Opioid and Sedative Medication Notice to Patients

Our Emergency Department/Urgent Care providers understand that pain relief is important when you are hurt or need emergency care for pain. Our main goal is to look for and treat your emergency medical condition. Our emergency department tries to ensure kind treatment of patients without contributing to opiate or sedative dependence or addiction.

For your safety, we follow these guidelines when treating your pain.

1. To assure your safety, we recommend that a dedicated primary care provider outside of the emergency department or urgent care provide all opiates and sedatives to treat your chronic ongoing condition.
2. We may prescribe opioid medications for acute, short term pain for the shortest duration appropriate. This generally will be for no more than 3 days, consistent with national guidelines.
3. We may screen patients for substance misuse before prescribing or providing any opioids.
4. We will not dispense prescriptions for controlled substances that were lost, destroyed, stolen, or finished prematurely. You should contact your primary care provider or pain specialist for a refill.
5. We may also check the New York State prescription monitoring program called I STOP before prescribing or providing opiates for new painful conditions.
6. Generally, we will not prescribe or provide doses of long acting opioid pain medications.

Opioid medications include (but are not limited to): codeine; hydrocodone (Norco, Vicodin, Lortab); oxycodone IR (Percocet) and SR (OxyContin); morphine IR and SR (MS Contin); hydromorphone IR (Dilaudid) and ER (Exalgo ER); methadone; fentanyl; oxymorphone ER (Opana ER).

Sedative medications include: alprazolam (Xanax); clonazepam (Klonopin); diazepam (Valium); lorazepam (Ativan). (This is not a comprehensive list of all available products)

This information is provided for educational purposes only. It is not intended to deter you from seeking treatment or take the place of the clinical judgement of your treating provider. It is also not intended to establish a legal or medical standard of care.

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