



**JOHN R. KASICH**  
GOVERNOR • STATE OF OHIO  

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**Communication Department**

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**OHIO OPENS NEW FRONT IN THE FIGHT AGAINST OPIATE ABUSE**

***Opioid Prescribing Guidelines Established To Prevent Abuse, Save Lives***

COLUMBUS – As part of an ongoing effort to curb the misuse and abuse of prescription pain medications and unintentional overdoses, today Gov. John R. Kasich announced the adoption of new opioid prescribing guidelines for treating patients with chronic, non-terminal pain. Developed by the Governor's Cabinet Opiate Action Team (GCOAT), and in conjunction with more than 40 professional groups, state licensing boards and state agencies, the opioid prescribing guidelines encourage Ohio's clinicians to fully evaluate a patient's situation before prescribing high levels of opioids for long-term use.

"Drug overdoses have reached epidemic proportions over the past decade, and too many Ohio families have felt the pain caused by the misuse and abuse of prescription drugs. We have a serious problem and we can't just sit back and hope things change without action. Together with the medical community, we've established new prescribing guidelines that will take another step to reverse this troubling trend and fix this problem," said Kasich.

Research shows that patients who receive higher doses of prescribed pain medications are at increased risk for overdose and need close supervision and periodic reevaluation. The new guidelines recommend that 80 milligrams Morphine Equivalent Daily Dose (MED) should trigger the prescriber to "press pause" and reevaluate the effectiveness and safety of the patient's pain management plan. The guidelines are intended to supplement, and not replace, the prescriber's clinical judgment.

"It is often said that the first rule of medicine is to 'Do no harm,'" said Dr. Ted Wymyslo, director of the Ohio Department of Health and co-chair of the GCOAT Professional Education Workgroup. "Following these prescribing guidelines will help Ohio's clinicians treat their patients for chronic pain and improve their quality of life while addressing the risk of a deadly overdose."

When prescribing an opioid, pharmacists must record the prescription in the online Ohio Automated Rx Reporting System (OARRS). These new guidelines encourage prescribers to use the data in OARRS so that they will know how much pain medication a patient already is receiving, perhaps from multiple prescribers. A new OARRS tool launched with these prescribing guidelines assists prescribers by calculating a patient's opioid prescriptions into a single MED score for comparison to the 80 MED threshold.

The guidelines also strongly advise prescribers to talk with their patients about managing their chronic pain, the risks of an unintentional overdose from their prescription pain medication, the potential for pain medication abuse, and secure storage of their pain medications to prevent misuse by others.

A new a prescriber-focused website – [opioidprescribing.ohio.gov](http://opioidprescribing.ohio.gov) – will help prescribers learn more about the guidelines. The site also includes resources prescribers can use to incorporate the guidelines into their daily practice; a continuing education video education module, a toolkit and patient resources.

“Developing these guidelines was a long, thoughtful process and we couldn’t have done this without the collaboration and cooperation of the medical community,” said Dr. Bonnie K. Burman, director of the Ohio Department of Aging and co-chair of the GCOAT Professional Education Workgroup. “We are overwhelmed by their support and know that, together, we’ve adopted guidelines that can save lives.”

The guidelines for all opioid prescribers build upon the Kasich Administration’s ongoing efforts to fight prescription drug abuse. In 2011, Gov. Kasich signed House Bill 93 to shut down “pill mills.” In 2012, the Administration adopted prescribing guidelines for emergency departments and acute care facilities. Thus far in 2013, the Ohio State Highway Patrol has seized nearly 50 percent more pills than the 2010-2012 average.

[Click here](#) to read a fact sheet on the new Rx prescribing guidelines.

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