

## The Board of Medical Practice adopted a revised version of its policy on treatment of chronic pain on April 2, 2014!



The *Policy on the Use of Opioid Analgesics in the Treatment of Chronic Pain* replaced the *Policy on the Use of Controlled Substances for the Treatment of Pain* that had been in place since 2005.

It was time for this update. It goes without saying that the world in which our licensees practice has changed considerably. While we recognize the importance of treating pain, over time we have all become more aware of the risks and limitations of opioid analgesics. The medical profession and society as a whole have been confronted with an outbreak of misuse, abuse, diversion and addiction to opioids that has unleashed immeasurable costs, both human and financial, on our communities. Expectations for how prescribers of opioids will manage the risks associated with opioids have changed. There are more tools available to the clinician to support better judgments about when use of opioids is appropriate, and more and better tools available to promote safe and effective use of opioids when they are the right treatment for a patient.

The many developments in this field prompted the Federation of State Medical Boards to issue a 2013 revision to the *Model Policy on the Use of Opioid Analgesics in the Treatment of Chronic Pain*. The Model Policy was rewritten by a large and inclusive group of authorities in pain management. It is quite good, and having a quality Model Policy for State Boards offers distinct advantages. State boards have an excellent starting point for setting state policies and the Model Policy promotes consistency across the nation in the standards and expectations for opioid prescribing. The Board of Medical Practice relied heavily on the Model Policy, but has worked hard to include relevant Vermont requirements and the Board's view on

the standard of care as it stands at this time in Vermont.

The new Vermont policy offers more guidance than the one it replaces. It has grown from less than four pages to 12 pages, not including an expanded list of definitions. The Board's goal was not to increase requirements for our licensees and sincerely hopes that the new policy is not regarded as adding to the burdens on licensees. It is intended to be a guideline and resource, gathering and summarizing relevant State requirements and setting forth the Board's view of the standard of care in this area of practice at this time. As stated in the policy, it will not be used as the basis for an allegation that a licensee has engaged in unprofessional conduct.

The Board recognizes that the challenges in treating chronic pain can be substantial and acknowledges the diligent effort made by so many licensees to keep up with the best practices for prescribing opioids. We hope that this policy will be a useful reference to help our licensees to continue to meet the needs of our citizens for safe and effective treatment of chronic pain. We welcome your comments and suggestions about how the policy may be improved.

**Vermont Board of Medical Practice**

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