Lakeland Care
PROTOCOL ORDERS
Adult Chronic Controlled Substances

Diagnosis/Chief Complaint
Adult patients ages 18 years and older receiving chronic controlled substances (schedule II, III and IV medications)

Lab Evaluations/Results
Annual drug screening will be conducted on a randomized basis.

Diagnostic Evaluation/Results
A PDMP Report (Prescription Drug Monitoring Program) will be run on an annual basis or with each 3 month follow-up office visit.

Plan of Care
SPECIAL ATTENTION:

1. Patients who are on stabilized dosage of medication should be scheduled every 3 months for follow-up, or more frequently as needed for monitoring.
2. Refill prescriptions will be limited to a 1 month supply and will not be prescribed more frequently.
3. All patients receiving chronic controlled substances are required to have a Medication Agreement signed by the provider/patient and scanned into the electronic health record. An FYI flag will be placed on the patient record indicating the medication being dispensed.
4. Medication Agreements will be reviewed and renewed on a yearly basis.

Additional Care

1. If the Medication Agreement is no longer active either due to a breach or the patient does not require continued prescriptions, the banner and FYI should be removed within the EPIC system, and a note placed in the Patient Care Coordination Note that is dated.

Approval/Signatures	
Physician Section Leader:	*Date:*
Medical Director:	*Date:*

DISTRIBUTION

This protocol must be distributed to all Lakeland Medical Practices personnel and providers. All recipients of this protocol must acknowledge their receipt and understanding of the protocol by referring any questions or problems with the protocol within ten days of the issue date to their immediate supervisor. If no questions or problems are communicated, it will be assumed that the protocol has been read and understood. All questions regarding this protocol its implementation may be referred to the Medical Director of **Practice Name**.

Original Date: 3/24/16
Reviewed Dates:
Revised Dates: