

# TADISO TIMES

ISSUE 179

March 2017

## IMPORTANT NEWS.....

### WEAPON POLICY

Any weapon brought on Tadiso property will result in immediate discharge from the program.

The following items are considered weapons:

- KNIVES
- SCREWDRIVERS
- PEPPER SPRAY
- BOX CUTTERS
- SCISSORS
- NAIL CLIPPERS
- PAINT SCRAPERS
- ANY SHARP OBJECT

PATIENT AND STAFF SAFETY ARE A PRIORITY AT TADISO.

## DAYLIGHT SAVINGS TIME

Daylight savings time begins on March 12. Please turn your clock forward 1 hours.



Daylight Savings Time in the United States

In the US, "Fast Time" as it was called then, was first introduced in 1918 when President Woodrow Wilson signed it into law to support the war effort during World War I. The initiative was sparked by Robert Garland, a Pittsburgh industrialist who had encountered the idea in the Great Britain. Today he is often called the "Father of Daylight Saving".

Only seven months, later the seasonal time change was repealed. However, some cities, including Pittsburgh, Boston, and New York, continued to use it until President Franklin D. Roosevelt instituted year-round DST in the United States in 1942.

Benjamin Franklin Thought of This First.....American inventor and politician Benjamin Franklin wrote an essay called "An Economical Project for Diminishing the Cost of Light" to the editor of The Journal of Paris in 1784. In the essay, he suggested, although jokingly, that Parisians could economize candle usage by getting people out of bed earlier in the morning, making use of the natural morning light instead.



Your Health and Daylight Saving Time  
Daylight Savings Time can affect both your body clock and health. Studies show that there is an increase in both heart attacks and road accidents in the days after clocks are set forward 1 hour in spring.

## Colorectal Cancer

Of cancers affecting both men and women, colorectal cancer (cancer of the colon and rectum) is the second leading cancer killer in the United States, but it doesn't have to be. Screening can find precancerous polyps—abnormal growths in the colon or rectum—so they can be removed before turning into cancer. Screening also helps find colorectal cancer at an early stage, when treatment often leads to a cure. If you are 50 years old or older, get screened now.

### Key Facts

The best way to reduce your colorectal cancer risk is to get screened regularly beginning at age 50.

About 1 in 3 adults (23 million) between 50 and 75 years old is not getting screened as recommended.

Colorectal cancer affects men and women of all racial and ethnic groups.

Colorectal polyps and colorectal cancer don't always cause symptoms, especially at first.

### Prevention Tips

If you're 50 years old or older, talk to your doctor about getting screened.

If you're younger than 50 years old but may have a higher risk of colorectal cancer, ask your doctor if you should start screening before age 50.

Learn your family history of cancer and tell your doctor if you think you may have a higher risk.

Don't smoke.

Get enough physical activity and limit your alcohol consumption.

Talk to your doctor if you have blood in or on your stool (bowel movement); stomach pain, aches, or cramps that don't go away; or are losing weight and you don't know why.



# PRESCRIPTION DRUG MONITORING PROGRAM

## INFORMATION FOR PATIENTS

To prevent prescription drug abuse and protect the health and safety of our community, the Pennsylvania Department of Health collects information on all filled prescriptions for controlled substances. Controlled substances are drugs that have potential for abuse or dependence.

The information from this program helps health care providers safely prescribe controlled substances and helps patients get the treatment they need.

## YOUR RIGHTS

Patients have the right to review and correct the information collected by the Prescription Drug Monitoring Program (PDMP) once per calendar quarter at no cost. If you would like a copy of your information, complete the Patient Prescription History Request Form in the Security area and mail or email it to the address on the form. Patients can receive a copy of their information more than once per calendar quarter for a fee of \$20 per copy.

## PRIVACY AND CONFIDENTIALITY

Health information in the PA PDMP is protected by the Federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) and other state laws. The HIPAA privacy rule and state law protects the privacy of individuals' health information. Prescription records will be maintained for seven years. Authorized users of the PA PDMP system include prescribers, dispensers, the attorney general's office (on behalf of law enforcement), designated commonwealth personnel, and medical examiners or county coroners. Prescription information is confidential and is not subject to the act of February 14, 2008 (P.L.6, No.3), known as the Right-to-Know Law, likelihood of causing dependence when abused.

### Q: WHAT IS A PRESCRIPTION DRUG MONITORING PROGRAM (PDMP)?

A: The PDMP is a statewide program that collects information about controlled substance prescription drugs that are dispensed to patients within the state.

### Q: WHY DOES PENNSYLVANIA HAVE A PDMP?

A: The Office of the Attorney General (OAG) operated the former PDMP. Previously, the PDMP required the reporting of Schedule II controlled substances only. The legislature passed a new law, [Act 191 of 2014](#), which requires monitoring Schedule II through Schedule V controlled substances. The Pennsylvania Department of Health is responsible for the development and the day-to-day operations of the new system.

### Q: WHAT IS THE PURPOSE OF THE NEW PDMP?

A: The purpose of the PDMP established by [Act 191 of 2014](#) is two fold:

To be used as a tool to increase the quality of patient care by giving prescribers and dispensers access to a patient's controlled substance prescription medication history, which will alert medical professionals to potential dangers for purposes of making treatment determinations; and

To aid regulatory and law enforcement agencies in the detection and prevention of fraud, drug abuse and the criminal diversion of controlled substances.

### Q: HOW DOES THE PDMP WORK?

A: As of January 1, 2017, dispensers are required to collect and submit this information to the PDMP no later than the close of the subsequent business day. The PDMP stores the information in a secure database and makes it available to healthcare professionals and others as authorized by law.

### Q: WHAT ARE CONTROLLED SUBSTANCES?

A: Controlled substances are drugs that have varying degrees of potential for abuse or dependence. Drugs and other substances that are considered controlled substances under the Controlled Substances Act (CSA) are divided into five schedules. Substances are placed in their respective schedules based on whether they have a currently accepted medical use in treatment in the United States, their relative abuse potential, and their relative abuse potential, and likelihood of causing dependence when abused.

Tadiso will be checking the PDMP for all patients on a monthly basis and whenever needed. It is best to be honest with your prescribing doctor and Tadiso physicians. This is for your health and safety. Coordination of care is essential.