



## **DPS** **Narcotics Service**

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# **A Guide to Prescription Drug Diversion**

The purpose of this guide is to educate healthcare professionals about the diversion of prescription medications into the illicit market. Nothing in this publication is intended to reduce or deny the use of controlled substances where medically necessary. For complimentary, brochure-style copies contact the Texas Prescription Program.

### **Practitioners' Responsibilities**

The abuse of controlled substances is a serious social and health problem in the United States today. Healthcare professionals must share in the responsibility of eliminating the abuse of prescription drugs - especially controlled substances.

- You have a legal and ethical responsibility to uphold the law and to help protect society from drug abuse.
- You have a professional responsibility to prescribe controlled substances appropriately, guarding against abuse while ensuring the medication is used for legitimate medical and scientific purposes.
- You have a personal responsibility to protect your practice from becoming an easy target for drug diversion. You must become aware of the potential situations where drug diversion can occur and of the safeguards that can help prevent it.

### **Possible Characteristics of a Prescription Drug Abuser**

Differentiating between a potential drug abuser and a legitimate patient is not an easy task. Possible signs are overlooked because the person is someone recognizable to you such as another practitioner, pharmacist, or even a friend or relative. The drug user may also be unknown to you, a person who sees you as a potential easy target. Most drug abusers exhibit similar behaviors and techniques. As a possible victim of their scheme, you must first learn to recognize the common signs and behaviors of a drug abuser.

#### **A drug abuser...**

- may show unusual knowledge of controlled substances or give medical history with textbook symptoms;
- will often request a specific controlled drug and is reluctant to try something different;
- must be seen right away;
- wants an appointment at the end of office hours or on a Friday afternoon;
- may be evasive about medical history;
- refuses tests to confirm condition;

- states a prescription has been lost or stolen and needs replacing;
- generally has no interest in diagnosis
- often complains of hard to diagnose symptoms such as anxiety, depression, insomnia, or migraine headaches.

### **How to Avoid Becoming a Victim of a Potential Prescription Drug Abuser**

#### **DO:**

- Perform a thorough examination.
- Independently confirm patient's medical history.
- Request photo identification and social security number and include them in the patient's charts.
- Write prescriptions for limited quantities.
- Secure medication and prescription pads in the office.

#### **DON'T:**

- Dispense drugs just to get rid of a drug-seeking patient.
- "Take their word for it" when you are suspicious of their medical condition or behavior.
- Prescribe out of sympathy or guilt.
- Prescribe, dispense, or administer controlled substances in the absence of a formal doctor-patient relationship.

### **The Most Commonly Diverted Controlled Substances**

- Hydrocodone products (Vicodin and Lortab)
- Oxycodone (Percocet, Percodan and Tylox)
- Ritalin
- Soma
- Anabolic Steroids
- Dextroamphetamine
- Fentanyl
- Methamphetamine
- Diazepam
- Alprazolam