

STATE MANADATE REGARDING ALL CONTROLLED SUBSTANCES

The prescribing of ANY CONTROLLED SUBSTANCE is monitored and regulated by the State of Florida. There is REAL risk for addiction and also legal issues concerning abuse and diversion. Because of these issues, the state of Florida Department of Health has laws restricting how controlled substances are prescribed. Due to these regulations, our office must implement doctor-patient agreements for all patients being given a controlled substance of any kind.

Accountability is necessary so as to protect our providers' licenses and maintain our liability coverage. These are STATE LAWS and violation is a criminal offense.

1. All **controlled substances must** come from one physician, or during their absence, by one of the covering physicians. Shopping refills with other providers outside of this practice violates this agreement.
2. All **controlled substances** must be obtained at the same pharmacy. Shopping pharmacies violates this agreement.
3. We retain the right to discuss all diagnostic and treatment details, including drugs prescribed, with any other health care provider so as to maintain accountability and open communication.
4. RANDOM urine drug screens WILL be requested at anytime and without notification. If you are taking or using any other medications or drugs, notify the physician PRIOR to the test being performed.
5. Maintain custody of your medications. Most controlled substances have street value and people will steal them. This can and often includes family members. To anyone without tolerance to these medications, they can be hazardous, even deadly. Treat your medication like any other valuable.
6. Medications will not be replaced if they are lost, fall into a toilet, get eaten by your dog, left at a hotel or on a plane. If your medication is STOLEN, you can obtain a replacement with a copy of the official police report at your provider's discretion.
7. Do not try to obtain your prescriptions early. Do not take your medications at a dose or frequency that will cause you to be without medication at the end of the month. Misuse of the prescription violates this agreement.
8. If you break any laws with regards to your medication, for example, if the police or Drug Enforcement Agency requests information regarding our prescriptions, we are REQUIRED to provide authorities with all pertinent information, even without subpoena.
9. The Florida Prescription Drug Monitoring Program called E-FORCSE will be verified for each patient with every prescription given by one of our providers.

Violating these policies ends with permanent cessation of controlled substances from this office and may end with your termination as a patient in this practice. Violating this contract breaks the trust built between a doctor and her patients.

2019



Controlled Substance Consent Form and Management Agreement

I, _____ have read or have had the above form read to me and understand all of it. I have had a chance to have all my questions answered to my satisfaction. By signing this form voluntarily, I give my consent for treatment with controlled substance.

DESIGNATED PHARMACY: _____

DATE _____

Witness

Patient signature

Witness printed

Patient printed

Physician signature/printed