



830 Oak Street, Suite 201W
Brockton, MA 02301
(508) 583-4961
Fax (508) 583-4732
Soheil.Hanjani@Steward.org

Informed consent/contract for long term narcotic pain medication use and referral and/or reducing medication

As you know, you are currently on fairly long-term narcotic pain medication for chronic pelvic pain and related conditions. We have in the past discussed alternative treatments available and you have not found them effective or desirable. As detailed in the pain medication contract that you have signed, the goal of therapy is to reduce your pain to a level that is tolerable and will allow you to improve your day-to-day functioning.

We have also discussed the many potential risks and side effects of a narcotic pain medication, which include but are not limited to: Addiction, nausea, vomiting, constipation, impaired judgment, sleepiness and confusion, allergic reactions, overdose and fatal complications, breathing problems, dizziness, impairment in operating machines or driving motor vehicles, and development of tolerance.

The time has come to focus on the long-term plans for management of your chronic pain. In addition to the alternatives we have discussed to narcotic pain medication (e.g. surgery, non-narcotic pain medication, acupuncture, hypnosis, psychotherapy, etc.), we now have two options:

1. Slowly **weaning** down your narcotic pain medication use to a zero or a low dose chronic schedule. This would be achieved by reducing the number and/or dosage of the medication slowly over time. We would establish a timetable based on your clinical situation and reduce your medication to lower numbers and/or dosage and ultimately have you stop or remain on a low dose chronic schedule.
2. If you feel unable or unwilling to wean of the medication we will need you to be evaluated by a **pain clinic/center**. You could also choose to go to the pain clinic yourself at anytime. They would be in a position to offer you more treatment options, further therapy, and if needed, make a plan for you to continue with narcotic pain medication, if they felt it was the best course of treatment for you.

This does not mean that I will stop seeing you in my office, and in fact, once a plan is laid out by the pain clinic, we can carry it out at my office if going to the pain clinic on a frequent basis is something you prefer to avoid.

This is obviously going to be a difficult period for you, but I will be available to you for help, support and ongoing medical care. We will discuss these issues in detail and come to a course of management based on what is in the best interests of your long-term health and happiness,

Patient statement: I have reviewed the above note, and have discussed the issue with Dr Hanjani who has reviewed the risks, benefits, and alternatives of narcotic treatment with me. At this time, I choose option number (please initial): **ONE** _____ **TWO** _____

Patient's Signature & Date

Provider's signature & Date
Soheil Hanjani MD