

Pain Management

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About pain management:

- Dr Leigh is a family doctor, which means she provides holistic, patient-centered primary care to people of all ages.
- She is **not** a pain specialist, a surgeon, an orthopedist, a neurologist, or a psychiatrist. However, all of these specialists may be consulted for your pain and the other issues that go along with it.
- Dr Leigh will work with you on your pain, and your heart health and fitness, and your nutrition and digestion, and your gynecology and prostate health, and all the other aspects of your wellness.
- If you receive Pain Management, please understand it is **only one aspect** of your care.

If you have another primary physician:

Please continue to see your primary care provider for all aspects of your health, and ask them to refer you to a pain specialist if needed. Dr. Leigh can **not** treat pain for any patient who is not her own primary-care patient. She will **not** accept you as a "pain patient." Dr. Leigh urges all patients to have a primary doctor in the town where you live, which is the safest and best for your health!

Keeping track of your treatment:

If you receive Pain Management as part of your primary care, expect to fill out a Pain Inventory form every visit. This is how we can tell whether the treatment is working. You will also be asked to provide old records, to have new studies performed, and to consult with specialists when needed. See below for details.

Are you a new patient, who has used long-term pain medication before?

Before you can be given pain medication by Dr. Leigh, you must provide:

1. Complete medical records.

*Medical records from previous providers **must document the problem that is being treated** with pain medicine. You are responsible for having this information sent. Dr. Leigh will give you forms for release of information with her fax number and mailing address. If you lose the forms, just go to your previous clinic, sign a release of records, and give them Dr. Leigh's fax number and mailing address, which are on her business card. The previous physician's office should send the information directly to Dr. Leigh.*

2. Complete pharmacy records.

*Please send or bring three years' worth of pharmacy records from **all pharmacies** used to fill prescriptions for controlled substances. You are responsible for having this information sent. [Alternatively, in late 2010: Our clinic will search the state's online database of prescription fills of controlled substances.]*

3. A urine test.

A urine sample is collected in the bathroom at our clinic. You may not wear a coat, jacket, fleece, flannel, or other outer clothing, or take a purse, bag, or backpack into the bathroom. The test costs about \$50 and checks for controlled substances.

You will also be given a **complete physical exam**.

We will discuss the **risks, legal issues, and alternatives** for the use of controlled substances for pain care.

You may be given **homework**, or asked to have **additional testing** done, or asked to **consult with a specialist**.

Are you an established patient of Dr Leigh's, using long-term pain medication?

Some rules:

1. Lost or stolen prescriptions can **not** be replaced. Police reports will **not** be accepted by Dr. Leigh for med replacement.
2. **No early refills** can be given. Any new prescription will be dated 31 days from the previous one.
3. **Pill count + urine test:** (Note: this comprehensive urine test costs approx \$100)

You will be asked to bring all existing pills to be counted, and submit a urine sample, in the following situations:

- If you're requesting off-date or extra prescriptions/refills.
- If we're told by your pharmacy or other healthcare provider that you might be obtaining medicine from multiple physicians/pharmacies, or misusing your medicine. [Starting in 2010, a statewide database will send alerts.]
- If your physical exam or history is concerning for signs of misuse of medicine, or use of illegal drugs.
- If your behavior suggests intoxication, confusion, or improper use of your medicine - for example, if you are unable to state correctly the directions for how to take your medicine.
- If you're requesting a refill of a controlled substance we didn't prescribe.
- If a person other than yourself is requesting a refill or picking up your prescription.
- If you can't or won't speak with Dr Leigh alone (example, other people refuse to leave the examining room).

4. Disorderly behavior: **any** hostile behavior toward clinic staff, or disruptive behavior interfering with the care of other patients will not be tolerated. You may be dismissed from the clinic immediately and permanently.

5. No more controlled substance prescriptions, **ever**, if:

- If you skip more than two appointments in one year, without properly cancelling by phone, voicemail, email, or online appointment book.
- If you fail to cooperate with drug testing immediately when requested.
- If you do not follow directions to evaluate your medical issues: diagnostic tests (example: x-rays, blood tests) and referrals (example: to neurologist, physical therapy, pain specialist, psychiatrist).
- If you do not report treatment with opioids/controlled substances by other physicians, including emergency room doctors/nurses, dentists, psychiatrists.
- If you fail a urine test.

What is a failed urine test? Prescribing controlled substances is illegal with these results:

Diversion – the urine test is negative for drugs you are prescribed. No more controlled substance prescriptions, ever.

Multiple sources – the urine test positive for controlled substances that were not prescribed by Dr. Leigh. No more controlled substance prescriptions, ever.

Illegal drugs – the urine test is positive for an illegal drug*. This is a safety issue. No more controlled substance prescriptions, ever.

*Note: medical marijuana, if used by a current OMMP cardholder only, is not an illegal drug.

What is a controlled substance?

sedatives:

clonazepam/klonopin
diazepam/valium
lorazepam/ativan
alprazolam/xanax
carisoprodol/soma
zolpidem/ambien
eszopiclone/lunesta
zaleplon/sonata

narcotics:

codeine-apap/ tylenol #3
codeine cough syrup
hydrocodone-apap/vicodin, lortab, norco, tussionex
cough syrup
methadone
morphine
oxycodone/percodan, percocet, roxicet
tramadol/ultram

anticonvulsant:

pregabalin/lyrica

synthetic THC (from marijuana):

dronabinol/marinol

Dr Leigh does not prescribe these controlled substances:

triazolam/halcion
temazepam/restoril
chlordiazepoxide/librium
fiorinal/fioricet
phenobarbital
hydromorphone/dilaudid

butorphanol/stadol
fentanyl/duragesic
oxycontin
opana
meperidine/demerol
propoxyphene/darvon, darvocet

amphetamine/adderall
methylphenidate/ritalin
modafenil/provigil
phentermine/adipex
sibutramine/meridia

Frequently asked questions about controlled substances

How can you tell drug addicts from people who are just desperate for pain relief?

When someone in pain takes pain medicine, their life gets better. They go back to work or school, and take care of themselves and their families. When someone with addiction takes pain medicine, their life gets worse. They become obsessed with issues involving the drugs, instead of moving on with their life. If you have a tendency to get addicted, you *can* still have your pain treated, but you need help from a pain specialist.

Aren't narcotics dangerous?

Narcotics can have dangerous side effects. People who take them every day become "tolerant" to them, so the high dose a pain patient takes could kill someone else. If you stop taking a narcotic for a while and the tolerance wears off, then you start again, you can get sick or die from your regular dose. Sometimes "hyperalgesia" develops, so you become *more* sensitive to pain, no matter how much medicine you take. Then you have to stop using narcotics and try something else.

What about withdrawals?

If you are on a controlled substance and are running out or want to quit, count your pills and taper off them gradually. When you stop taking narcotics, you will feel sick for 3-7 days. It is like having the flu (without fever). It is not dangerous. It does not cause seizures or hallucinations. It is nothing to be afraid of. You can treat the symptoms with over-the-counter home remedies, or just wait it out. Note: It is not against the law for a doctor to "cut you off" your pain medicine. This is because withdrawal is not medically dangerous!