Physician Fact Sheet

Physician/Prescriber Reminders when Prescribing Opioids

Before Prescribing Opioids, Remember to



CHECK your state's prescription monitoring program.



DETERMINE goals of using prescription opioids.



DO a Risk Assessment. If the patient is at risk for misuse or substance use disorder, make a plan to address and/or mitigate risks. Be sure benefits of opioid therapy outweigh potential risks.



PRESCRIBE the lowest dose for the least number of days. Typically, 3–5 days for most acute conditions, infrequently more than 7 days.



EXPLAIN the expected benefits, side effects, risks, and important safety measures to patients (and caregiver if necessary).



DISCUSS the amount prescribed, appropriate dosing, and the option to fill a lesser amount.



DOCUMENT in the medical record: goals, exceptions and reasons, patient education, and treatment plan.



TAKE special precautions when prescribing long-term opioid therapy.

Some Considerations

- Consult with a pain specialist as deemed clinically appropriate by the treating prescriber.
- Prescribers should consider entering into a pain management agreement with patients when prescribing extended-release long-acting opioids in non-abuse deterrent form.
- Prescribers should consider entering into a pain management agreement for patients who are being prescribed opioids for long-term pain management, as the treating provider determines to be clinically appropriate.
- Consider co-prescribing naloxone for patients on long-term opioid therapy.



PLAN follow-up.

The Physician Fact Sheet is available at www.massmed.org/opioidprescriberfactsheetext.

Jointly issued by the Massachusetts Medical Society, the Massachusetts Health & Hospital Association, and the Massachusetts College of Emergency Physicians.

These opioid prescribing guidelines follow Massachusetts laws and regulations as of August 2015. Practitioners outside of Massachusetts should follow applicable laws and regulations in their own state.