Pennsylvania Prescription Drug Monitoring Program (PDMP) System User and Stakeholder Training

Learning Objectives for Modules 1-7

Module 1: Why Using the PDMP is Important for Achieving Optimal Health for Pennsylvania Citizens

- 1. The status of substance use disorder in general, opioid use disorder, and overdoses nationally and in Pennsylvania;
- 2. Common misconceptions about substance use disorder and opioid use disorder treatment and recovery;
- 3. Costs associated with prescription drug and heroin-associated opioid use disorder and overdose; and
- 4. How pervasive prescriber and pharmacist PDMP use can reduce population opioid use disorder and overdose.

Module 2: What is a PDMP, How to Use the PDMP to Make Clinical Decisions, How to Integrate the PDMP into the Clinical Workflow, and How to Access Pennsylvania's PDMP

- 1. Detail Pennsylvania's requirements and regulations regarding PDMP use;
- 2. Explore options and actions Pennsylvania prescribers and pharmacists can take to integrate the PDMP into clinical workflows; and
- 3. Discuss how to use the PDMP system to make clinical decisions.

Module 3: Using the PDMP to Optimize Pain Management

- 1. Learn how to use the PDMP to address pain management for various patient populations and pain types;
- 2. Understand the basic nature of pain for different patient populations and how to manage their pain using the PDMP as a clinical tool; and
- 3. Discuss different ways of treating patient pain that do not involve the immediate use of opioids.

Module 4: Opioid Prescribing Guide

- 1. Provide guidelines to inform all healthcare providers when prescribing opioids in the acute phase of pain;
- 2. Instruct healthcare providers on how to prescribe opioids in the chronic phase of pain, which includes information on how to initiate or continue opioid therapy, select the correct dose, and/or discontinue opioids;
- 3. Instruct healthcare providers on how to assess risks and address harms associated with opioid use;
- 4. Instruct healthcare providers on the legal responsibilities related to prescribing opioids; and
- 5. Instruct healthcare providers on how they may direct patients to dispose of unused medications.

Module 5: Referral to Treatment for Substance Use Disorder Related to Opioid Use

- 1. Define "warm handoffs" and how they can best occur;
- 2. Provide a schema for how any healthcare provider can implement "warm handoffs" in any clinical setting;
- 3. Demonstrate how primary care practices can conduct "warm handoffs" by preparing, using validated screening tools, and using patient-centered communication with patients;
- 4. Demonstrate how healthcare providers can determine the best type of treatment for their patients;
- 5. Present information on patient confidentiality that providers should be aware of when working with patients with substance use disorders and performing "warm handoffs"; and
- 6. Present relevant Pennsylvania links for treatment and other resources.

Module 6: Approaches to Addressing Substance Use Disorder with Patients Identified by the PDMP

- 1. Learn how to integrate the PDMP with other screening tools to help identify those who may require substance use disorder treatment or increased monitoring;
- 2. Define Screening, Brief Intervention, and Referral to Treatment (SBIRT), its main goals, and its main components;
- 3. Learn how to screen a patient for a potential substance use disorder, conduct a brief intervention, and refer a patient to treatment;
- 4. Learn how to discuss a substance use disorder with a patient and handle patient resistance; and
- 5. Learn how to incorporate SBIRT into clinical practice.

Module 7: Effective Opioid Tapering Practices

- 1. Discuss how to use the PDMP to determine if a provider should consider tapering his/her patient;
- 2. Discuss several indicators that prescribers can look for when considering tapering opioids;
- 3. Inform prescribers on how to discuss tapering with patients using patient-centered techniques;
- 4. Present a general opioid tapering protocol and how to adapt this protocol to the needs of any patient; and
- 5. Present information on how to manage withdrawal and how to use tools to measure withdrawal symptoms in patients.