

# PMP-201

# Instructor Guide

## INTRODUCTION

Thank you for your commitment to educating the next generation of physicians and pharmacists about using the Texas Prescription Monitoring Program (PMP) to improve patient safety and health outcomes. The PMP-201 module provides a variety of resources that have been carefully designed and curated for use in the classroom or in the field. This content is ideal for learners who understand the basics of using the PMP and have completed the [PMP-101 unit](#).

This unit includes:

- Learning objectives
- Links to lesson resources
- Classroom activities
- Next steps

## LEARNING OBJECTIVES

Upon completion of this unit, your learners will be able to:

1. Review PMP data to identify patient risk factors.
2. Explain how the PMP can help prevent implicit bias.
3. Use non-stigmatizing and person-first language when discussing substance use disorders.
4. Facilitate difficult conversations with patients regarding prescription drug misuse.
5. Connect patients with harm reduction strategies, treatment and recovery services.

## LESSON RESOURCES

The teaching material to cover the above objectives can be found in the following formats at [txpmp.org](http://txpmp.org):

1. **PMP-201 Handout** - This document provides advanced information about evidence-based health communication best practices for navigating challenging conversations with patients about concerning PMP data. It can be printed and passed out in the classroom or in the field. It can also be circulated electronically to serve as a pre-class reading.
2. **PMP-201 PowerPoint Slides** - These slides are pre-built for easy use as a classroom presentation.
3. **PMP Toolkit: A guide to using the Texas Prescription Monitoring Program** - This concise resource contains basic information about the PMP, along with evidence-based communication guidelines and talking points.
4. **The links below provide important information and training for using the PMP to provide patient-centered care.**
  - a. [PMP Continuing Education](#)
  - b. [Prescription Monitoring Program – Helpful or Harmful?](#)
  - c. [CDC: What healthcare providers need to know about Prescription Monitoring programs.](#)
  - d. [Words matter when discussing addiction.](#)

## CLASSROOM ACTIVITIES

The following activities are designed to help your learners understand and reflect on content presented in this lesson.

### Role Playing Activity: Challenging Conversations

**Setup Instructions:** For this activity, have some students volunteer to role play the scenarios provided below. For each scenario, ask students to take on the role of either a patient or a provider. Then, have them read the scenario out loud and act out a short 5-minute role play for their peers. After the role play, use the discussion questions provided below to debrief and dive deeper into the topic with the entire class.

#### Pharmacist Scenario

A patient walks into a pharmacy and says they need their next pain medication refill early. The pharmacist checks the PMP and they see the patient has overlapping prescriptions from multiple prescribers in the last 30 days. The pharmacist is concerned about the patient's potential misuse and risk for overdose. As the pharmacist, talk with the patient about your concerns.

#### Prescriber Scenario

A patient on opioid therapy is visiting a new prescriber for the first time. The patient tells the prescriber about their history of using hydrocodone to help with pain from a past injury. After checking the PMP, the prescriber sees the patient's dosage exceeds 50 MME, putting the patient at risk of overdose. How would you handle this conversation?

#### Discussion questions:

- What communication best practices did you use or notice being used during the conversation?
- What challenges did you encounter during the conversation?
- What would you have said or done differently?
- What other harm reduction strategies could the provider take to help their patient?
- How does the PMP in this scenario benefit the patient and the provider?

#### Points for the instructor to cover:

As the instructor and the observer during the roleplay, be sure to discuss the following topics in the debrief.

- Non-stigmatizing, person-first language
- Motivational interviewing techniques
- Active listening
- Cognitive empathy

- Naloxone use
- Harm reduction strategies
- Teach back method

## LESSON QUIZ

You are encouraged to administer a lesson quiz to ensure that your learners have mastered all the pre-stated objectives. Select questions from the bank below or create your own quiz questions. *(Correct answers are marked in blue.)*

### 1. Which of the following are potential patient risk factors?

- a. Talking too fast
- b. Shaky hands
- c. Obtaining prescriptions from several prescribers and/or pharmacies**
- d. Dosages at or above 50 MME/day**

*Note:* While patients may demonstrate physical signs of inebriation or withdrawal, these are not considered risk factors. Relying on PMP data ensures you use objective data about a patient's controlled substance prescription history when initiating a conversation and making clinical decisions.

### 2. Which of the following actions are suggested while discussing PMP results with a patient?

- a. Sit at eye-level with the patient**
- b. Seek consent in decision making**
- c. Explain up front that you will not be prescribing them a controlled substance
- d. Communicate results via text

*Note:* Active listening techniques such as sitting at eye-level with the patient and seeking consent while making decisions signal you are engaged with the patient and help them feel heard. These techniques build patient rapport and make it easier to get the patient the help they need.

### 3. Using non-stigmatizing, person-first language helps create better patient outcomes. Keeping that in mind, how could you rephrase the following sentence?

*"An addict came in to my office today, I could tell they were doctor shopping"*

*Answer: A person with Opioid Use Disorder came to my office today attempting to obtain multiple prescriptions.*

*Note:* “Addict” and “doctor shopping” are terms that contribute to stigma and do not help patients get the care they need. Using person-first language is important to reduce stigma and create better health outcomes.

**4. The \_\_\_\_\_ method refers to having the patient recap the main points of the conversation in their own words and fill in the gaps wherever needed.**

- a. Recap method
- b. Memorization
- c. Teach back
- d. Recollection

*Note:* To establish understanding between the patient and the provider, the patient is asked to patient recap the main points of the conversation in their own words with the provider filling in the gaps as needed.

**5. \_\_\_\_\_ is defined as an unconscious association, belief, or attitude toward a social group.**

- a. Racism
- b. Favoritism
- c. Implicit Bias
- d. Stigma

**6. Mark True or False. Using motivational interviewing techniques can help facilitate difficult patient conversations.**

- a. True
- b. False

*Note:* Using motivational interviewing techniques such as asking open-ended questions and prompting the patient to explore their experiences help build rapport and make patients feel included in the decision-making process.

**7. Mark True or False. The active listening technique refers to listening to a patient talk while taking office notes.**

- a. True
- b. False

*Note:* Active listening technique refers to using both non-verbal and verbal cues such as making eye contact, nodding, and repeating what you hear back to the patient.

**8. Which of the following is a harm reduction strategies?**

- a. Co-prescribing or dispensing naloxone
- b. Motivational interviewing
- c. Telling a patient they cannot come back until they seek recovery resources

**9. The ability to recognize another person’s feelings as valid even if they do not resonate with you is called:**

- a. Affective empathy
- b. Cognitive empathy
- c. Behavioral empathy
- d. Conditional empathy

*Note:* The innate ability to understand or share another person’s emotions and respond appropriately is called affective empathy, and can quickly lead to burnout. Cognitive empathy allows clinicians to express empathy without taking on the emotions of their patients.

## NEXT STEPS

Congratulations on successfully implementing the PMP-201 unit in your class! We hope you and your students enjoyed learning about the PMP.

We would love to hear about your experience implementing this lesson plan. Email your feedback to [updates@txpmp.org](mailto:updates@txpmp.org).

Also, be sure to check out the Texas PMP website to stay updated about the Prescription Monitoring Program’s educational offerings.