

Appendix 1: A fictional example of the prescriber feedback

PLEASE KEEP FOR YOUR RECORDS*

Dr FirstName LastName

Patient Name	SUBURB: Suburb	ACCOMMODATION: Community	
Medicine		Last Dispensed	Other Prescriber
Oxycodone hydrochloride (OxyNorm) Cap 10mg		12/06/17	no
Tramadol hydrochloride (Tramal SR 50) modified release tab 50mg		30/05/17	no
Nitrazepam (Mogadon) Tab 5mg		25/04/17	yes

Home Medicines Review claimed:	none claimed in the last two years
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Daily average Oral Morphine Equivalent (OME) per month (mg)

July 16	Aug 16	Sept 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	March 17	April 17	May 17	June 17
0	0	0	0	0	10	10	22	27	30	30	27

PLEASE CONSIDER THE REVIEW POINTS BELOW.****Patient received opioid therapy for longer than three months****Suggested actions:**

- Review use of opioid, taper the dose and cease where appropriate Yes
- Help patient understand how pain works and consider referral to an appropriate allied healthcare team to support this Yes

Rationale: Current guidelines suggest that there is no evidence to support the long-term use of opioids as effective in resolving chronic pain or improving function. Opioid therapy for longer than 90 days is associated with continuing use, opioid use disorders, overdose and worse functional status.

Patient co-prescribed a benzodiazepine**Suggested actions:**

- Review use of opioid Yes
- Review use of benzodiazepine Yes

Rationale: Current guidelines suggest that this combination can depress the central nervous system and increases the risk of death by 15 fold compared to taking neither medicine.

*An electronic PDF version of each individual patient's information is available at www.veteransmates.net.au

** Based on dispensings of medicines in the 12 month period July 2016 to June 2017 according to the DVA Health Claims Database. See therapeutic brief for references.