

CHRONIC PAIN TREATMENT CHECKLIST

This checklist may be useful as a means to ensure compliance with these guidelines.

- Hx and Px with assessment of baseline function and pain.
- Review all relevant prior records.
- Has there been a prior unsuccessful attempt to treat with non-opioid modalities?
- Is the diagnosis appropriate for opioid treatment?
- Psychosocial and risk assessment: risk of medication abuse (ORT), psychiatric co-morbidity PHQ-4 or other validated tools, evidence of existing abuse (PDMP).
- Are there co-prescribed drug interaction risks? Benzodiazepines are generally contraindicated.
- Sleep risk assessment (S I O P B A N G or equivalent).
- UDS: Any unexpected results?
- Have you checked the PDMP for prescriptions of which you were unaware?
- Create a treatment plan that emphasizes patient self-management.
- Are there appropriate referrals?
- Have you explored all reasonable non-opioid treatment options: medical, behavioral, physiotherapy, and lifestyle changes?
- Have you considered partnering with a substance abuse treatment program?
- Check women of child-bearing age for pregnancy.

If prescribing opioids, proceed with caution:

- Obtain a signed Material Risk Notice.
- Establish treatment goals with periodic review of goals over time.
- Monitor compliance (UDSs, pill counts, PDMP, call-backs).
- Monitor improvement in pain and function, including overall well-being.
- Obtain consultation as needed: mental health, substance abuse, pain management, specialty care, pregnant women.
- Have you considered partnering with a behavioral health specialist (CBT counselor, peer-to-peer coordinator, Living Well with Chronic Disease facilitator, substance abuse counselor)?