- RCW 18.57.285 Pain management rules—Repeal—Adoption of new rules. (1) By June 30, 2011, the board shall repeal its rules on pain management, WAC 246-853-510 through 246-853-540.
- (2) By June 30, 2011, the board shall adopt new rules on chronic, noncancer pain management that contain the following elements:
  - (a) (i) Dosing criteria, including:
- (A) A dosage amount that must not be exceeded unless an osteopathic physician and surgeon first consults with a practitioner specializing in pain management; and
- (B) Exigent or special circumstances under which the dosage amount may be exceeded without consultation with a practitioner specializing in pain management.
- (ii) The rules regarding consultation with a practitioner specializing in pain management must, to the extent practicable, take into account:
- (A) Circumstances under which repeated consultations would not be necessary or appropriate for a patient undergoing a stable, ongoing course of treatment for pain management;
- (B) Minimum training and experience that is sufficient to exempt an osteopathic physician and surgeon from the specialty consultation requirement;
  - (C) Methods for enhancing the availability of consultations;
  - (D) Allowing the efficient use of resources; and
  - (E) Minimizing the burden on practitioners and patients;
- (b) Guidance on when to seek specialty consultation and ways in which electronic specialty consultations may be sought;
- (c) Guidance on tracking clinical progress by using assessment tools focusing on pain interference, physical function, and overall risk for poor outcome; and
- (d) Guidance on tracking the use of opioids, particularly in the emergency department.
- (3) The board shall consult with the agency medical directors' group, the department of health, the University of Washington, and the largest association of osteopathic physicians and surgeons in the state.
  - (4) The rules adopted under this section do not apply:
- (a) To the provision of palliative, hospice, or other end-of-life care; or
- (b) To the management of acute pain caused by an injury or a surgical procedure. [2010 c 209 § 3.]