

**Adam M. Rubinstein, M.D.**

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**P: (847)-247-0300 | F: (847)-247-8011**

**Policy for Controlled Substance Prescription Management.**

**I have read, and agree to follow, all rules and regulations listed below:**

- Controlled substance medications are regulated by the government due to their potential for misuse. As per law, each prescription can only be provided for a 90 supply (or less).
- I am responsible for protecting my written prescription and my medications. If these are lost, stolen, or used up sooner than prescribed, I will not get an early refill.
- If I allow any other person to have access to my controlled substance prescription, I am committing a felony. This includes a situation in which another person has access to steal the medication.
- Patients must be seen in office every 90 days. It is not acceptable to contact the office for refills if I have not been seen within the past 90 days. At each visit, before leaving the office, patients must schedule a follow-up visit to occur no later than 90 days from the date the prescriptions are provided. This ensures they are seen in a timely manner for the next refills. I agree to keep all appointments as requested by doctor. (for telehealth visits, I will contact the office within 24 hours of next business day to schedule follow-up).
- It is illegal and dangerous to share, sell, or trade my medicine.
- I will not request or seek out other controlled medications from anyone else, including other clinicians, emergency departments, dentists, etc. I understand it is my responsibility to notify all providers involved in my care of my current medication regimen, including any benzodiazepines.
- If another doctor or provider determines a controlled substance prescription is appropriate despite my current regimen, I will call the office that day or next business day to leave a message for Dr. Rubinstein.
- I will use only one pharmacy for all my controlled substance medications. I give Dr. Rubinstein and his staff permission to communicate with the pharmacist about my care and medication.
- I agree to take medication as prescribed. I understand that I can become physically dependent on the medication and may develop serious life-threatening withdrawal symptoms if I stop taking any of them abruptly. I will bring pill bottles with remaining pills and empty wrappers to each visit.

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- I agree to provide a urine or blood sample upon request for testing to ensure I am using my medications correctly, including not abusing illicit substances. I may be tested at random and failure to comply within 24 hours of request will result in discontinuation of my medication.
- If I am unable to give a specimen at the office for any reason, I agree to go to a nearby lab or hospital to provide the urine specimen. Dr Rubinstein will fax the order to any facility.
- If Dr Rubinstein requests a specimen via blood test or saliva, the same rules regarding 24 hour time frame and location of testing apply
- The fee for re-writing lost prescriptions is \$40 per prescription (if the doctor makes an exception based on circumstances. This fee applies if I have not scheduled my follow-up visit prior to the last dose of the final previous supply prescribed.
- If a prescription must be mailed (e.g., when patient is out of town or unable to commute to pick-up at office), we will send via certified mail at an additional \$30 cost for this service.
- If changed or discontinued, the remaining medication must be brought to a local police station or pharmacy for disposal in appropriate medication collection boxes. Every police station in Lake County, IL has a collection box located in the lobby, which is open 24 hours per day.
- I understand Dr Rubinstein has access to the Illinois Prescription Monitoring Program on the internet. This provides information on the date and quantity of every controlled prescription substance I have filled from any valid provider. This data includes pharmacies from every state in the U.S. The doctor considers this information valid and must make decisions based on what is listed, since state and federal regulations require such a policy.
- I understand Dr Rubinstein's records are monitored both online and via surprise, random visits by investigators from the U.S. DEA. His license is at risk if I do not follow every one of these policies listed here.

**Violation of this agreement may result in tapering or discontinuation of my controlled substance. It also may lead to termination of the doctor-patient relationship and referral to the appropriate organization.**

\_\_\_\_\_  
Patient signature (In agreement of these terms)

\_\_\_\_\_  
Date