

Boynton Health

Controlled Substance Agreement

This agreement allows us to work together respectfully and in good faith. If you are unable to adhere to the treatment plan, Boynton Health may stop prescribing your medication at any time.

Medication: _____

Prescriber's Responsibilities in Your Treatment:

- Explain possible benefits and risks from the medication before prescribing.
- Review a prescription database to verify your most recent prescriptions for controlled medications, as indicated by your treatment.
- If any safety concerns arise your medication may not be prescribed.
- Follow all laws and regulations for prescribing your controlled medication including maximum allowed prescriptions before a follow up visit is required.
- Early medication refills for lost or stolen medication will generally not be replaced.

Your Responsibilities in Your Treatment:

- Keep your medication in a secure location to avoid lost or stolen prescriptions.
- Select one pharmacy where prescriptions will be filled. Appropriate exceptions may be made.
- Use the medication as directed by your prescribing provider.
- Not to sell or share your medications as these are felony offenses and a danger to others.
- Inform your prescriber of any current substance use. I understand that mixing any non-prescription or recreational substances with my medications can impact how well they work and may be dangerous.
- Provide blood or urine drug screens and other diagnostic testing as directed by your prescriber.
- Continue to meet with your prescriber as frequently as outlined in your treatment plan. The frequency of visits may vary.
- Participate in other referrals or treatments which your provider recommends for management of my condition(s).

Patient Name: _____

Signature: _____ Date: _____

Rev. 02/2024