

Should I Become Involved?

Health care professionals often avoid dealing with drug impairment in their colleagues. There is a natural reluctance to approach a co-worker suspected of drug addiction. There is the fear that speaking out could anger the co-worker, resulting in retribution, or could result in a colleague's loss of professional practice.

Many employers or co-workers end up being "enablers" of health care practitioners whose professional competence has been impaired by drug abuse. Addicted colleagues are often given lighter work schedules, and excuses are made for their poor job performance. Excessive absences from the work site are often overlooked. Drug impaired co-workers are protected from the consequences of their behavior. This allows them to rationalize their addictive behavior or continue their denial that a problem even exists.

If you recognize the aforementioned signs or symptoms in a co-worker, it's time to demonstrate concern. You may jeopardize a person's future if you cover up or don't report your concerns. Many well-educated, highly trained, and experienced health care practitioners lose their families, careers, and futures to substance abuse. Tragically, some health care workers have even lost their lives to their drug addiction because the people who saw the signs and symptoms of their drug use refused to get involved.

By becoming involved, you can not only help someone who may be doing something illegal, but more importantly, your action could affect the safety and welfare of your addicted employee or coworker **AND** those patients or the public who may come in contact with him or her.

What If I Know That Drugs Are Being Sold or Stolen?

Drug abuse and drug dealing are serious problems that should be handled by qualified professionals. If you suspect that a drug deal is in progress, **do not** intervene on your own. Contact security or notify the police.

If you are a DEA registrant and become aware of a theft or significant loss involving controlled substances, you must immediately report the theft or loss to the nearest DEA office as well as your local police department.

What Can I Do to Help?

For some employees, the mere fact that their supervisor talks to them about their poor work performance is enough to help them change. For others, however, the problem may be more severe and require more drastic measures. The threat of losing a job may have more influence on a drug abuser than a spouse's threat to leave or a friend's decision to end a relationship. Many drug abusers will seek help for their problem if they believe their job is at stake, even though they have ignored such pleas from other people important in their life.

Drug addicts can recover, and effective help is available. Encourage your co-worker or employee to seek drug treatment assistance. Treatment programs range from self-help to formal recovery programs. A number of state licensing boards, employee assistance programs, state diversion programs and peer assistance organizations will refer individuals and their families to appropriate counseling and treatment services. These services will maintain the confidentiality of those seeking assistance to the greatest extent possible.

It is not the intent of this publication to reduce or deny the use of controlled substances where medically indicated. Nothing in this guide should be construed as authorizing or permitting any person to do any act that is not authorized or permitted under federal or state laws.



Drug Addiction in Health Care Professionals



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Additional information on DEA's Diversion Control Program is available at: www.deadiversion.usdoj.gov

he abuse of prescription drugs—especially controlled substances—is a serious social and health problem in the United States today. People addicted to prescription medication come from all walks of life. However, the last people we would suspect of drug addiction are health care professionals—those people trusted with our well-being. Yet health care workers are as likely as anyone else to abuse drugs.

Even though the vast majority of DEA registered practitioners comply with the controlled substances law and regulations in a responsible and law abiding manner, you should be cognizant of the fact that drug impaired health professionals are one source of controlled substances diversion. Many have easy access to controlled substance medications; and some will divert and abuse these drugs for reasons such as relief from stress, self-medication, or to improve work performance and alertness.

This guide will help you recognize the signs that may indicate that a colleague or co-worker is diverting controlled substances to support a substance abuse problem.

What Are My Responsibilities?

- You have a legal and ethical responsibility to uphold the law and to help protect society from drug abuse.
- You have a professional responsibility to prescribe and dispense controlled substances appropriately, guarding against abuse while ensuring that patients have medication available when they need it.
- You have a personal responsibility to protect your practice from becoming an easy target for drug diversion. You must become aware of the potential situations where drug diversion can occur and safeguards that can be enacted to prevent this diversion.

How Do I Recognize a Drug Impaired Co-Worker?

Drug abusers often exhibit similar aberrant behavior. Certain signs and symptoms may indicate a drug addiction problem in a health care professional. Have you observed some of the following signs?

- Work absenteeism –absences without notification and an excessive number of sick days used;
- Frequent disappearances from the work site, having long unexplained absences, making improbable excuses and taking frequent or long trips to the bathroom or to the stockroom where drugs are kept;
- Excessive amounts of time spent near a drug supply. They volunteer for overtime and are at work when not scheduled to be there;
- Unreliability in keeping appointments and meeting deadlines;
- Work performance which alternates between periods of high and low productivity and may suffer from mistakes made due to inattention, poor judgment and bad decisions;
- Confusion, memory loss, and difficulty concentrating or recalling details and instructions. Ordinary tasks require greater effort and consume more time;
- Interpersonal relations with colleagues, staff and patients suffer. Rarely admits errors or accepts blame for errors or oversights;
- Heavy “wastage” of drugs;
- Sloppy recordkeeping, suspect ledger entries and drug shortages;
- Inappropriate prescriptions for large narcotic doses;
- Insistence on personal administration of injected narcotics to patients;
- Progressive deterioration in personal appearance and hygiene;
- Uncharacteristic deterioration of handwriting and charting;
- Wearing long sleeves when inappropriate;
- Personality change - mood swings, anxiety, depression, lack of impulse control, suicidal thoughts or gestures;
- Patient and staff complaints about health care provider’s changing attitude/behavior;
- Increasing personal and professional isolation.