Due to the Recent Increase in Prescription Medication Addiction, Overdose and Deaths, Yavapai



Regional Medical Center's Emergency Departments Follow These Guidelines to Reduce Prescription Drug Abuse

 One provider should provide all opioids to treat a patient's chronic pain:

We do not prescribe additional narcotic pain medications after the first Emergency Department (ED) visit or if you have already received narcotic medications from another doctor or ED. Any exception may be made only after a urine drug screen and direct contact with your regular doctor.

- The administration of intravenous and intramuscular opioids in the Emergency Department for the relief of acute exacerbations of chronic pain is discouraged: We do not give pain-medication shots (injections) for exacerbations of chronic pain.
- 3. Prescriptions for controlled substances from the Emergency Department should state the patient is required to provide a governmentissued picture identification (ID) to the pharmacy filing the prescription: You may be asked to show a photo ID (driver's license or similar) when you get a narcotic prescription from our Emergency Department filled at the pharmacy.
- Emergency departments should photograph patients who present for pain-related complaints without a government issued ID: If you do not have a photo ID and are requesting or are prescribed narcotic pain medication, we may take your photograph for the medical record.

- Emergency medical providers should abstain from providing replacement prescriptions for controlled substances that were lost, destroyed or stolen: We do not refill stolen or lost prescriptions for narcotics or controlled substances.
- 6. Emergency medical providers should not provide replacement doses of methadone for patients in a methadone treatment program who have missed a dose: **We do not provide missed methadone doses.**
- Long-acting or controlled-release opioids (such as OxyContin, fentanyl patches or methadone) should not be prescribed for acute pain: We do not prescribe long-acting or controlled-release opioids (such as OxyContin, MS Contin, fentanyl, Duragesic and methadone).
- Emergency departments should share the ED visit history of a patient with other emergency physicians who are treating a patient: Healthcare laws allow us to request your medical record and share information with other doctors who are treating you.
- 9. Emergency departments should coordinate the care of patients who frequently visit the ED using an ED coordination program: Frequent users of the Emergency Department will often have care plans made to assist in improving their care, including avoidance of use of medications associated with abuse or addiction.
- 10. Yavapai Regional Medical Center Emergency Department physicians do not prescribe Schedule 2 Controlled Substances for chronic pain-those most associated with abuse or addiction -including oxycodone or oxycodonecontaining medications (Percocet, OxyContin), Dilaudid (hydromorphone), morphine (MS Contin), fentanyl (Duragesic) and others.

