



Chairside Pain Management Checklist

Patient-Dentist Controlled Substance Review

Your safety is our top priority.

The purpose of this checklist is for the dental patient (or guardian) and the dental provider to review their roles and responsibilities for safely using, storing, and disposing of opioid (or other controlled substance) prescriptions. A controlled substance is a medication or other drug that the United States Drug Enforcement Administration (DEA) has identified as having a high potential for misuse, addiction and/or dependency.

CHECKLIST REVIEW

Prescribed Treatment Plan

Name of the prescribed controlled substance medication(s), such as opioid or sedative:

For the temporary treatment of condition(s), such as pain or anxiety:

Additional dental treatment, including:

Medical History

We have reviewed:

- A complete and accurate medical history (including pregnancy).
- A list of all medications and supplements currently taken, to avoid any potential drug interactions.
- Any other medications or substances (including alcohol), as taking other substances while taking opioids can cause life-threatening sedation, stop breathing, and lead to death.
- Any personal or family history of substance use or misuse.
- Any history of adverse reactions to medication.

Safe Use

We have reviewed:

- Your responsibility to follow the prescription's instructions and not to take more or more frequently.
- Opioid overdose can cause slowed breathing, severe drowsiness, life-threatening sedation, and possibly death. Additional information for potential symptoms of allergic reaction or side effects will be provided with the prescription.
- This medication can cause slowing of reflexes or reaction-time, sleepiness, drowsiness, dizziness, and/or confusion as well as impaired judgment and inability to operate machines or drive motor vehicles.
- You may have difficulty thinking clearly, or responding quickly when on this medication, which could place you or others around you in harm's way. If you are driving while on this medication and are stopped, you may be charged with driving while impaired.
- The reason(s) for this prescription and the need to follow the treatment plan, including keeping all appointments set up by my provider. Medication refills will be determined with a required evaluation.



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Storage and Disposal

We have reviewed:

- Storing the medication in original packing and keeping the instructions and labels available.
- Storing in a safe place where no one else will be able to take them. They could be very dangerous to others, especially children.
- Proper disposal options, including community take-back programs, local pharmacies, or local law enforcement agencies.

A copy of this communication checklist will be provided to you.

Practice/Provider Name: _____

Office Phone Number: _____



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