



Randall J. Franiak, M.D.

Information for Patients Referred for Narcotic Management

New patients who are referred by their doctor for a consultation or an evaluation, will be scheduled at our Fishers/ main office. We cannot schedule consultations, or follow up appointments at the surgery centers. Ongoing medication management appointments are scheduled at the Fishers/ main office.

We must obtain all pertinent medical records from all prior treating physicians before we can schedule an initial appointment. Obtaining records is mandated by Indiana State law. This would include records from physicians that have prescribed pain medications, procedures, surgery or therapy for the pain problem, imaging reports, etc. Records are transferred from the facility, and often can be faxed to our secure fax. We cannot accept records from the patient.

Indiana has recently passed legislation further regulating how narcotics are prescribed. Experts in pain management are continuing to discuss and develop recommendations about the safest way to prescribe controlled substances. New patients may find that policies at APMCI are different or more stringent than their previous prescribers.

We must have a signed referral from their managing physician. Patients cannot self-refer for narcotic management.

Patients must have a primary care provider, to maintain their general health needs. The pain management documentation from our office will be shared with the primary care provider.

Narcotics are not prescribed at the first visit. Narcotics are not prescribed to avoid withdrawal.

Dr. Franiak is board-certified and fellowship trained in interventional pain management. It is generally always the goal to control the patient's pain by means other than narcotics, which do carry a considerable amount of risk. Dr. Franiak does not accept patients for narcotic management that are receiving interventional treatments from another pain clinic.

We do not manage Suboxone or Methadone at this practice. We do not treat addiction.

Prior to scheduling an evaluation, records will be reviewed. It is possible a recommendation would be made that the patient have an evaluation for medical detox or addiction treatment, rather than being scheduled. If this is the case, our scheduler will call to discuss this with the patient.

The first visit is an evaluation/consultation. Treatment options and plan would be discussed. We cannot guarantee that the recommendations would be to continue with narcotic therapy.

Studies have shown that certain conditions, including chronic headache, migraine, fibromyalgia, and chronic abdominal pain do not respond well to long-term opioid therapy. In fact, patients that are followed in studies after one year are often worse, overall. If you have been diagnosed with one of these conditions we will offer you non-opioid alternatives.

If it is agreed that controlled substances (narcotics) are part of the ongoing treatment plan, patients are required to sign a narcotic agreement. A urine toxicology test would be performed at the first visit. Generally, urine screens would be performed randomly, through the course of treatment. This is in accordance with Indiana State law. The presence of illegal substances (including marijuana) in a urine screen, would prevent us from prescribing controlled substances. Narcotics are not prescribed at this initial visit.

If, for any reason, we cannot maintain the patient on their current regimen, or if narcotics are not recommended, the referring doctor is informed, and the patient is given options for ongoing care. Options may include weaning from their current regimen, or referral for medical detox.

Due to the inherent risks of narcotic therapy, we monitor our patients closely. **Patients should expect to maintain a monthly follow up schedule.** This practice **never** phones in controlled-substance prescriptions to the pharmacy. Follow up appointments are performed in person, not over the phone.