

# SOUTHERN HIGHLANDS COMMUNITY MENTAL HEALTH CENTER

## POLICY AND PROCEDURE MANUAL

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### Policy 147 – Guidelines for Prescribing Benzodiazepines

#### I. POLICY

It is the policy of Southern Highlands Community Mental Health Center that medical providers employed by the Center prescribe benzodiazepines in a responsible manner due to the addictive potential and the risk for abuse and diversion of this anti-anxiety medication. Prescribing practices and beliefs often varies between medical providers. Having a common philosophy regarding prescribing issues helps cohesion within a group practice.

#### II. DISCUSSION

Benzodiazepines are controlled substances used to treat anxiety. Mental health providers have the responsibility to make sure (to the extent possible) that prescriptions are used by who it was intended and in the manner intended. Benzodiazepines, often in combination with alcohol and/or opiates, are found in lethal overdoses. Southern Highlands will not prescribe benzodiazepines to consumers found to be taking opiates. Southern Highlands serves a population at risk for addiction and the guidelines listed here are intended to provide consistent, respectful care for these consumers.

#### III. PROCEDURES

##### A. Obtain a Thorough Psychiatric and Substance Abuse History

Benzodiazepines should not be prescribed to active alcohol/drug users or to those in recovery. All substances of abuse share a common neuron pathway that can be activated by any addictive substance and can trigger a relapse. A thorough psychiatric and substance abuse history including substances used, age of onset, pattern of escalating use, frequency, amount, route of use, history of withdrawal, symptoms, negative consequences associated with use, and prior substance abuse treatment is important in conceptualizing the problems, formulating a diagnosis, and developing a plan of care.

B. Drug Screening

Because addiction is a psychiatric illness that impairs judgment and insight, addicted consumers are not always truthful. Drug screening allows providers to objectively document sobriety. It can also be indicative of diversion if a drug screen is negative despite the patient claiming regular need and use of the medication. Drug screening may be ordered anytime there is reason to suspect misuse of medications.

C. Checking the West Virginia / Virginia Board of Pharmacy Profile

Medical providers should register with the West Virginia and Virginia Board of Pharmacy to be able to access a consumer's profile. This helps the prescribing provider in uncovering possible doctor and pharmacy shopping and overlapping prescriptions. This allows the provider to better understand the consumers underlying problems and decreases Center liability as these consumers are at high risk for overdoses, motor vehicle accidents and legal problems. A copy of the pharmacy report should be available at every appointment.

D. Consent to Communicate with Other Providers

Requesting consent to communicate with other providers involved in the consumer's care facilitates coordination of care. Polypharmacy has become routine with some providers and having multiple medications prescribed by different providers puts patients at risk for adverse reactions by medication interactions.

E. Encourage Use of One Pharmacy

Encouraging patients to use the same pharmacy is helpful because pharmacies can assist with monitoring potential interactions and requests for early refills.

F. Physician Assistants

Physician Assistants work under the license of the supervising physician and must follow guidelines of the physician in prescribing controlled substances. At Southern Highlands, Physician Assistants may not write prescriptions for controlled substances (except Ambien and Lunesta) without:

1. Presenting the case and obtaining a signature from their supervising physician in both inpatient and outpatient settings.

2. Prescriptions for controlled medications are to be electronically written utilizing the OrderConnect system. This system requires a 2 step token validation process which ensures accuracy of the prescription. Written prescriptions should be a rare occurrence and only used as a last resort. No refills or postdated prescriptions should be written for controlled substances in any circumstance. Refill call-ins should only be for sufficient amounts until next appointment.

G. Medication Education

The provider prescribing benzodiazepines must provide education to the consumer regarding the addictive potential as part of the medical education. The prescribing provider will document medication education and the consumer's understanding in the progress note.

H. Controlled Medication Contract

The consumer being prescribed benzodiazepines will sign the Controlled Medication Contract which outlines the specifics of this policy.

I. Use of Benzodiazepines with Opiates

When the provider finds that a consumer is taking opiates, including Suboxone and Methadone, no further benzodiazepines will be prescribed except a short tapering dose if needed.