

Patient Name: _____

- Date of Birth matches
- Social Security number matches
- Initial comprehensive history and physical examination performed
- Review of previous diagnostic studies (MRI, EMG, Nerve Conduction Velocity, Diag. Nerve Blocks)
- Review of previous pain interventions
- Physician-Patient Pain Management Contract/Agreement signed by patient and dated at initial visit
- Complete drug history with pharmacy profiles from local pharmacies
- Each date of service has note that has been dictated
- Dictation date within several days of visit (D:)
- Transcription date without several days of dictation (T:)
- Each progress note documents patient's current level of pain (** out of 10)
- Random serum/blood drug screen
- DPS Schedule 2 prescription copy in chart or record found for each prescription written
- Alternative therapy (ultrasound, TENS) discussed and prescribed
- Appropriate consultations ordered (internal medicine, neurology, anesthesiology psychologist)
- Any attempt to decrease daily dosages by 25-35%
- Type of payment for visit (e.g. cash when patient has insurance)
- If patient is found to be prior drug addiction, was patient appropriately referred to rehab/detox center and pain medication prescriptions stopped immediately