Go to mag.org/tai for resources related to:
- Continuing Medical Education
- Prescribing guidelines
- Patient opioid prescribing screening tools

The first step is understanding that opioid use disorder is a chronic but treatable brain disease, and not a moral failing or character flaw. Like many other chronic medical conditions, opioid use disorder is both treatable, and in many cases, preventable.

— Vice Admiral Jerome M. Adams, M.D., MPH, Surgeon General of the United States

Go to dbhdd.georgia.gov/substance-abuse-prevention for information on DBHDD’s efforts to reduce opioid misuse in Georgia.
The Georgia Composite Medical Board (GCMB) requires every Georgia physician who has an active DEA certificate and who prescribes controlled substances to complete three hours of CME on controlled substance prescribing. This must be completed the first time the physician renews their license after January 1, 2018, or the first time they renew their license following licensure. Any accredited controlled substance prescribing CME that is taken within two years of the physician’s last renewal will count toward this requirement. Completion of this requirement will count as three hours toward the CME requirement at license renewal. Physicians are encouraged to print and keep their CME certificate. Also remember that GCMB requires physicians to use a physician/patient agreement to treat patients with chronic pain.

Georgia PDMP registration and use

Every prescriber who has a DEA certificate is required to enroll with the Georgia Prescription Drug Monitoring Program (PDMP). These prescribers are also required to check the PDMP every time they prescribe benzodiazepines or a Schedule II opiate or cocaine derivative.

Go to mag.org/taf for MAG’s Georgia PDMP Fact Sheet.

Go to dph.georgia.gov/pdmp to register with Georgia’s PDMP.

“...We must all confront the intangible and often devastating effects of stigma. The key to recovery is support and compassion. Patients in pain and patients with a substance use disorder need comprehensive treatment, not judgment.”

— Patrice A. Harris, M.D., M.A.
AMA President (2019–2020)
Chair, AMA Opioid Task Force

Best prescribing practices

- Consider every treatment option, including non-opioid therapies or a mix of opioid and non-opioid therapies.
- Co-prescribe naloxone when it’s clinically appropriate.
- Establish pain and function treatment goals for every patient.
- Discuss the risks associated with opioids with every patient.
- Let your patients know how to safely store their opioids.
- Let your patients know how they can obtain naloxone — and that it’s available without a prescription.
- Use the Georgia Prescription Drug Monitoring Program (PDMP) to monitor your patients’ prescription histories.
- Avoid prescribing benzodiazepines and opioids to the same patient at the same time.

Georgia’s controlled substances CME requirement

The Georgia Composite Medical Board (GCMB) requires every Georgia physician who has an active DEA certificate and who prescribes controlled substances to complete three hours of CME on controlled substance prescribing. This must be completed the first time the physician renews their license after January 1, 2018, or the first time they renew their license following licensure. Any accredited controlled substance prescribing CME that is taken within two years of the physician’s last renewal will count toward this requirement. Completion of this requirement will count as three hours toward the CME requirement at license renewal. Physicians are encouraged to print and keep their CME certificate. Also remember that GCMB requires physicians to use a physician/patient agreement to treat patients with chronic pain.

Inform your patients that...

- Opioids should only be used as directed.
- They should store their medication in a safe and secure manner (e.g., organizing and keeping track of it, keeping it in its original container, hiding it or storing it in a lock box, never mixing medications in the same container).
- They should never flush their medication down the toilet because it could end up in our water supply.
- They can visit takebackday.dea.gov to find the nearest prescription drug disposal drop box.

Go to mag.org/taf for free resources that fulfill GCMB’s controlled substances prescribing CME requirement.

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