

drug safety

SOMETIMES IT
ISN'T POPULAR



Summit Diagnostics



Drug testing - kind of like eating your vegetables. Not always popular.....

Most people know that drug testing is an important part of drug safety. And yet, it's so much easier not to test.

We know. We hear the stories too, and even occasionally work with the patients who would prefer not to be tested.

No question. Definitely easier to believe that patients are doing the 'right thing'.

The problem, of course, is that often the patients are NOT doing the right thing. And drug diversion has costs way beyond that of the patient.

A single Oxycodone tablet or Fentanyl patch or Suboxone pill can fetch

\$100 or more on the street. These are hard economic times. People do what they might not ordinarily do. And that puts the prescribing doctor, the staff, and the other patients at risk. It is imperative to find drug diversion before it infests the physician's practice.

When diversion starts with one patient in the practice, we often see it spread wildly to other patients and to attract new patients (who also divert) to the practice. Diverting patients are resourceful. They communicate rapidly when they find a clinic that supports their diversion habits.

In a study at a major teaching hospital a few years ago, pain clinics associated with the hospital were told

that they would receive 'fake patients' interspersed with their regular patients over the next six months. The physicians were tasked with identifying the 'fake' or 'diversion acting' patients. At the conclusion of the study, the physicians met with the staff to review findings. Any idea what percent of the time the doctors and staff were able to identify the 'fake' patients? The 'fake' patients were correctly identified less than 10% of the time.

Drug testing may not always be popular with the patients, but it really is the only way to know for sure.

Coding changes for Point-of-care testing....they're coming - 1/1/10.

Summit is ready to help!

By now, many physician offices are aware of drug testing CPT code changes that are likely to be enacted 1/1/10. These changes are likely to impact how physicians can bill for point-of-care testing. The Washington G-2 Reports for Oct 2009 shows that the Point-of-Care testing reimbursement may go down substantially in January.

If you are a clinic that is facing dramatic changes in reimbursement from Point-of-Care testing, we want to talk to you. We have legal, affordable options that can provide substantive service to your patient base while offering a significant revenue stream. Ask your Summit rep today!!



It's not just about pain medications any more

It used to be that we worried only about illicit drugs. Then we began to find drug diversion in prescribed medications - particularly pain medications.

And now, growing rapidly in drug diversion are other classes and types of drugs. Here are some commonly prescribed drugs that are becoming commonly diverted drugs:

Soma - this muscle relaxant is reported by the DEA to be one of the most commonly diverted drugs. Soma is not a controlled drug. Street pricing for Soma averages \$5 and up per tablet. It is a popular pill at teen-age pill-parties - where young people consume pills just for the thrill of seeing how the pills will affect them. Because of the diversion potential with Soma, several states are now considering making Soma a controlled drug.

Ritalin - is a central nervous system stimulant. Ritalin often is

prescribed to treat individuals who are diagnosed with ADD or ADHD. Ritalin is abused for the stimulant effects it produces. It can cause appetite suppression, euphoria, and increased focus. Abusers of this drug can be young or adult. The University of Michigan's Survey called Monitoring the Future showed that 4% of high school seniors in the US abused Ritalin at least once in the past year. Adults also abuse Ritalin, and there are even stories of parents taking their children's Ritalin. Ritalin abuse is definitely on the rise.

Adderall - this amphetamine is now widely used by college students to help them focus. Users feel euphoric and invincible, until the drug wears off. Adderall sales in the US soared by more than 3100% between 2002 and 2005. With a street value of \$5-10 per pill, and the high demand for Adderall, the diversion risk is strong.

If you write Rx for these medications, please watch for diversion potential in your patients.

Staying Drug-Safe

Here are 4 tips to help keep your clinic drug-safe

1. Examine before refilling

It's busy, the patient is upset. Do you really need to see the patient before refilling a controlled Rx? Examining and keeping great notes - those are the behaviors that limit downstream problems.

2. Early refills

Patients who always seem to lose the prescription or drop them in the toilet or have them stolen - those are patients who especially need to be watched. Be careful with early refill requests.

3. Profiling doesn't help

People who are good at drug diversion often don't look like drug diverters. They dress well. They communicate well. They seek your empathy. For them, this is a business. You just can't accurately predict who will divert. Know that the risk of diversion exists with all patients.

4. Drug test

Drug testing is the one true way to know if patients are taking their medications as prescribed. Test all patients, or randomly test, but find a good equitable way to ensure that you, your staff and the other patients are also drug safe.



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