|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Strongly agree** | **Agree** | **SA+A** | **Disagree** | **Strongly disagree** | **D+SD** |
| I have an excellent understanding of current CDC guidelines for prescribing opiates-pre | 0 | 2 | 2 | 7 | 1 | 8 |
| I have an excellent understanding of current CDC guidelines for prescribing opiates-post | 4 | 6 | 10 | 0 | 0 | 0 |
|  |  |  |  |  |  |  |
| I have an excellent understanding of the state MI laws regarding opiate prescribing-pre | 0 | 1 | 1 | 6 | 3 | 9 |
| I have an excellent understanding of the state MI laws regarding opiate prescribing-post | 3 | 6 | 9 | 1 | 0 | 1 |
|  |  |  |  |  |  |  |
| I understand how to safely taper a patient's opiate dose-pre | 0 | 3 | 3 | 5 | 2 | 7 |
| I understand how to safely taper patient's opiate dose-post | 7 | 2 | 9 | 1 | 0 | 1 |
|  |  |  |  |  |  |  |
| When documenting a chronic pain visit, I use the chronic pain template and address at least the following: Dose of opiate, review of MAPS, review of controlled substance -and MI Start talking contracts, evaluation of effectiveness of opiate and assessment of side effects-pre | 0 | 2 | 2 | 4 | 4 | 8 |
| When documenting a chronic pain visit, I use the chronic pain template and address at least the following: Dose of opiate, review of MAPS, review of controlled substance-and MI Start talking contracts, evaluation of effectiveness of opiate and assessment of side effects-post | 7 | 3 | 10 | 0 | 0 | 0 |
|  |  |  |  |  |  |  |
| I assure urine drug screens are done at least annually-pre | 1 | 7 | 8 | 1 | 1 | 2 |
| I assure urine drug screens are done at least annually-post | 9 | 1 | 9 | 0 | 0 | 0 |
|  |  |  |  |  |  |  |
| I see my chronic pain patients at least every 3 months-pre | 2 | 6 | 8 | 1 | 1 | 2 |
| I see my chronic pain patients at least every 3 months-post | 9 | 1 | 10 | 0 | 0 | 0 |
|  |  |  |  |  |  |  |
| I understand who to prescribe naloxone to and feel comfortable explaining how to use naloxone to rescue patients in an opiate overdose-pre | 0 | 0 | 0 | 5 | 5 | 10 |
| I understand who to prescribe naloxone to and feel comfortable explaining how to use naloxone to rescue patients in an opiate overdose-post | 4 | 6 | 10 | 0 | 0 | 0 |
|  |  |  |  |  |  |  |
| I Understand the utility of the CURB (controlled substance utilization board) and how to access it-pre | 0 | 4 | 4 | 4 | 2 | 6 |
| I Understand the utility of the CURB (controlled substance utilization board) and how to access it-post | 7 | 3 | 10 | 0 | 0 | 0 |
|  |  |  |  |  |  |  |
| I feel comfortable managing opiate patients-pre | 0 | 4 | 4 | 6 | 0 | 6 |
| I feel comfortable managing opiate patients-post | 7 | 3 | 10 | 0 | 0 | 0 |