



Dear Doctor:

Thank you very much for your referral for consultation on Interventional Pain Management approaches to management of your patient. At the Vanderbilt University Interventional Pain Management Practices we do appreciate your referral, and we want to provide the maximum benefit from our consultations to your patients. The intent of this letter is to inform you of the current practice protocols for the Vanderbilt University Interventional Pain Management Program; so that a collaborative plan of care for the patient may be formed. It is hoped that this will ultimately translate to better lines of communication, patient satisfaction and outcomes.

We are currently functioning as a consultative clinic, primarily providing recommendations and/or appropriate interventions. This means that we cannot maintain long-term continuity of care for most of our patients with chronic pain.

For all complex pain patients, we emphasize comprehensive initial evaluations, which may take weeks. This comprehensive evaluation includes a multidisciplinary focus. It is very important for the patient also to understand that a multidisciplinary management to his/her pain will be undertaken, which will include his/her active participation in therapies necessary for management of his/her pain. This will include all or any of the following: **medication management (both narcotic and non-narcotic modalities); interventional pain management therapies; psychological and/or psychiatric feedback and input; psychological biofeedback sessions or group therapy; random blood and/or urine toxicology tests or physical therapy modalities.** Active participation by the patient is required and non-compliance to the treatment plan as advised by the Consultants may result in referral back to the referring provider. Of course, such a referral back to you will include a treatment plan. No pharmacotherapy may be considered until full evaluation is complete, and we ask that the referring/ primary provider continue to maintain pain and /or adjunctive medications till the Interventional Pain Management Center decides to take over the management of the patient's pain medication regimen. In many cases, as mentioned above, we will maintain a strictly consultative role and will make recommendations only. **We emphasize that the Consultative process will be structured to be an efficient one, and inconvenience both patients and referring providers to the minimum extent possible.**

After the initial evaluation, if it is felt that the patient may benefit from short-term (6-12 months) treatment in this clinic, we require that patients have a treating physician willing to assume prescriptive responsibilities once the patient is on a stable regimen. To minimize miscommunication between patients and physicians, and to ensure our patients will have continuity upon discharge from this clinic, we will not write prescriptions for patients who do not have a physician willing to assume this responsibility upon transition from our care. In turn, we would only recommend prescription of medications which have been used by the patient in a safe, appropriate, and stable manner.

Intermittent reevaluations are available when appropriate, and we are always available to answer any questions you may have during this process.

Sincerely yours,

Vanderbilt Interventional Pain Center