

Daniel Daylamani, M.D., PLLC

Controlled Substance Policies

Effective Date: 02/22/23

Important Notice

- I **ONLY** prescribe controlled substances in **Colorado** as this is where my practice is based.
- I do **NOT** prescribe controlled substances in **Texas** and **Washington State**.
- I do prescribe standard psychiatric medications that are not controlled substances in all three states.

I am very conservative about prescribing controlled substances. Controlled substances are “controlled” because they are medications with a high potential for abuse or dependence. Controlled substances that are typically prescribed by psychiatrists are stimulant medications for Attention Deficit Hyperactivity Disorder (such as Adderall, Ritalin, Concerta and Vyvanse) or benzodiazepines for anxiety disorders (such as Xanax, Ativan, Clonazepam or Valium).

Policies Regarding Controlled Substance Prescribing:

- There is no guarantee that you will be prescribed a controlled substance, regardless of your diagnosis or past treatment. This is up to my clinical judgment.
- All patients being prescribed a controlled substance must follow up every 3 months (at minimum).
- All patients being prescribed a controlled substance may be subject to drug screening before starting medication and randomly during the course of treatment. A positive drug screen for other substances of abuse may be grounds to discontinue your prescription.
- Your prescription will be discontinued if there is evidence of abuse or misuse. This can include, but is not limited to, taking more than prescribed, running out of medication early, concurrently obtaining similar prescriptions from other providers, giving/selling your medication to others or using these substances for the purposes of intoxication.
- If a controlled substance prescription is lost or stolen, it will not be replaced until you are due for your next prescription. It is your responsibility to store your medication in a safe and secure location.
- I do not maintain patients on long-term benzodiazepines and I do not prescribe benzodiazepines for daily use as I do not feel that this is in your best interest. I will only prescribe benzodiazepines for short-term use on an as-needed basis in rare circumstances.
- I will not prescribe controlled substances above the FDA recommended maximum dose.
- The diagnosis of ADHD is highly subjective and relying solely on patient’s self-reporting of symptoms can lead to overdiagnosis of ADHD. If I feel that there is uncertainty about your diagnosis, you may be referred for “Neuropsychological Testing” with a doctorate level neuropsychologist as this is the gold standard for diagnosing ADHD. Preferably, new patients seeking treatment with me for ADHD will have neuropsychological testing done before their first visit.

Before your first appointment, you must sign an acknowledgment in the “Questionnaire” section of the patient portal stating that you’ve received, read, understand and agree to these policies.