

MONTH/DAY/YEAR

PROVIDER NAME
PROVIDER ADDRESS
CITY, STATE, ZIP CODE

RE: (PATIENT'S FIRST AND LAST NAME, DOB), **NON-FATAL OPIOID OVERDOSE**

Dear PROVIDER (LAST NAME AND DESIGNATED CREDENTIALS),

We regret to inform you that your patient, (PATIENT'S FIRST AND LAST NAME), was diagnosed with a non-fatal opioid-related overdose at (HEALTHCARE FACILITY'S NAME) on (MONTH/DATE/YEAR). Prescription Monitoring Program and Emergency Department Information Exchange data identified you as the patient's primary care provider, and/or as having prescribed a controlled substance to this patient, during the six months before the overdose. We understand that no health care professional wants any patient to experience an overdose. We are providing you this information to support you in offering safe and effective care to patients.

If you are providing ongoing care to this patient, we encourage you to immediately coordinate care with the patient's other providers, if necessary. We also encourage you to contact the patient to reassess the pain management plan, and to educate the patient about opioids' risks. Patients who experience an opioid-related overdose are at high risk of future overdose, either non-fatal or fatal.

Here are some other important tips on managing pain and prescribing opioids:

- ✓ Follow opioid prescribing guidelines at: <http://www.agencymeddirectors.wa.gov/>, <http://www.coperems.org> and <https://www.cdc.gov/drugoverdose/prescribing/guideline.html>
- ✓ If a patient needs opioids for acute pain, prescribe the lowest effective dose of immediate-release opioids for the shortest duration. Discuss opioids' risks and benefits with your patient. Patients rarely need more than seven days' supply.
- ✓ Prescribe opioids for chronic pain only if benefits for both pain and function outweigh risks to the patient.
- ✓ Avoid co-prescribing opioids, benzodiazepines, or other sedatives. Combining opioids with sedatives, sleeping pills or alcohol increases the risk of an overdose.
- ✓ Use the Prescription Monitoring Program database to verify if patients are receiving controlled substances from other prescribers. Register for the system at www.doh.wa.gov/pmp.
- ✓ Provide overdose education and naloxone to the patient. See www.stopoverdose.org
- ✓ Participate in UW TelePain (<https://depts.washington.edu/anesth/care/pain/telepain/>) or call the UW Medicine Pain Consult line (1-844-520-PAIN) for help in managing complex pain patients.
- ✓ Learn how to recognize opioid use disorder and offer evidence-based treatment. See the Recovery Helpline - <https://www.warecoveryhelpline.org/>
- ✓ Consider providing medication-assisted treatment for your patients. See the federal requirements at <https://www.samhsa.gov/medication-assisted-treatment/buprenorphine-waiver-management>

If you have any questions about the Prescription Monitoring Program, please contact the Washington State Department of Health at (360-236-XXXX or email).