



**Multidisciplinary Board Fact Finding Workgroup on Controlled Substances
Subgroup on Controlled Substances Continuing Education Curriculum**

Conference Call 2/1/18; Convened 5:17pm

Committee Members: T.J. Tejera, MD, DMD; Jennifer Wakeman, LMT; Robert London, MD; Derrick Glymph, DNAP, CRNA; Jonathan Hickman, PharmD

MQA Staff: Joe Baker, Jr., Executive Director, Board of Nursing; Jennifer Wenhold, MSW, Executive Director, Board of Dentistry

- Pending legislation that may require CS prescribing 2 Hr. CE Course (SB08)
- Discussion on maybe 2 CEUs: one course for acute pain and one for chronic pain (or two sections of one presentation).
- Module I:
 - Clarifying scope of the problem: Add addiction rates, deaths, prescriber numbers, framing the issue?
 - Age at which addiction usually starts (can also start at pre-teen years, like 11-12)
 - Need National level and Florida Level statistics
- Module II:
 - Add to Module II to include a difference between addiction vs. physical dependence?
 - Recommendation to add MAT – medication-assisted treatment
 - Recommendation to add Soma
- How much of 2 hour course needs to be devoted to chronic pain? Course needs to focus on acute pain as that is what is referenced in the pending legislation.
- Module IV:
 - Maybe flesh out differences between mild, moderate, and severe post op pain?
- Module V:
 - Needs to build out the patient education subsection, explain it more, and maybe put it in another section? See Module VI.
 - Patient Education (move this to Module VI?):
 - Safe disposal of medication. What to do with the 1, 2, 30 pills left over. To help reduce abuse and diversion.
 - Maintaining patient expectations
 - Risk of drug interactions
 - Side effects – which are fine, which you need to notify the doctor immediately.
 - Naloxone – telling the patient why they’re prescribing it and how it’s supposed to be used.
 - Pain assessment management initiative (PAMI) - UF Jax
 - Discussion about a drug screening being done at primary care physician’s offices.

- E-FORCSE: education on that?
 - Best practice, check this before developing a plan?
 - Checking of this and the PDMP as a mandatory requirement, which is being addressed in pending legislation.
- Note: TENS is musculoskeletal, maybe explain other alternative supplemental pain management options in module V, like biofeedback, acupuncture, cold laser?

Next Steps: Every Board member on the call is going to take the November draft of the CME course, (and this discussion), and send their comments/ideas to Mr. Baker, who will coordinate compiling the comments and then disseminate the revised draft course curriculum back to the subgroup.

- Call adjourned 6:00pm.

(Audio from call is also placed on the websites of the Boards of Dentistry, Massage Therapy, Medicine, Nursing, and Pharmacy)