

MEDICATION ASSISTED TREATMENT (MAT) AGREEMENT

As a patient in Mile Square Health Center's (MSHC) MAT program for the treatment of substance use disorders, I freely and voluntarily agree to accept this treatment contract. Failure to follow the terms of this contract may cause me to be dismissed from the program, referred to a higher level of care, or subject to prosecution for illegal activities.

- I understand that medication alone is not sufficient treatment for my illness, and I agree to consider participation in the education and therapy offered at MSHC or within the community as part of this treatment program.
- I will keep, and be on time, to all my scheduled appointments with my providers and to conduct myself in a courteous manner when at MSHC. If I no-show to an appointment without calling in advance, and present to clinic without an appointment, I may be required to follow-up for daily dosing of medication (weekdays only) until a scheduled appointment can be arranged with my primary treatment provider.
- I agree to abide by all treatment group expectations.
- I will not sell, share, or give any of my medication to another person.
- I will not conduct any illegal or disruptive activities in the clinic or surrounding facilities
- I will participate in random urine drug screens and I will not tamper with urine drug screens.*
- My prescriptions will be given to me ONLY at my regularly scheduled appointments.
- I will keep my medicine in a safe place and away from children. It will not be replaced if lost, damaged, or stolen.
- If I obtain medication from any sources outside the MSHC that I will inform MSHC staff. MSHC staff will check the state Prescription Monitoring Program report regularly.
- I understand that mixing buprenorphine with other medications, especially benzodiazepines such as Klonopin, Ativan, Valium, Xanax, alcohol, and other drugs is dangerous and potentially deadly.
- I will not take controlled substances that are not prescribed by MSHC unless discussed with my provider at MSHC. I can transfer my psychiatry and primary care to MSHC if needed.
- I will take my medication as my prescriber has instructed and I will not alter the way I take my medication without first consulting my prescriber.
- I will bring in my remaining medication tablets or films to each visit with my prescriber when requested.
- I am aware that I will have the opportunity to be screened for pregnancy, hepatitis, and HIV.
- I will not consume poppy seeds while in this treatment program. Poppy seed consumption will not be accepted as an excuse for a positive opiate screen.
- I will not use drugs or alcohol on clinic property.
- I will keep my contact info (email and/or telephone number) up to date with MSHC. I will return messages/calls from the clinic within 24 hours.
- Positive urine screens for opiates and/or other illicit substances will be evaluated by the MAT treatment team.
- If I am discharged from this program, I may be reconsidered at a future time to see if medication assisted treatment may be an appropriate option for me.
- I understand that my records, course of treatment, and medical care will be kept in an electronic medical record.

 These notes will be visible to any healthcare professional involved in my care.
- My treatment providers have my permission to contact any other health care provider to obtain or provide information about my treatment with buprenorphine.

information about my treatm	ent with buprenorphine.	
Printed Patient Name/DOB	Signature	Date
Witness:	Date:	



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*URINE DRUG SCREENING (UDS) INFORMATION

- The purpose of UDS at MSHC is to monitor for relapse and adherence to treatment and our procedures do not meet criteria for legal proceedings.
- UDS will be performed "in house" and the specimen will be sent to an outside lab for further testing on occasion.
- Inability to provide a urine sample will be considered a positive UDS.
- Tampering with a urine specimen can be grounds for dismissal from the program.

*URINE DURG SCREENING (UDS) PROCEDURE FOR GROUP VISITS

- Arrive to clinic 30 minutes before group appointments to allow for UDS.
- Report any relapses, changes to medications, and medical conditions to staff.
- Remove outer clothing, empty pockets, wash hands.
- Take collection cup to restroom and provide sample.
- Give sample to staff and wash hands.
- Collect your belongings and wait for group to begin.