

STANDARDS OF PRACTICE

Prescribing: Drugs Associated with Substance Use Disorders or Substance-Related Harm

Under Review: No

Issued By: Council: April 1, 2017 (*Prescribing: Drugs with Potential
for Misuse or Diversion*)

Reissued by Council: September 6, 2018 (name change only:
*Prescribing: Drugs Associated with
Substance Use Disorders or
Substance-Related Harm*)

The ***Standards of Practice*** of the College of Physicians & Surgeons of Alberta (“CPSA”) are the **minimum** standards of professional behavior and ethical conduct expected of all regulated members registered in Alberta. Standards of Practice are enforceable under the *Health Professions Act* and will be referenced in the management of complaints and in discipline hearings. CPSA also provides ***Advice to the Profession*** to support the implementation of the Standards of Practice.

Prescribing: Drugs Associated with Substance Use Disorders or Substance-Related Harmⁱ

1. A regulated member **must** be able to justify prescribing decisions with documentary evidence of a patient’s initial assessment and reassessments as required, including when accepting the transfer of care of a patient from another healthcare provider.
2. At the time of initial assessment, a regulated member **must** discuss and determine with the patient the best medication choice considering the:
 - a. efficacy of other pharmacological and non-pharmacological treatment options;
 - b. common and potentially serious side effects of the medication; and
 - c. probability the medication will improve the patient’s health and function.
3. A regulated member **must** review the patient’s medication history from the Pharmaceutical Information Network (PIN)/Netcare or from an alternative, independent source (e.g., [Tracked Prescription Program](#), community or hospital pharmacist):
 - a. before initiating a prescription;

Terms used in the Standards of Practice:

- “Regulated member” means any person who is registered or who is required to be registered as a member of this College. The College regulates physicians, surgeons and osteopaths.
- “Must” refers to a mandatory requirement.
- “May” means that the physician may exercise reasonable discretion.
- “Patient” includes, where applicable, the patient’s legal guardian or substitute decision maker.

- b. before renewing a prescription, unless the regulated member is the primary prescriber; and
 - c. at minimum, every three months when the prescription is for the long-term treatment of a patient.
4. Notwithstanding clause (3), if PIN/Netcare is inaccessible and the patient’s medication history is not available from an alternative, independent source, a regulated member **may** prescribe the minimum amount of medication required until such information can be obtained.
5. A regulated member who prescribes long-term opioid treatment (LTOT) for a patient with chronic pain, exclusive of treatment for active cancer, palliative or end-of-life care, **must** also:
 - a. establish and measure goals for function and pain for the patient;
 - b. evaluate and document risk factors for opioid-related harms and incorporate strategies to mitigate the risks;
 - c. prescribe the lowest effective dose and, if prescribing a dose that exceeds the [opioid prescribing guidelines](#) endorsed by the Council of this College, carefully justify the prescription and document the justification in the patient record;
 - d. at minimum, re-assess the patient within four weeks of initiating LTOT and every three months thereafter;
 - e. document the status of the patient’s function and pain at each reassessment; and
 - f. continue to prescribe LTOT **only** if there is measurable clinical improvement in function and pain that outweighs the risks of continued opioid therapy.

Terms used in the Standards of Practice:

- “Regulated member” means any person who is registered or who is required to be registered as a member of this College. The College regulates physicians, surgeons and osteopaths.
- “Must” refers to a mandatory requirement.
- “May” means that the physician may exercise reasonable discretion.
- “Patient” includes, where applicable, the patient’s legal guardian or substitute decision maker.

RELATED STANDARDS OF PRACTICE

- [*Dispensing of Schedule 1 & 2 Drugs by Physicians for a Fee*](#)
- [*Prescribing: Administration*](#)
- [*Safe Prescribing for Opioid Use Disorder*](#)
- [*Sale of Products by Physicians*](#)

COMPANION RESOURCES

- [*Advice to the Profession: Prescribing: Drugs Associated with Substance Use Disorders or Substance-Related Harms*](#)
- [*Good Prescribing Practices*](#)
- [*TPP Alberta*](#)
- [*U of C's Wise Prescribing: Opioid Skills for the Frontline Clinician online learning module*](#)

ⁱ Includes, but is not limited to, opioids, benzodiazepines, sedatives and stimulants.

Terms used in the Standards of Practice:

- “Regulated member” means any person who is registered or who is required to be registered as a member of this College. The College regulates physicians, surgeons and osteopaths.
- “Must” refers to a mandatory requirement.
- “May” means that the physician may exercise reasonable discretion.
- “Patient” includes, where applicable, the patient’s legal guardian or substitute decision maker.