Safety Monitoring Guidelines

• Discuss the risks and benefits of opioid treatment with your patients openly.
• Thoroughly assess for risk of substance misuse disorder initially and continue monitoring for aberrant behavior.
• For chronic opioids, establish prescription medication treatment agreement and review it periodically with patient (at least annually).
• Perform urine toxicology screening (see below).
• Perform pill counts.
• Utilize the prescription drug monitoring program website.
• Follow universal precautions! (see below.)
<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
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<tbody>
<tr>
<td>1.</td>
<td>Make a diagnosis with appropriate differential and a plan for further evaluation and investigation of underlying conditions to try to address the medical condition that is responsible for the pain</td>
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<td>2.</td>
<td>Psychologic assessment, including risk of addictive disorders</td>
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<td>3.</td>
<td>Informed consent</td>
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<td>4.</td>
<td>Treatment agreement</td>
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<td>5.</td>
<td>Pre-/post-treatment assessment of pain level and function</td>
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<td>6.</td>
<td>Appropriate trial of opioid therapy +/- adjunctive medication</td>
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<td>7.</td>
<td>Reassessment of pain score and level of function</td>
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</table>
| 8.   | Regularly assess the “Four As” of pain medicine<sup>a</sup>  
  - Analgesia, Activity, Adverse reactions, and Aberrant behavior |
| 9.   | Periodically review management of the underlying condition that is responsible for the pain, the pain diagnosis and comorbid conditions relating to the underlying condition, and the treatment of pain and comorbid disorders |
| 10.  | Documentation of medical management and of pain management according to state guidelines and requirements for safe prescribing |

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Red and Yellow Flag Behaviors for Substance Use Disorders

**Red**
- Deterioration in functioning at work or socially
- Illegal activities—selling medications, forging prescriptions, or buying medications from nonmedical sources
- Using medications in ways other than prescribed (e.g., injecting or snorting medication)
- Multiple reports of lost or stolen prescriptions
- Resistance to change in medications despite adverse effects
- Refusal to comply with random drug screens, call backs, or pill counts
- Concurrent abuse of alcohol or drugs
- Use of multiple physicians and pharmacies

**Yellow** (could be normal but combined may be of concern)
- Complaints about need for more medication
- Drug hoarding
- Nonadherence to recommendations for non-medication pain therapies
- Acquiring similar medications from other providers
- Occasional unsanctioned dose escalation
- Requesting specific pain medications
- Taken in the context of a patient’s presentation and history, this could be a sign of “seeking” certain medications, or if patients ask for specific medications it could be because this has worked in the past. (consider a patient asking for a specific blood pressure medicine that has worked well in the past, providers would likely restart it immediately)