



SUBSTANCE ABUSE

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STEPS PROGRAMS CAN TAKE TO HELP COMBAT SUBSTANCE ABUSE

- Educate residents to raise awareness about stress, fatigue, and other conditions that contribute to substance abuse
- Recognize the prevalence of substance abuse. Be proactive, and establish procedures to address the problem and assist in recovery
- Educate graduate medical trainees (i.e. residents and fellows) and attending faculty about your program/institution's substance abuse policies
- Increase awareness of the resident's professional and ethical responsibility to physician colleagues with substance-abuse issues, including how to find assistance for a colleague they suspect is addicted
- Differentiate myths from reality regarding substance abuse for residents, their families, and attending physicians
- Define a clear, confidential process for referral and self-referral of residents and faculty with substance problems
- Consider the program's modeling of the social use of drugs, such as alcohol. At "liver rounds" or at social events. How is responsible alcohol use modeled and supported? Are there alcohol-free social events? Who is responsible for providing a designated driver for residents who drink at these events?
- Have a low threshold for referral for evaluation/management (this is particularly relevant to programs directors who provide medical care for patients with these conditions). It is easy to blur the boundaries of the program director/faculty member's teaching and evaluative role with that of a treating physician. Stay within your role. Use an outside source for referral and evaluation
- Think carefully through who needs to know. It is important to preserve the trainee's confidentiality and to allow him/her the opportunity get the needed help without everyone in the residency knowing about the problem. Many residency programs are like families or small communities. It is often useful to have a discussion to confront the group's perceived "need to know" directly, reminding them of their responsibility as professionals to respect the medical confidentiality of others. Refer them to their resident colleague for answers. Restrict confidential information; give it out only to those who need to be informed. You may check with human resources or your legal department if you are uncertain.



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STEPS PROGRAMS CAN TAKE TO HELP COMBAT SUBSTANCE ABUSE (CONT'D)

- Anticipate a possible query from the local press if anything is a matter of public record (a DWI, a listing of investigations of the state medical board, etc)
- Know the policies on substance abuse and prescribing from the state medical boards. Integrate these policies into residency education as part of the ACGME competency, *professionalism*. Orient new residents to prescribing policies from your state licensing board, on such situations as:
 - “Hallway prescribing” for a colleague or team member whom you are not seeing formally as a patient and without a documented medical record is inappropriate
 - Prescribing medications (even antibiotics) for self, colleagues, friends, and family members may be specifically prohibited if done outside the boundaries of an established patient-physician relationship. In some states, the consequences may include the loss of the medical license