muscle spasm or sleep. Over-the-counter medications, especially antihistamines, can also interact with opioids and cause excessive drowsiness and/or altered judgement. Use caution when driving or



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operating machinery when taking opioids. The safety of taking opioids for pain and/or other medications prescribed for muscle spasm, anxiety, depression and/or sleep has not been well established in regards to driving and operating machinery. As such, it is recommended that whenever a patient starts a new medication or changes the dosage of an existing medication, the patient assess the medication's effect on their alertness, judgement, reaction time, tendency to suddenly doze off, and other symptoms that might compromise the patient's ability to drive and/or operate machinery prior to doing so. Such focused assessment should be maintained for at least a week subsequent to any change in medication or dosing. This is particularly true for the long-acting opioids such as methadone, oxycontin, MS Contin and other extended-release opioids because the full effect of a change in dosing with these medications may take as long as a week to fully appear. Notify the physician immediately if you find yourself compromised by sedation or any other side effects from your opioids or other medications.

An opioid overdose can cause severe side effects, even death, and is more likely to occur when opioids are taken with alcohol and/or other sedating medications, especially those prescribed for sleep, muscle spasm, anxiety and/or depression. Abstinence from alcohol is advised when taking opioids. Common, although usually temporary, side effects of opioids include: nausea, itching, and sweating. Constipation also commonly occurs and often does not improve with time – notify your physician if you develop constipation as it may be advised to switch you to another opioid. Use of opioids may lower testosterone levels in both men and women which may result in diminished sex drive or enjoyment of sexual activity, fatigue, depression as well as possibly contributing to reduced bone density (osteopenia or osteoporosis). Bone density testing may be advised. Sleep apnea, if present, may be worsened by opioids or other sedating medications. Sleep testing may be advised. Patients must inform the physician if they have sleep disorders, respiratory conditions or any neurologic condition that could place them at risk if they were to be prescribed opioids or other sedating medications.

If female of childbearing capacity, if you become pregnant while taking opioids, your child may be at increased risk of birth defects. In addition, there is increased risk of complications for the newborn at time of delivery related to opioid use during pregnancy. If you become pregnant, or plan to become pregnant, you must notify the physician immediately.

It is impossible to predict specific opioid side effects in any individual patient. Having side effects with one opioid does not necessarily predict side effects with another opioid.

You must take opioids only as directed. Federal law prohibits giving this medication to anyone else.

Discontinuation of opioid medications may be required under the following circumstances:

- 1. Failure to obtain adequate pain relief.
- 2. Persistence of side effects.
- 3. Failure to achieve the goals of opioid treatment.
- 4. Problematic dose escalation.
- 5. Failure to comply with treatment agreements.
- 6. Failure to safeguard your opioids from access by others.
- 7. Concerns regarding the presense of substance abuse or addiction.
- 8. Concerns regarding the possibility of diversion (selling, *or giving*, your opioids to others.



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I understand and agree to follow these guidelines that have been fully explained to me. All of my questions and concerns regarding opioid treatment have been adequately answered. If I have further concerns or questions I will contact the clinic. A copy of this document has been given to me.

I give permission to my pain management physician to contact my other healthcare providers for the purpose of sharing information concerning my pain management as the physician deems necessary for coordinated, high quality care.

If I do not follow these guidelines, or those described in the the "Controlled Substance Agreement", my pain management physician may taper me off opioids or abruptly discontinue prescribing opioids.

This consent is valid for 12 months from date of signature below.

<<Patients::PatientName>>'s signature: ______ ##ShortDate##

__ <<Patients::PatientName>> acknowledges understanding of this consent and any questions have been answered

 Witness signature:
 ##ShortDate##

Witness name printed: ______