

## PRESCRIPTION DRUG / NARCOTIC POLICY

- 1- Prescriptions for narcotic and non-narcotic pain medications will be written for patients who undergo an operative procedure. This prescription will be provided at the completion of the operation.
- 2- Prescriptions for narcotic and non-narcotic pain medications will be written for patients who have a medical condition within the scope of Hand Surgery AND are deemed to not need surgery, but will require surgical follow-up. This includes patients with fractures who are placed into a cast. This prescription will be provided at the completion of the office visit.
- 3- Prescriptions for narcotic and non-narcotic pain medications will only be written for a period of 90 (ninety) days. If, after that time, pain is still an issue and medication is requested, patients will be referred back to their primary care physician or to a Pain Management Specialist. Prescriptions WILL NOT be provided.
- 4- Requests for medication refills will be accepted Monday through Thursday between the hours of 9 AM and 4 PM. Please allow 48 hours to process the request.
- 5- Prescriptions for pain medications WILL NOT be provided by the "ON CALL" physician after 4pm Monday through Thursday or ANYTIME Friday through Sunday. Please be sure to plan ahead prior to running out of pain medication.
- 6- Periodic review of Narcotic Pain Medication prescriptions will be checked against the California Department of Justice narcotic tracking database. If a patient is found to be obtaining prescriptions from multiple sources they may be reported to the proper local, State, and / or Federal authorities.

7- Patients with an establis that physician or their clinic	•	nt Physician r	may only receiv	e narcotics from
By signing below I,	( print name )	, affirm tha	at I have read, ι	understand,
have received a copy of th adhere to said policy.	e above "PRESCRIP	TION DRUG /	/ NARCOTIC P	OLICY", and will
Signature:			-	
Date:			_	

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