# **Pediatric Partners' Psychotropic Medication Management Policy**

The Behavioral Health team at Pediatric Partners is committed to providing safe evidence-based treatment for our patients with attention deficit hyperactivity disorder (ADHD), general anxiety disorder (GAD), obsessive compulsive disorder (OCD), depression disorder (DD), disruptive mood dysregulation disorders (DMDD), eating disorders (ED) and other mental health conditions.

The following agreement is designed to improve treatment outcomes, reduce risk of adverse side effects, and ensure proper use of psychotropic medications (ADHD medications, anti-depressants, anti-anxiety, mood stabilizers, anti-psychotics, etc.).

## General Guidelines for appointments and prescriptions:

- Medication-Check appointments (Med-check appts) are routine appointments exclusively for patients who
  have a mental health diagnosis and are receiving medication treatment prescribed by our office. These appts
  are important to monitor progress, ensure optimal management, monitor growth, and ensure overall mental
  and physical patient health. During a med-check appt the patient or parent/caregiver will have the opportunity
  to address any questions, concerns or significant changes with the treating physician related to their mental
  health condition.
- Routine med-check appts will be scheduled within 2 3 weeks of starting a new medication or dosage change as determined by the physician.
- Once the medication regimen is stable, a med check appt is <u>required</u> at minimum every 3 months (even when medications are not being used daily).
- Tele-medicine visits are allowed for med-check appts. The patient and the parent/caregiver (for patients
  17 years old and under) must be present during the appt. Even though telemedicine med-check appts are
  allowed, the patient must be seen for an in-person med-check appt at least every 6 months or more often
  per physician's discretion.
- If the patient or parent/caregiver have medication concerns, including side effects or an acute change in behavior, they should call our office to speak with our behavioral health team. If necessary, a same day emergency visit or an expedited med check appointment will be made.
- If patients plan an extended travel or attending school out of town, they should discuss with the treating physician an alternate option for medication management.
- Many of the psychotropic medications should not be stopped abruptly. Patients should discuss with their treating physician how best to wean or stop their medication.
- Completion of additional outside forms or letter required by schools and college not discussed during a consult or med-check appt will incur an additional fee of \$50.00 and or require an additional physician visit.

#### Scheduling and Keeping Med-Check Appointments:

- Patients or parent/caregivers are responsible for scheduling their routine med-check appointments.
- Due to high demand of med-check appointments, we have extended our physicians availability but it remains imperative to schedule the next visit with plenty of notice. We encourage our patients or parent/caregiver to schedule the next med-check appt at the time of the current visit while in the room with the physician or before leaving the office. This will ensure appointment availability. Patients can also schedule med-check appts ahead of time via online through our patient portal or by calling our office.
- Missed or cancelled appointments will be rescheduled for the next available time which may be several
  weeks to months out; therefore, we suggest you make every effort to keep your scheduled consult and med
  check appointments.
- Missed appointments may result in the patient going without their controlled medication until the next available appointment.

### **Controlled Medications**

 ADHD stimulant medications (Ritalin, Adderall, etc.) are classified by the FDA as Scheduled II controlled medications (C2s) and are highly regulated by State and Federal law because of their potential for abuse. These prescriptions under Florida State statute must be electronically prescribed by physicians only.

- Pediatric Partners must be notified promptly if the prescription or medication is lost, stolen or rendered unusable. A med-check appt will be necessary in order to generate a new prescription.
- We encourage patients to discard unused prescriptions in a safe manner. We offer our patients to bring their unused prescriptions during the next med-check appt in office to ensure the medication is properly discarded.
- Prescriptions for controlled medications will only be written during consultations or med-check appts.
- Partial refills for controlled substances are not permitted except for extenuating circumstances and only possible at a physician's discretion.
- The time used by our staff for rerouting, changing and refilling partial scripts will be billed as an ancillary staff fee.
- In the case of a widespread unavailability for a particular medication or dose, a physician visit will be required to determine best therapeutic option and generate a new prescription.
- Completing C2 medication authorization forms and special prescription order for psychotropic medications for
  patients attending sleep away camp ("camp meds") will incur an additional fee of \$50.00 outside of fee for the med
  check appt.

## Patient and Parent/Caregiver Agreement for Psychotropic Medication Management

- I will use my medication as prescribed and not make any adjustments on my own.
- I will not seek nor obtain ADHD or other psychotropic medications from another provider.
- I agree to keep all scheduled appointments. I understand that I may be charged a fee for no show or same day cancellations. (Please review our appointment cancellation policy)
- I will not share, trade nor sell my medication to anyone.
- I understand that Pediatric Partners is obligated to request information from Florida's Prescription Drug Monitoring Program (PDMP) when prescribing controlled substances for patients 16 years and older.
- I understand that the person picking up the prescription at the pharmacy may be asked to show photo identification.
- I agree to undergo random urine drug screens if requested by my physician.

#### Patient and Parent/Caregiver Consent for Psychotropic Medication Management

- The nature of my mental condition and the reasons for prescribing the specific medication(s) have been explained to me in terms I understand.
- Alternative treatments and their benefits and disadvantages have been explained to me.
- The type of medication, the dosage, the range of frequency, the route of administration, and the anticipated length of treatment have been explained to me.
- I understand and accept the possible side effects of psychotropic medications, including use for extended periods of time.
- I understand that psychotropic medication therapy may require certain lab tests be performed on a regular basis.
- I have informed the doctor of all my known allergies and medications that I am currently taking, including
  prescriptions, over-the-counter remedies, herbal therapies and supplements and any other recreational drug or
  alcohol use.
- I have been advised that I should avoid drinking alcoholic beverages, consuming THC (marijuana) and other non-prescribed drugs.
- I am aware and accept that no guarantee about the results of the treatment have been made.
- I have been advised of the probable consequences of declining recommended or alternative therapies.
- The doctor has answered all my questions regarding this treatment.

Patient Name Printed	Patient Signature (if 18 years or older)
Parent/Caregiver Name Printed	Parent/Caregiver Signature
Date	
Dato	

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