



**Tennessee Board of Medical Examiners
Amphetamine Task Force Committee Meeting**

Wednesday, November 13, 2019

MINUTES

The Amphetamine Task Force Committee of the Tennessee Board of Medical Examiners was called to order at 7:30 a.m. in the Poplar Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243 by Dr. Deborah Christiansen, Committee Chair.

Committee members present: Deborah Christiansen, MD, Committee Chair
Dr. Reginald Dillard, Pharmacy
Michael Baron, MD, TMF Director

Staff present: Mary K. Bratton, JD, Chief Deputy General Counsel
Francine Baca-Chavez, General Counsel
Rene Saunders, MD, Medical Consultant, BME
Angela Lawrence, BME Executive Director

Dr. Deborah Christiansen opened the meeting by asking for feedback regarding sectioning out amphetamine stimulant and stimulant like. Ms. Mary K. Bratton advised it would be determined by how the task force would like to regulate the substances and if all were going to be treated the same they would not need to be sectioned out. Ms. Bratton asked Dr. Christiansen about removing the research project section. All agreed that section could be removed. Dr. Michael Baron suggested instead of listing every DSM and Non DSM disorder for which these drugs can be prescribed to say FDA approved indications as the disorders are going to change. The language will include other off label use may be justified by documentation of appropriate medical rationale and evidence based research. Discussion took place regarding the language of dispensing medication for remuneration and the words dispensing and prescribing. Ms. Bratton offered there are times in the statute when dispensing means dispensing and prescribing and other places where is just means dispensing. Ms Bratton suggested before rule making hearing that the task force work on clarifying whether this rule is about dispensing and

prescribing or strictly dispensing and to also consider the rule with the current language of *Physicians who elect to dispense medication for remuneration must comply with the following*. The task force wanted to move forward the history portion of the rule and will revisit this item. Dr. Christensen presented the language regarding the history requirements as follows: Prior to treatment with amphetamine, amphetamine-like substances or central nervous system stimulants a complete history and physical shall be documented in the medical record. The initial history shall include information about medical conditions, psychiatric conditions, substance use, social interactions and family history. The medical history shall include information about cardiac function and arrhythmias. The physical examination shall include vital signs, mental status and cardiac exam. Ongoing monitoring shall include height and pediatric patients weight, pulse and blood pressure. It was discussed language should be included for psychiatrist that don't typically do the examination to say *or have the results of a physical performed by a primary care provider*. Discussion took place regarding how recent the physical exam from a primary care provider would need to. A year was suggested and agreed upon. It was then discussed going over FDA approved dosage should be documented. Language previously discussed included when prescribing stimulant amphetamine doses greater than the FDA approved maximum daily dose the record shall indicate justification for this dose. It was agreed this language was helpful and should be included. The discussion returned to history required. The physical exam and ongoing treatment requirements were amended to read as follows: The physical examination shall include at a minimum vital signs, mental status and cardiac exam and Ongoing monitoring shall include at a minimum height for pediatric patients, weight, pulse and blood pressure and mental status exam as well as ongoing response to medication. Ms. Bratton offered to present changes at the next task force meeting deleting the research projects and remuneration language if the task force would like to differentiate between dispensing and prescribing stimulants. The task force felt that it doesn't matter if it is dispensing or prescribing the standard should be the same. The task force felt they would present the changes discussed to the Board and see if another meeting would be required.

The meeting adjourned at 8:20 am.