



# Voluntary NonOpioid Directive

Office of Injury Prevention • July 2018

## Use of the Form under the Act

A “voluntary nonopioid directive form” (the “Form”), as established under and defined in section 4 of Public Act 17-131, an act Preventing Opioid Diversion and Abuse (the “Act”), available at: <https://www.cga.ct.gov/2017/ACT/pa/2017PA-00131-R00HB-07052-PA.htm>, enables an individual to voluntarily request that prescribing practitioners not prescribe opioid drugs and not issue a medication order for opioid drugs for such individual. This form is also known as an “opioid opt-out form.”

A person who does not wish to be issued a prescription or medication order for an opioid drug may file this Form with a prescribing practitioner. Upon receipt of the Form from the patient, a prescribing practitioner shall document receipt of the Form in the patient’s medical record. The patient and the patient’s duly authorized guardian or health care proxy or representative may revoke the directive contained in said Form, orally or in writing, for any reason, at any time.

CT DPH encourages patients to complete the Form in consultation with their primary care providers or substance use disorder (SUD) treatment providers; however, such consultation is not required for the Form to be valid.

## Liability under the Act

Pharmacists: An electronically transmitted prescription to a pharmacy shall be presumed to be valid. A pharmacist shall not be held in violation of the Act for dispensing a controlled substance in contradiction to a person’s Form.

Prescribing Practitioners: A prescribing practitioner who willfully fails to comply with a patient’s voluntary nonopioid directive form may be subject to disciplinary action pursuant to section 19a-17 of the general statutes. No prescribing practitioner acting with reasonable care shall be liable for damages in a civil action, subject to criminal prosecution or deemed to have violated the standard of care for such prescribing practitioner’s profession for refusing to issue a prescription or medication order for an opioid pursuant to a person’s Form.

Emergencies: No emergency department prescribing practitioner acting with reasonable care as the patient's practitioner or as the medical control officer for emergency medical services personnel, shall be liable for damages in a civil action, subject to criminal prosecution or deemed to have violated the standard of care for a prescribing practitioner’s profession for issuing a prescription for or administering a controlled substance containing an opioid to a person who has a voluntary nonopioid directive form, when, in such prescribing practitioner's professional medical judgment, a controlled substance containing an opioid is necessary and such prescribing practitioner had no knowledge of the patient's voluntary nonopioid directive form at the time of issuance or administration.

Guardian or Health Care Proxy or Representative: No person acting in good faith as a patient’s duly authorized guardian or health care proxy or representative shall be liable for damages in a civil action or subject to criminal prosecution for revoking or overriding a voluntary nonopioid directive form.

## Resources

- CDC Guideline Information for Prescribers: <http://www.cdc.gov/drugoverdose/prescribing/providers.html>
- CDC Guideline for Prescribing Opioids for Chronic Pain: <https://www.cdc.gov/mmwr/volumes/65/rr/rr6501e1.htm>

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