

PM&R Prescribing of Class II Drugs

Talking Points

- This report acknowledges the reality that different specialties will have different prescribing patterns based on the patient populations they serve.
- Physiatrists are responsible for the long term care of patients with chronic pain medication needs, not just temporary preoperative pain control needs. This means that physiatrists will have a higher prescribing percentage than other specialties because the number of pain patients continues to grow over the years.
- When reviewing the number of type II prescriptions by surgeons, consider that this is over the short term after the surgeon has completed the operation; patients who continue to have pain after their surgery can be referred to physiatrists for their long term care. That patient's pain is now managed by a physiatrist.
- As a whole, physiatrists tend to manage opioids and interventional pain med needs, whereas anesthesiology/pain providers tend to perform interventions only.
- AAPM&R continues to offer continuing medical education related to safe prescribing of all pain medication and being alert to patients who may be abusing the medication. The organization's 2012 Annual Assembly featured an entire day of sessions focused on safe practices related to opioid prescriptions. It is well recognized within the community that patients can benefit from a full range of pain management treatments. There will always be patients who will benefit and improve by a treatment plan that includes type II medications.
- Physiatrists also prescribe low cost therapies such as exercise and physical therapy. Pain medication is only one part of the treatment plan. The goal of all treatment plans is to reduce or eliminate pain. These therapy prescriptions (physical therapy, occupational therapy) were not included in this study.
- Some providers within the specialty are one of the only pain physicians in their geographic area - that means they manage the patients with the highest dosage needs.