

# CONTROLLED SUBSTANCES

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## TREATMENT AGREEMENT LOUISIANA

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### STATE SPECIFIC

#### Required by State:<sup>1</sup>

- Patients shall be seen by the physician at appropriate intervals, not to exceed 12 weeks to monitor the patient and evaluate progress.
- If a physician reasonably believes the patient is suffering from substance abuse or that the patient is controlled substances, the physician shall obtain a drug screen.
- A single physician shall take primary responsibility for controlled substance therapy.
- The physician should be willing to refer the patient as necessary for additional evaluation and treatment.
- Evidence or behavioral indications of substance abuse or diversion shall be followed by tapering and discontinuation of controlled substance therapy.

#### Recommended by State:

*No recommendations.*

### ADDITIONAL CONSIDERATIONS COMMON IN OTHER STATES

#### Considerations:

- The physician should provide reasons for which drug therapy may be discontinued, such as violation of the treatment agreement.
- The patient should have prescriptions filled at one pharmacy, with the name and phone number of the pharmacy designated in the agreement.
- The physician's prescribing policies, including, for example, the number and frequency of prescription refills, a policy regarding early or urgent refills, and a policy regarding replacement of lost or stolen medication, etc.

### TO CONSIDER FROM OTHER STATES

#### Considerations:

- The patient is responsible for safely using medication, meaning that the patient should store the medication in a secure location and safely dispose of any unused medication.

- The goals of treatment.
- The physician will be available during emergencies or otherwise have a covering physician available in the event that unforeseen problems arise and to prescribe scheduled refills.
- Discuss any monitoring tools that the physician wishes to use, such as pill counts.
- The patient is prohibited from sharing, giving, or selling any medication to others.
- If the physician becomes concerned that there has been illegal activity, the physician may notify the authorities.
- The patient provides informed, written consent for release of the agreement to local emergency departments and/or pharmacies; therefore, other providers such as ER personnel or pharmacists may report violations of the agreement back to the prescribing physician.
- The patient may be responsible for keeping a pain diary or a diary of daily accomplishments.
- If the patient violates the terms of the agreement, those violations and the physician's response to them will be documented along with the rationale for changes in the treatment plan.

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## INFORMED CONSENT

### LOUISIANA

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#### STATE SPECIFIC

##### Required by State:<sup>1</sup>

- A physician shall ensure that the patient and/or his guardian is informed of the benefits and risks of controlled substance therapy. Discussions of risks and benefits should be noted in some format in the patient's record.

##### Recommended by State:

*No recommendations.*

#### TO CONSIDER FROM OTHER STATES

##### Considerations:

- Inform the patient of potential side effects (short- and long-term) of the prescribed medication.

- Inform the patient of the likelihood that tolerance and/or physical dependence on the prescribed medication will develop.
- The patient's diagnosis.
- Inform the patient of the risk of the prescribed medication interacting with other drugs and of over-sedation.
- Inform the patient of the risks of impaired motor skills that affect driving among other tasks.
- Inform the patient of the limited evidence as to the benefit of long-term opioid therapy.
- Inform the patient of the risks of opioid misuse, dependence, addiction, and overdose.
- Inform female patients of the risks during pregnancy and after delivery.
- Inform the patient of alternative treatment options to opioid therapy.
- Inform the patient that one of the risks of opioid therapy is death.
- Inform the patient of the risks of withdrawal.
- Alcohol should not be used in combination with the prescribed opioid.
- All medications from other sources, including over the counters and medical marijuana, should be discussed and documented in the medical record.
- Note that compliance with all components of the overall treatment plan is expected.
- Periodic re-evaluation of treatment is needed.
- The patient has the option to consent to the sharing of information with family members and other providers, as necessary.
- Educate the patient and caregivers about the danger signs of respiratory depression and that someone should summon medical help immediately if a person demonstrates signs of respiratory depression while on opioids.
- Ensure the patient does not have any absolute contraindications and review risks and benefits related to any relative contraindications with the patient.

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**NOTE: This resource covers only informed consent and treatment plan requirements; there may be many other requirements, such as limitations on the quantity of medication prescribed, etc.**

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<sup>1</sup> 46 La. Admin. Code Pt. XLV § 6921. Use of Controlled Substances, Limitations.

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