



**JGC Consultations, LLC
Justin Capote MD**

Adult & Consultation-Liaison Psychiatry

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CONTROLLED SUBSTANCE AGREEMENT

In the event that my treatment requires the use of controlled substance(s), I adhere to the following: 1.) I am reading and making this agreement while in full possession of my faculties and not under the influence of any substances that might impair my judgment. 2.) I will not obtain any controlled medication from another medical provider without informing this practice of the circumstances involved. This includes pain pills, muscle relaxers, anti-anxiety, or stimulant medications. 3.) I will notify my medical provider of any new health concerns I have even if not obviously related to my treatment. 4.) I will not be involved in the sale, transport, or sharing of any controlled substance or medication. 5.) I will safeguard my medication from loss or theft. I will carry only the amount of medication I need, in the prescription bottle, for the time away from home, leaving the rest in a safe place. 6.) I will not take larger or more frequent doses than what is written on the prescription bottle. 7.) I will not ask for early refills. 9.) If I am female, I understand that if I become pregnant, or if I suspect that I am pregnant, I will notify my provider immediately. 10.) I understand that my provider regularly checks the prescription monitoring program and evidence of obtaining controlled substances from another provider or pharmacy may result in termination of my treatment with JGC Consultations. I have read this document and agree to the guidelines. If I had any difficulty understanding the content, I have asked for clarification. If my prescription(s) is/are not helping to improve my daily life, I will report this to my provider. I understand that if this agreement is not followed, JGC Consultations may choose to terminate my treatment.

Printed name of legally responsible party

Signature of legally responsible party

Date



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Sedative Patient Information and Agreement Form

Sedatives are most often prescribed for the short term management of anxiety or insomnia. Commonly used medications in this class include benzodiazepines such as diazepam (Valium), lorazepam (Ativan), clonazepam (Klonopin), and alprazolam (Xanax). Please be aware that benzodiazepine-like prescription sleep aids such as zolpidem (Ambien) carry a similar risk profile. All benzodiazepines have the same potential side effects. Some of the most commonly reported side effects are drowsiness, forgetfulness, impaired concentration, difficulty multitasking, slowed reaction time, incoordination, slurred speech, and symptoms of emotional disinhibition like social inappropriateness or quickness to anger or tears. It is not recommended that you drive or operate heavy machinery after taking a benzodiazepine because of the effect these medications have on attention and responsiveness. Benzodiazepines have the potential for abuse, addiction, and withdrawal and are not to be taken daily or for extended periods of time. The withdrawal from benzodiazepines is very similar to the withdrawal from alcohol and can potentially be dangerous. Benzodiazepines are never to be combined with alcohol. Sedative medication does not replace non-pharmacologic interventions such as diaphragmatic breathing, exercise, and sleep hygiene. Behavioral changes are an integral part of treatment success. Benzodiazepines are highly controlled by the FDA and are carefully monitored. For these reasons, lost or stolen prescriptions may not be refilled or replaced. Non-benzodiazepine sedatives such as antihistamines (e.g. hydroxyzine) may be offered as a first-line option. By signing this form you acknowledge the above and consent to the terms of treatment.

Printed name of legally responsible party

Signature of legally responsible party

Date