

## Referrals to the General Medicine Pain Service (GMPS)

To improve the efficiency, as well as the ease and reliability of referral, please take the following steps, depending on whether the patient is in the clinic with you, or if the patient is in between clinic visits.

- **Patient is in clinic**
  1. Obtain a urine toxicity screen (UTS)
    - Document in your note when the patient's most recent dose of pain medication was taken
    - If result of UTS is not expected, please complete an [Add-on Lab Request Form](#) to order a confirmation
  2. Discuss and sign a [Medication Contract](#) with the patient
    - Copy must go to Dr. Ives in ACC Internal Medicine Clinic room 3220 or Pain CA (Kelly) in room 3217
  3. Provide patient with enough pain medication for 4 weeks
    - The patient's first visit will be an enrollment visit with the [Pain Care Assistant](#), and medications are NOT prescribed then.
    - The first visit with Dr. Ives is usually one to two weeks after the enrollment visit
  4. [Submit the Referral Online](#)
  
- **Patient is in between clinic visits**
  1. If you did obtain a UTS at the last visit (if no more than 2 weeks ago) and the results were not expected, please complete an [Add-on Lab Request Form](#) to order a confirmation
  2. [Submit the Referral Online](#)
  3. If you obtained a medication contract, please send to Dr. Ives in ACC Internal Medicine Clinic room 3220 or Pain CA (Kelly) in room 3217

This is a collaborative effort among the patient, PCP, and the GMPS. Patients who are stable on an opiate free or C-III or IV opiate (like APAP/Codeine #3, APAP/Hydrocodone, etc.) regimen may be graduated back to their PCP for follow-up. It is also possible that the patient could be [dismissed](#) from the GMPS.

It should also be noted that the GMPS does not routinely prescribe OxyContin or benzodiazepines.

If you have any questions, you can [email](#) Kelly Hayes, the Pain Care Assistant, or call 919-843-0391 and ask for Kelly.