

Policy 2.600 Graduate Medical Education Committee
Section Resident Support/Conditions for Appointment
Subject Patient Care Activities under the “Residency Program Exemption” to the Arkansas Medical Practices Act, Including Prescribing of Controlled Substances and other Medications
Policy Requirements ACGME Institutional: 1.1 GMEC: 3.300 Moonlighting
Version History Date developed: 10/2022 Revisions Approved: 10/2022, 2/2024 Legal Review: 10/2022

Purpose

To define the policy and procedures for patient care by resident/fellow physicians under the “resident program exemption” of the Arkansas Medical Practices Act (Sub-Chapter 2, 17-95-203, #7) to include use of hospital assigned and personal Drug Enforcement Agency (DEA) numbers.

Definition

In the context of residency and fellowship programs, the term “**patient**” refers to persons with whom a resident/fellow has established a physician-patient relationship as documented in the medical record. This may include peers, nursing or hospital medical staff, or friends who are established patients at the University of Arkansas for Medical Sciences (UAMS) and any of its participating sites and whom the resident/fellow sees in the clinic or appropriate medical setting within the scope of his/her duties within the training program.

Policy

1. Residents/fellows may provide patient care under the “resident program exemption” of the Arkansas Medical Practices Act only for patients as defined above. This exemption is intended to be applicable only for supervised patient care under the auspices of the training program. This restriction includes, but is not limited to, prescribing of controlled substances and other medications.
2. Residents/fellows may use a hospital’s specific DEA number only to prescribe controlled substances to patients (as described above) followed within that hospital’s system. Residents/fellows should follow, and are subject to, the policies and procedures at each training site where they provide care.
3. Residents/fellows may, in the context of their practice in the training program, prescribe controlled substances and other medications only to patients as defined above. Residents/fellows shall not prescribe excessive amounts of controlled substances to any patient, including the writing of an

excessive number of prescriptions for an addicting or potentially harmful drug (Arkansas State Medical Board, Regulation 2).

4. Residents/fellows shall not prescribe controlled substances for their own use or for use by members of their family (Arkansas State Medical Board, Regulation 2).
5. Residents/fellows may prescribe controlled substances only when the resident/fellow has a physician-patient relationship with that patient. This physician-patient relationship shall be clearly documented in the patient's medical record. The reason (i.e., diagnosis and plan of treatment) for each prescription of a controlled substance shall be documented in the medical record.
6. Residents/fellows who hold an Arkansas medical license and a personal DEA number associated with that license may use their personal DEA number in lieu of a hospital assigned DEA number. Residents/fellows who use their personal DEA number in the context of their residency program shall abide by paragraphs 3 – 5 above. Misuse of a personal DEA number may subject the resident/fellow to disciplinary action by the DEA, Arkansas State Medical Board or UAMS.

Each resident/fellow in a training program sponsored by UAMS Regional Centers is assigned a unique identification code composed of several numbered digits. The identification codes must be attached as a suffix when using a hospital's DEA number.

Prescription Writing

In accordance with the Arkansas Department of Health Rules and Regulations Pertaining to Controlled Substances, when writing a prescription for a controlled drug, the resident/fellow must issue the prescription for legitimate medical purposes. The prescription must bear the:

1. Full name and address of the patient;
2. Drug name, strength, dosage form, quantity prescribed, and directions for use;
3. Resident/fellow last name printed as well as the signature of the resident/fellow;
4. Hospital DEA number and the resident/fellow specific identification code or the resident/fellow DEA number; and
5. Date.

Moonlighting Activities

If a resident/fellow practices outside the UAMS system, the resident/fellow must obtain his/her own private DEA number. Obtaining a private DEA number is considered a professional responsibility and will not be paid for by UH, ACH, or the individual clinical departments.

Misuse of DEA Numbers

Misuse of hospital-assigned or personal DEA numbers includes, but is not limited to:

1. Using a hospital's specific DEA number to prescribe controlled substances to patients not followed within that hospital's system;
2. Prescribing excessive amounts of controlled substances to any patient, including the writing of an excessive number of prescriptions for an addicting or potentially harmful drug to a patient;
3. Prescribing controlled substances by a resident/fellow for his/her use or for the use of his/her immediate family;
4. Prescribing controlled substances by a resident/fellow for peers, nursing or hospital medical staff, or friends without clear documentation of a physician-patient relationship in the medical record; or

5. Any violations of the provisions of this policy.

Misuse of any DEA number will be reported directly to the Dean and could result in disciplinary action up to and including dismissal from the residency/fellowship program. Individuals found misusing hospital assigned or personal DEA numbers must undergo a “for cause” drug screen, and if indicated, a diagnostic and/or therapeutic intervention and subsequent indicated drug screens during the remaining time within the residency/fellowship program.

Resources:

<https://www.armedicalboard.org/Professionals/pdf/MPA.pdf>

