**Policy of the 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**  
**Number: 2.600**  
**Date Developed: 4/97**  
**Last Review/Revision: 10/06, 1/2010, 5/2014**  
**Replaces: previous policy, Use of Hospitals’ DEA Numbers, dated 5/03**  
**ACGME Requirement: Institutional IV.B.2.**

**Purpose**

To define the policy and procedures for patient care by resident physicians (includes fellows) 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 DEA numbers. (Also, see related GMEC Policy 3.300, Moonlighting and Malpractice Insurance Coverage While Moonlighting)

**Definition**

In the context of residency (and fellowship) programs, the term “**patient**” refers to persons with whom a resident 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 UH, ACH, CAVHS, SVI or BHMC-LR and whom the resident sees in the clinic or appropriate medical setting within the scope of his/her duties within the residency program.

**Policy**

1. Residents 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 residency program. This restriction includes, but is not limited to, prescribing of controlled substances and other medications.

2. Residents may use a hospital’s specific DEA number only to prescribe controlled substances to patients (as described above) followed within that hospital’s system.

3. Residents may, in the context of their practice in the residency program, prescribe controlled substances and other medications only to patients as defined above. Residents 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 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 may prescribe controlled substances only when the resident 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 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 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 to disciplinary action by the Drug Enforcement Administration, Arkansas State Medical Board or UAMS.

Each resident in residency programs sponsored by the UAMS College of Medicine is assigned unique identification codes composed of several numbered digits. The identification codes are described below and, where indicated, a specific code must be attached as a suffix when using a hospital’s DEA number.

**University Hospital & Arkansas Children’s Hospital:** A unique 4-digit identification code is assigned to each resident. The 4-digit identification code must be attached as a suffix when using the DEA number of UH or ACH. The DEA number and code are to be used exclusively for patients of UH or ACH and the associated clinics.

**Central Arkansas Veterans Healthcare System (CAVHS):** A specific 3-digit identification code is assigned to each resident. This 3-digit identification code must be attached as a suffix when using the CAVHS DEA number. The CAVHS DEA number is used only for prescriptions filled within the CAVHS system.

**St. Vincent’s Infirmary Medical Center:** During rotations at SVI, residents may use the SVI DEA number only when writing prescriptions for inpatients of SVI.

**Baptist Health Medical Center – Little Rock:** During rotations at BMHC - LR, residents must use their own private DEA number, or the attending physician must write all prescriptions which require a 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 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’s last name printed as well as the signature of the resident;
4. Hospital DEA number and the resident’s specific identification code or the resident’s DEA number; and
5. Date.
Moonlighting Activities
If a resident practices outside the UAMS system, the resident 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 for his/her use or for the use of his/her immediate family;
4. Prescribing controlled substances by a resident 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.