

ORDERING SCHEDULED CONTROLLED SUBSTANCES POLICY **(Sample protocols for Furnishing Standardized Procedures)**

The nurse practitioner is authorized to furnish or order scheduled controlled substances per the following protocols:

PROTOCOLS

General

- 1) The nurse practitioner follows the provisions of the Standardized Procedure for Furnishing.
- 2) The controlled substances that may be ordered are included in the formulary(s) or references listed in this document.
- 3) Relevant scheduled drug contracts, DEA requirements, and all State and Federal regulations are adhered to.
- 4) Schedule II & III controlled substances are furnished or ordered following the Patient Specific Protocol, in addition to these General Protocols for Scheduled Controlled Substances.
- 5) The nurse practitioner may furnish, prescribe or order any medications on the patient's insurance formulary or non-formulary medications for which there is no substitute, within the scope of the provider's license and within the scope of UCI ordering policies.
- 6) All other applicable Standardized Procedures in this document are followed during health care management.
- 7) All General Policies regarding Review, Approval, Setting, Education, Evaluation, Patient Records, Supervision and Consultation in these Standardized Procedures are in force.

SCHEDULE III PATIENT SPECIFIC PROTOCOL

- 1) Schedule III substances may be furnished or ordered when the patient is in one of the following categories, including but not limited to the following conditions:
 - a. Acute Illness, Injury or Infection: such as cough, fractures
 - b. Acute intermittent but recurrent pain: such as headache
 - c. Chronic continuous pain
 - d. Hormone replacement
- 2) Limit order for acute illness, injury or infection to a maximum of **[Insert number of days of treatment – recommend following CDC's Guidelines]** days & no refills without reevaluation.
- 3) For chronic conditions:
 - a. Pain management protocol or department guidelines is/are adhered to, if appropriate.
 - b. Amount given, including all refills (maximum of 5 in 6 months per DEA regulations, is not to exceed a 120 day supply as appropriate for the condition.
 - c. Treatment plan must be established in collaboration with the patient's primary care provider and reviewed, with documentation, every 6-12 months.
 - d. No further refills without reevaluation.
- 4) Education and follow up is provided.

SCHEDULE II PATIENT SPECIFIC PROTOCOL

- 1) Schedule II controlled substances may be ordered when the patient has one of the following diagnoses and under the following conditions.
 - a. Pain from cancer, post-operative pain, and trauma.
 - b. Pain unresponsive to, or inappropriately treated by CS III-V substances
 - c. Attention Deficit Hyperactivity Disorder (ADHD)
 - d. Neuropsychiatric Conditions
- 2) Limit order for acute and chronic conditions as specified above in Schedule III Protocol.
- 3) No refills for CS II medications are authorized except where authorized by the DEA.
- 4) Pain Management Protocol or Department guidelines is/are adhered to if appropriate.