Controlled Substance Prescribing Policy

Effective Date: **November 15, 2026**

Purpose

Controlled substances (for example opioids, benzodiazepines, stimulants, and some sleep medicines) can help when used appropriately but carry risks of harm, dependence, and misuse. AFM prescribes them only when medically appropriate and in compliance with federal law (DEA) and Washington opioid and controlled substance prescribing rules for physicians.

Our Practices

- We review the Washington Prescription Monitoring Program (PMP) before prescribing, and periodically thereafter, as required by Washington rules.
- Patients receiving long-term (chronic) controlled substances will be asked to sign a patient agreement, use one pharmacy, and attend regular follow-up visits.
- We may require urine drug testing and pill counts as part of safe prescribing.
- We may prescribe naloxone and discuss overdose risk when appropriate.
- Prescriptions are sent electronically, as required by Washington law. We do not refill controlled substances early, after hours, or by phone without a visit when a visit is required.
- Lost or stolen prescriptions or medications generally will not be replaced; a police report may be requested.
- We do not prescribe controlled substances at a first visit unless clinically appropriate and do not take over high-dose regimens without a review of prior records.

Ending Controlled Substance Therapy

If continuing a controlled substance is unsafe, your physician will discuss options, taper safely when appropriate, and offer referral to specialty care. Violations of the patient agreement may lead to discontinuation of the medication; they do not by themselves end your care at AFM.