

Urine Drug Screen Agreement

Name: _____ DOB (mm/dd/yyyy): _____

This agreement was developed by the MFHT Addiction and Chronic Pain committee for use within the MFHT Opioid Prescribing Program. Urine drug screens provided within this program are added to your confidential electronic medical record.

Our Commitment

Even though urine drug screens are a very common part of most medical clinics prescribing opioid pain medicines, we understand that you may want to keep the information that you need this test to yourself. Urine drug screen appointments will look like any other clinic appointment, as much as possible.

You will receive 24 hours notice of your UDS appointment. If you are using a medical van, and if you are concerned that you may be late, you can explain that it is for a UDS--the health centres are committed to getting you there on time.

Our Urine Drug Screen Protocol is carefully followed by all clinic health care providers, which minimizes any risk of error in handling your urine sample. Your involvement is expected in confirming that the test samples are yours.

Your Commitment

I will treat health care providers with respect.

I understand that if I do not attend my appointment for a urine drug screen, this counts as an unexpected result, and my prescribing physician will be notified.

I will not change my urine in any way: This includes

- Bringing in someone else's urine or non-urine product and attempting a switch
- Taking 'blockers' or other substances with the intent to change my urine result

The Plan

1. An appointment will be provided via telephone or email with 24hrs notice.
2. Failure to attend the appointment results in an 'unexpected result' within the MFHT Opioid Prescribing Program. Your prescribing physician will be notified, and will follow up.
3. Come prepared to urinate. Due to scheduling restraints, we are not likely able to rebook you later in the day if you cannot go. If rebooking to another day is required, your physician will be notified that you were unable to urinate, which is an 'unexpected result.'

I agree to the above

My signature: _____ Today's Date: _____

The phone number or email address I will use for my appointment:



MFHT Opioid Prescribing Programme

Urine Drug Screen recording form

Urine temp: _____ (normal range: 32.2 – 37.7 degrees C)

Today's date: _____

SUBSTANCE	NEGATIVE	POSITIVE	INVALID
BZO			
COC			
EDDP			
MOP			
OXY			

Patient initial: _____ **Recorder initial:** _____

MFHT Urine Drug Screening Program Patient Questionnaire

My Name:

Today's Date:

Family Doctor:

I am prescribed the following pain medication(s): (CIRCLE)

morphine / statex / ms contin / kadian
hydromorphone / dilaudid / hydromorph contin
fentanyl
codeine/codeine contin
oxycocet / percocet / oxycodone / oxyneo / endocet
tramacet / tramadol
methadone
Suboxone

I am prescribed the following for ADHD: Methylphenidate/ Ritalin/ Concerta

I am prescribed the following for anxiety: clonazepam/ Ativan/ lorazepam

My last dose was at: _____h today/ yesterday/ other (CIRCLE)

Other drugs or medications I have used recently:

Any other information I want my family doctor to know:

_____My signature

MFHT Opioid Prescribing Program

What is the MFHT Opioid Prescribing Program?

It is a framework for physicians who prescribe opioid medications to patients for chronic non-cancer pain. The program helps physicians to safely and effectively prescribe these medications to patients.

How does an Opioid Prescribing Program help patient safety?

Having a clinic-wide program for the use of these medications ensures that all patients have the same quality and care. Specialists in chronic pain call this type of program “universal precautions”. It is much the same as wearing gloves for procedures or washing hands between seeing patients. The focus of this program is on physician practice and not individual patients in order to ensure safety for everyone. Unfortunately, there has been a steady increase in opioid medication overdoses in Ontario and MFHT wants to do our best to utilize these medications in the safest way possible. Studies show that using urine drug screens can prevent opioid medication misuse.

What does this mean for me?

If you receive opioid medications for chronic pain you will be asked to sign an opioid contract which is an agreement between you and your family physician. The contract explains the responsibilities of the physician and the patient in using these medications. You will also complete a risk assessment to explore your risk of developing an addiction to opioid medications. If you score “at risk” for addiction, it does not necessarily mean that you won’t receive a prescription for opioid medications; it just means that your physician will likely create a more structured way of dispensing these medications to keep you safe. Finally, you will be asked to provide urine drug screens. The clinic has a computerized random urine drug screening program. When your name is selected by the computer, you will be called by a staff person and asked to provide a urine sample within 24 hours. If you are unable to come to this appointment your family physician will be notified and will determine the next steps with you. Again, this doesn’t necessarily mean that your prescription will be stopped, but it will likely result in a period of time of more frequent urine drug screens. While coming in to provide urine drug screens can be an inconvenience, please remember that ALL patients on these medications are being asked to do this. This is the best and safest practice.

How do I get more information?

Please speak to your family doctor if you are on these medications to learn more about this program.