

Pain Management Policy

The purpose of this agreement is to give you information about the medications you will be taking for pain management and spasms following surgery. It is also to assure that you and your health care provider comply with state and federal regulations concerning the prescribing and use of controlled substances.

Opioids (narcotic analgesics) and muscle relaxants are classes of medications that are prescribed to help alleviate pain and muscle spasms. They can be very helpful in the management of postoperative symptoms.

The long-term use of opioids or muscle relaxants for pain management is controversial because of uncertainty regarding the extent to which they provide long-term benefit. Based on most information, we do not recommend long-term use of opioids or muscle relaxants.

It is important to understand some of the side effects of these medications. Opioids and/or muscle relaxants may cause drowsiness, confusion or physical impairment that can be worsened by the use of alcohol, benzodiazepines, and other sedating medications. If unsure about mixing any medication with an opioid or muscle relaxant, please ask a health care provider or pharmacist. Patients must avoid any activity that may be dangerous to their self or someone else while taking these medications. It is against the law to drive while taking opiate pain medications or muscle relaxants.

Pain medications and muscle relaxants may cause addiction. Patients addicted or tolerant to these medications may seek other illicit opiate drugs, including but not limited to heroin. Some abusers of illicit drugs, such as heroin, blame prior surgeries and postoperative medication use as the cause of their drug problem. At Rocky Mountain Brain & Spine Institute (RMBSI), we do not assume any blame or responsibility for patients not cessating medication use after surgery, or eventually pursuing/ abusing illicit drugs such as heroin.

Any prescription for opioids or muscle relaxants by RMBSI will strictly be for acute postoperative symptoms, of short duration, and not to exceed three (3) months. We do not provide any pain management prior to surgery. If the patient is unable to follow the agreed upon schedule or requires more than three (3) months of prescription medications, he or she must contact their primary care physician or seek a pain management specialist for continued pain management. RMBSI is not a general pain management provider. We are not obligated to help you find a pain management specialist.



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RMBSI will immediately stop prescribing any pain medication or muscle relaxant if we discover a patient is not taking these medications as prescribed, or the patient is obtaining similar medications from another provider without our knowledge. We frequently follow online databases, which report opiate and muscle relaxant usage by our patients.

Patients entering the practice while currently on a maintenance course of prescribed opioids or muscle relaxants for chronic pain will need to obtain their maintenance prescription medications from the original prescriber.

We prescribe “standard doses” of pain medications and muscle relaxants following surgery regardless of how much a patient is taking before surgery. It should not be expected that RMBSI will increase or maintain elevated medication dosages following surgery to meet the elevated needs of certain patients.

Physical dependence may develop with regular use. This does not necessarily indicate addiction but means that a physical withdrawal syndrome may develop if you stop your medication abruptly. Tolerance may develop to the pain-relieving effects of opioids or muscle relaxants, meaning that pain relief may decrease over time. If long-term medications were taken prior to surgery, patients should expect to have significant pain following surgery that may be difficult to control. This does not mean the surgery did not work.

Some pain conditions, including post-operative pain, may not improve with opioids or muscle relaxants. A frequent need to increase doses may indicate that these medications are not effective for a particular pain problem. It could also indicate an underlying problem with addiction or psychological dependence. Discontinuation of opioid or muscle relaxant medications may occur if pain relief is not adequate in spite of escalating doses, persistent side effects, if goals of opioid therapy are not being met, or there is inability to comply with the treatment agreement.

It is important to understand that a patient can overdose from a pain medication or muscle relaxant, even if they are still having pain or spasms.

Opioid medications and muscle relaxants have potential for abuse or diversion and strict accountability is necessary. For this reason the following policies are agreed to by you:

1. Pain medication and muscle relaxants will be prescribed only in written form. They will not be phone called or faxed to a pharmacy. They will not be electronically submitted. They will only be provided in person to the actual patient, and only during normal business hours Monday through Friday. If a prescription is needed, it is recommended you call ahead to make sure the

doctor is present to write the prescription. You alone are responsible for knowing if your medications are running low. If you call the RMBSI answering service outside of normal business hours, you will be advised to wait until normal business hours or go to an urgent care/ emergency room to obtain medications.

2. All prescriptions must be taken as prescribed. Taking the medications differently could be dangerous and even cause death. We may not refill a prescription early, even if another healthcare provider told you to take the medication differently than we prescribed.
3. Your pharmacist, at their discretion, may provide a lesser amount of medication than we prescribe. We will not intervene in this decision. Many Colorado pharmacies only will fill one week of medication, even if we wrote for a 2-week supply.
4. We have permission to discuss all diagnostic and treatment details with dispensing pharmacists or other professionals who provide your health care for purposes of maintaining accountability.
5. We have permission to check online databases reporting the patient's pain medication and muscle relaxant use. However, we are not obligated to check these databases for the purpose of predicting elevated medication need or baseline medication tolerance.
6. You are expected to inform our office of any new medications or medical conditions, and of any adverse effects you experience from any of the medications that you take.
7. Stopping opioids abruptly can cause flu-like withdrawal symptoms such as nausea, vomiting, diarrhea, and sweating. While not always dangerous, this can be very uncomfortable. It is best to wean from opioids.
8. You cannot share, sell, or otherwise permit others to have access to your medications. This includes a spouse, significant other, or family member.
9. Prescriptions and medication bottles may be sought by other individuals and should be closely safeguarded. Since the drugs may be hazardous or lethal to a person, especially a child, you must keep them out of reach of such people. It is expected that you will take the highest possible degree of care with your medication and prescription. It is best to lock up your medication in a safe or lock box. You should not leave your medications where others might see or have access to them.



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10. Medications may not be replaced if they are lost, get wet, are destroyed, left on an airplane, have been stolen, etc... It is your responsibility to keep your medications safe.
11. Refilling medications are contingent on keeping scheduled appointments. If you miss or cancel your appointment, we may not refill your medications.
12. It should be understood that any medical treatment is initially a trial, and that continued prescription is contingent on evidence of benefit. If it appears you are not receiving the intended benefit, we may stop prescribing the medications.
13. It is understood that failure to adhere to these policies may result in cessation of prescribing pain medications or muscle relaxants.
14. You affirm that you have full right and power to sign and be bound by this agreement, and that you have read, understand, and accept all of its terms.

Patient Signature: _____

Printed Name: _____

Date: _____