Alabama State Board of Medical Examiners and Medical Licensure Commission





# **MEDICALDIGEST**

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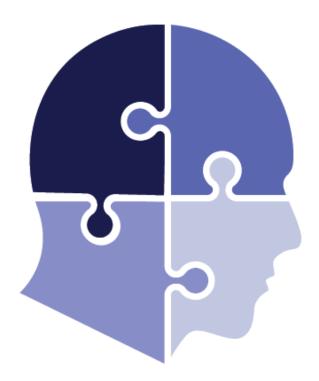
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# ALAHOPE WILL PROVIDE OPIOID AND PAIN EDUCATION AND TRAINING FOR HEALTH PROFESSIONS SCHOOLS IN ALABAMA



The Jefferson County Department of Health, Alabama Board of Medical Examiners, University of Alabama at Birmingham School of Health Professions and Auburn University Harrison College of Pharmacy have collaborated to provide a curriculum to promote best practices of safe opioid prescribing and dispensing appropriate for use by all health care professions schools in Alabama.

ALAHOPE, Alabama Health Professionals' Opioid and Pain Management Education, is a comprehensive, asynchronous, multimedia, standardized, unbiased and modular online training tool funded by the JCDH, through the Overdose Data to Action Grant from the Centers for Disease Control and Prevention. It was created out of the Alabama Opioid Overdose and Addiction Council, established by executive order of Alabama Governor Kay Ivey in 2017.

"Alabama has suffered disproportionately from opioid addiction, which is why, in 2017, I ordered the establishment of the Alabama Opioid Overdose and Addiction Council to find solutions to this health crisis," Ivey said. "One of the Council's recommendations was to ensure all medical professionals have access to protocols for prescribing opioids for pain treatment. The launch of the ALAHOPE program will go a long way in that effort by incorporating opioid and pain education into curriculum of health care training in the state."

ALAHOPE was created for students across Alabama in any type of health professions program that may play a role in preventing or treating patients with substance use disorder and/or pain. This would include students in school to become physicians, nurse practitioners, pharmacists, physician assistants, dentists, physical therapists, occupational therapists, podiatrists, optometrists, counselors and social workers.

ALAHOPE also offers free continuing education credit for those practicing in many of these professions, with optometry and podiatry pending.

"Everyone recognizes the importance of this type of education for our health professions students, but nobody has the resources to create it themselves," said Darlene Traffanstedt, M.D., medical director at the JCDH. "We had a forum for this program and the schools contributed their expertise — without being paid or reimbursed, and in the end we provided a final product of a curriculum that is free to everyone. This is truly a wonderful, shining example of interagency collaboration of governmental agencies working together to make things better for our state."

Alabama remains the highest opioid-dispensing state in the country, but significant improvements have been made. In 2012, the state reached a peak of 143.8 opioid prescriptions dispensed for every 100 people in Alabama. In 2020, that number has decreased to 84 opioid prescriptions dispensed for every 100 people.

After analyzing previous curricula to identify common trends in substance use disorder and pain management education, UAB School of Health Professions professor Sue Feldman, Ph.D., graduate research assistant Heather Martin, Ph.D., and Traffanstedt published a content analysis of the potential opportunities available through ALAHOPE in Southern Medical Journal in January 2023.

"ALAHOPE is an incredible project," Martin said. "Being able to contribute to something that spans across the landscape of all health professions in our state is very special. This project will have a high impact and influence way beyond the learning environment."

Currently, there are 12 lectures focusing on substance use available with more to be added, along with development of a unit on the treatment of pain.

More about ALAHOPE can be found online at www.alahope.org.

This project/website is supported by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$179,375.00 with 100 percent funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government.



We have some exciting news regarding the prescribing of buprenorphine for the treatment of opioid use disorder (OUD). The **Consolidated Appropriations** Act of 2023, signed by Congress on December 29, 2022, has brought significant changes to the process. One major development is the removal of the federal requirement for practitioners to submit a Notice of Intent (waiver) in order to prescribe medications like buprenorphine.

Under the new regulations, all prescriptions for buprenorphine now only require a standard DEA registration number. This change aims to simplify the prescribing process, making it more accessible for healthcare providers and ensuring that patients can receive the necessary treatment without unnecessary delays or administrative burdens.

Additionally, the Act introduces new training requirements for all prescribers, which took effect on June 21, 2023. A one-time eight hours of training on substance use disorder will be required prior to your next renewal. The courses at https://www.alahope.org/courses will meet this requirement. Just be sure to take a total of eight hours.

To ensure you stay informed and up to date on the latest requirements and guidelines, we encourage you to visit the SAMHSA (Substance Abuse and Mental Health Services Administration)

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website at <a href="https://www.">https://www.</a> samhsa.gov/ for more information.

This update signifies an important step forward in expanding access to evidence-based treatments for individuals struggling with opioid use disorder.

As a state agency committed to promoting health and safety, we encourage all healthcare practitioners to stay informed about these changes and take advantage of the opportunities they bring. Together, we can make a positive impact on the lives of individuals and communities affected by opioid use disorder.

### RECOGNIZING HUMAN TRAFFICKING RED FLAGS

The Alabama Human Trafficking Task Force (www.ENDITALABAMA.org) has provided a list of red flags and indicators that can help identify potential victims of human trafficking. While this list is not exhaustive and individual indicators may not necessarily imply a trafficking situation, recognizing several signs may warrant further investigation.

#### **General Indicators That Can Apply to All Victims of Human Trafficking:**

- Lack of legal documentation, such as a valid ID or license for US citizens or appropriate identification for foreign nationals.
- Inability to provide details about their current location or accommodation, claiming to be "just visiting."
- Inconsistencies in their stories.
- Someone speaking on behalf of the individual, limiting their ability to speak for themselves.
- Behavioral signs like fear, anxiety, depression, submission, tension, or nervousness.
- Loss of sense of time or space.
- Avoidance of eye contact.
- Use of false ID papers or aliases.
- Possible substance abuse.
- Lack of control over their own money.

#### **Specific Health Indicators:**

- Malnourishment or overall poor health.
- Signs of physical abuse, including unexplained injuries, bruises, black eyes, burns, cuts, broken bones, broken teeth, and multiple scars.
- Evidence of untreated infections that could have been addressed through routine medical check-ups.
- Drug and/or alcohol addiction.
- Lack of knowledge regarding their last medical exam.
- Reluctance to admit being a victim or ask for help.

#### **Specific Indicators That Apply to Sex Trafficking Victims:**

- Verification of the individual being under 18 years old and involved in the sex industry.
- Verification of the individual being under 18 years old and having a record of prior arrests for prostitution.

Remember, being aware of these indicators can aid in identifying potential human trafficking situations. For more information, please visit <a href="www.polarisproject.org">www.polarisproject.org</a> and the New Jersey Human Trafficking Task Force.



## WELCOMING TWO NEW BOARD MEMBERS TO THE ALABAMA BOARD OF MEDICAL EXAMINERS

We are excited to announce the addition of two new Board members for the 2023-2024 term: Tonya E. Bradley, MD, from Auburn, and Amanda J. Williams, MD, from Montgomery.

Dr. Bradley, an Alabama native, brings a wealth of experience to the Board. She received her bachelor's degree from Auburn University and her medical degree from the University of Alabama School of Medicine (UAB). Following her education, Dr. Bradley completed her



Tonya Bradley, M.D.

postgraduate training at UAB and has been licensed in Alabama since 2000. She specializes in Family Medicine, dedicated to providing comprehensive care to patients.

We are delighted to welcome back Dr. Williams for her second term on the Board. After a brief hiatus, she is returning to contribute her expertise. Dr. Williams is a graduate of Florida State University and the University of South Florida College of



Medicine. She completed her postgraduate training at the University of Pittsburgh Medical Center before deciding to practice psychiatry in the South. Dr. Williams has been licensed in Alabama since 2015.

Amanda Williams, M.D. Please join us in extending a warm welcome to Dr. Tonya E. Bradley and Dr. Amanda J. Williams as they begin their tenure with the Alabama Board of Medical Examiners. We are confident that their knowledge, skills, and dedication will greatly benefit our mission of protecting public health.

# DEA EXTENDS PUBLIC HEALTH EMERGENCY TELEMEDICINE EXCEPTIONS THROUGH NOV. 11, 2023

The Drug Enforcement Administration (DEA) has extended special allowances for rules that were put in place during the public health emergency. These allowances specifically deal with how doctors can prescribe certain controlled substances using telemedicine. The goal is to make it easier for patients to get the medications they need while still ensuring safety and following the rules.

With this extension, healthcare providers can continue using telemedicine to prescribe controlled substances, which means patients can receive their medications through virtual appointments. This is especially helpful when it's difficult or not possible to have in-person visits. The DEA recognizes that telemedicine is essential for providing important healthcare services, especially during uncertain times.

It's important to know that these exemptions will be in effect until November 11, 2023. During this time, doctors can use telemedicine to prescribe controlled substances, but they must follow the specific guidelines and rules that have been established.

To learn more and read all the details about these exemptions, you can check the official notification from the DEA by visiting this link: <a href="https://www.dea.gov/press-releases/2023/05/09/dea-samhsa-extend-covid-19-telemedicine-flexibilities-prescribing">https://www.dea.gov/press-releases/2023/05/09/dea-samhsa-extend-covid-19-telemedicine-flexibilities-prescribing</a>. By staying informed and understanding these updates, healthcare providers can continue giving good care to their patients while adapting to the changing world of telemedicine and prescribing controlled substances.

## PROTECTING PUBLIC HEALTH: EDUCATING PATIENTS ON THE RISKS OF BUYING PRESCRIPTION MEDICATIONS ONLINE



The internet has made buying products and services more convenient than ever, and this includes prescription medications. However, patients may not be aware of the risks associated with purchasing these drugs online. The National Association of Boards of Pharmacy (NABP) has urged us to share this important information about buying medication safely.

NABP has been verifying legitimate internet pharmacies and cataloging illegal online drug sellers for decades. They have identified more than 40,000 websites that fail to comply with NABP patient safety and pharmacy practice standards or applicable laws. Nearly 95 percent of websites offering prescription-only drugs online operate illegally. These websites commonly facilitate the sale of prescription-only medicine without requiring a valid prescription, the sale of medicine that has not been approved or authorized for sale in the patient's jurisdiction, and/or the practice of pharmacy without required licensure in all relevant jurisdictions.

To help patients protect themselves when ordering medications online, NABP provides a Safe Site

Search Tool. Patients can use this tool to check whether a website is verified by NABP or not recommended. They can also look for the .pharmacy domain name for assurance that the website has been verified by NABP. However, many patients may not know about these resources and the importance of verifying online pharmacies.

# LEARN MORE AT SAFE.PHARMACY/ BUY-SAFELY.

Protecting public health is a priority shared by NABP and the Alabama Board of Medical Examiners. By working together to educate patients on the risks of buying prescription medications online, we can help ensure that patients receive safe and effective medications.



The U.S. Food and Drug Administration (FDA) and the Substance Abuse and Mental Health Services Administration (SAMHSA) have released a new guidance highlighting the importance of a patient-centered approach in the treatment of Opioid Use Disorder (OUD). The guidance aims to ensure that counseling and other services are integral components of a comprehensive OUD treatment plan while promoting individualized care.

In the recently published document, the FDA and SAMHSA emphasize that counseling and other supportive services should be offered to patients as part of their treatment journey. However, they make it clear that these services should not be mandated or made contingent upon participation. Instead,

counseling decisions should be made collaboratively between healthcare professionals and the individual patient, considering their unique circumstances and needs.

The FDA and SAMHSA recognize the challenges in connecting patients with counseling and behavioral health resources. However, the guidance emphasizes that these difficulties should not impede practitioners from prescribing buprenorphine, a proven medication for the treatment of OUD. The focus remains on providing accessible and timely care to patients in need.

This new guidance is an important step in enhancing patient care and promoting individualized treatment for Opioid Use Disorder. Healthcare professionals are encouraged to familiarize themselves with the guidance to ensure the delivery of comprehensive and patient-centered care.

To access the full guidance document, click here: FDA/SAMHSA Letter

For more information and resources on Opioid Use Disorder treatment, please visit the <u>SAMHSA store</u> and the <u>FDA website</u>.



Attention all licensees and registrants! We want to inform you about several significant changes that will be taking place in the coming months. Stay informed and stay compliant by noting the following updates:

## Rules Regarding Lasers and Other Modalities Affecting Tissue:

Effective July 17, 2023, amended rules governing the use of lasers and other modalities that affect living tissue will come into effect. It is essential for laser and other modality practitioners to carefully review these changes to ensure compliance.

#### **Laser Registrations:**

Effective immediately, registrations for the use of lasers must be renewed every year. Beginning with the 2024 renewal period that starts in October, licensees will be prompted to renew their laser registrations during the online license renewal process. There is no fee for this renewal.

### New Permit for Bridge Year Graduate Physicians and Reduced Training Requirement:

Commencing on August 1, 2023, new legislation is effective that establishes a permit for limited practice by Bridge Year Graduate Physicians and reduces the postgraduate training requirement for International Medical Graduates.

#### **ACSC Renewals and Continuing Medical Education:**

Starting with the 2024 renewals, ACSC (Alabama Controlled Substances Certificate) holders will be required to certify that they have obtained the biannual two credits of continuing medical education in controlled substance prescribing or addiction. Make sure you fulfill this requirement to maintain your ACSC.

For the most current and up-to-date information on these topics and more, we encourage you to visit our website at www.albme.gov. Stay informed, comply with the changes, and continue providing the best possible care to your patients.



We have important news regarding the latest guidelines released by the Centers for Disease Control and Prevention (CDC) for prescribing opioids in the management of pain. These updated recommendations replace the previous guidelines from 2016, reflecting the CDC's ongoing commitment to enhancing patient care and safety.

The newly expanded guidelines aim to assist healthcare providers in delivering optimal pain care for adult outpatients with both short-term and long-term pain. By improving communication and empowering patients to actively participate in their treatment decisions, these guidelines foster a patient-centered approach to pain management.

Key highlights of the updated guidelines include:

- Assessing the Need for Opioids: The guidelines offer valuable insights into determining whether opioids are the most appropriate treatment option, taking into consideration individual patient factors and exploring alternative approaches to pain management.
- Choosing Opioids and Establishing Dosages: Recommendations focus on selecting the most suitable opioid medications and determining appropriate dosages based on patient characteristics, emphasizing the importance of starting with the lowest effective dose.

- Duration of Initial Prescription and Follow-Up Care: The guidelines provide guidance on determining the appropriate duration of the initial opioid prescription and the importance of follow-up assessments to evaluate treatment effectiveness, potential risks, and the need for ongoing opioid therapy.
- Risk Evaluation and Harm Mitigation: Healthcare providers are encouraged to assess and address the potential risks associated with opioid use, including the risk of opioid use disorder and overdose, by employing strategies such as risk assessment tools, patient education, and close monitoring.

For a comprehensive understanding of these updated guidelines, we invite you to visit the CDC website at <a href="https://www.cdc.gov/mmwr/volumes/71/rr/rr7103a1.htm?s\_cid=rr7103a1\_w">https://www.cdc.gov/mmwr/volumes/71/rr/rr7103a1.htm?s\_cid=rr7103a1\_w</a>. By familiarizing yourself with these evidence-based recommendations, you can enhance your pain management practices and contribute to improved patient outcomes.

We encourage all healthcare providers to integrate these updated guidelines into their practice. By doing so, we can collectively ensure the wellbeing and safety of our patients while providing compassionate and informed care.



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# REPORT OF PUBLIC ACTIONS OF THE MEDICAL LICENSURE COMMISSION AND BOARD OF MEDICAL EXAMINERS

#### **April 2023**

- Apr. 10 Henry R. Emery, Jr., MD (MD.24390), Washaw NC ordered to cease and desist the practice of medicine in Alabama.
- Apr. 19 Janie T. Bush Teschner, MD (MD.14227), Gadsden - the license is placed on probation allowing the supervised return to practice.
- Apr. 27 Trung Nam Nguyen, DO (DO.1864), Tyler TX the Alabama Controlled Substances Certificate is voluntarily surrendered.
- Apr. 27 Emmanuel O. Odi, MD (MD.24167), Birmingham the license

is voluntarily surrendered.

• Apr. 28 - Jessica M. Saucier, PA (PA.2124), Orange Beach - the voluntary restriction is terminated.

#### **May 2023**

• None.

#### **March 2023**

• Jun. 1 - Christopher P. Gay, DO

(DO.687), Anniston - the petition to reinstate license is denied.

- Jun. 1 George S.S. Hipp, MD (MD.28785), Centreville the probationary status is removed; license remains restricted.
- Jun. 7 Scott W. Smith, MD (MD.43125), Mount Pleasant SC - the license is voluntarily surrendered.
- Jun. 9 Catherine Durante, MD (MD.43352), Hoover the Alabama Controlled Substances Certificate is voluntarily surrendered.
- Jun. 16 Robert E. Taylor, MD (MD.21262), Mobile the license is voluntarily surrendered.







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#### **Upcoming BME Meeting Dates**

Jul 20 • Aug 17 • Sept 21

The public portion of each meeting is scheduled for 10 a.m. CT (unless otherwise indicated) in the Dixon-Parker Building at 848 Washington Avenue in Montgomery, AL.

Meeting agendas and a full list of meeting dates and times can be found online at www.albme.gov.

#### **Upcoming MLC Meeting Dates**

Jul 27 • Aug 23 • Sept 27

Meetings are held in the Dixon-Parker Building at 848 Washington Avenue in Montgomery, AL unless otherwise indicated.

#### Have questions or need assistance?

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