Pain Management Program
St. Joseph's Hospital
268 Grosvenor Street
London, Ontario N6A 4V2
519-646-6019
519-646-6292

PHYSICIAN AGREEMENT LETTER

Dear Doctor:

Your patient has been referred to the outpatient Pain Management Clinic of St. Joseph's Health Care in London either by yourself or another doctor. After our assessment we may recommend the initiation of certain medications or, in some cases, the prescription may be initiated by our clinic physician. As we must discharge patients from follow-up in order to see new patients, we require your agreement that you will take over long-term prescribing of these medications once the treatment regimen is optimized.

Medications which could be recommended or initiated by us may include anti-depressants, antioconvulsants and controlled substances such as opioids and oral cannabinoids.* If the daily dose of opioids prescribed is higher than 200 morphine-equivalents/day, the "watchful" dose suggested by the Canadian Guidelines for Safe and Effective Prescribing of Opioids (2010), the discharge letter from the clinic doctor will provide rationale for the dose.

If you are not the primary care provider for the patient, please ensure this treatment agreement letter is sent to that physician to review. This letter must be signed and received by us in order to accept the referral.

Are you willing to prescribe medications recommended by the St. Joseph's Pain Management Clinic physician including opioids and/or oral cannabinoids?	
Physician Signature:	Physician Name (please print):
*Oral cannabinoids such as Cesamo	et® carry a very low risk of addiction and have no street value.
Sincerely,	
The Physicians at the St. Joseph's Pa	ain Management Clinic
CARING FOR THE BODY, MIND & SPIRIT SINCE	E 1869 STIOSEDH

