

March 4, 2021  
The Honorable Shane E. Pendergrass  
Chairman  
Health and Government Operations Committee  
Maryland House  
Annapolis, MD 21401

Dear Chairwoman Pendergrass and Health and Government Operations Committee Members,

As a health care professional, and person who has experienced multiple surgeries for which I was prescribed a number of opioids, I am writing in support of HB 1125, the Prescription Drug Monitoring Program – Prescribers of Opioids – Notification Requirement.

As a Registered Nurse in a community setting, I can attest to the vast differences in opioid-related patient care and treatment statewide. The affected citizens of Maryland deserve better. Some prescribers are following the Centers for Disease Control guidance and others are not. A superior standard of treatment must be put into place ensure that all at-risk patients receive consistent care.

My personal experience, as a patient, have shown me firsthand that not all prescribers follow guidelines because they have been suggested. I have not been educated on the risks of opioids I have been prescribed, nor offered a co-prescription for an opioid overdose antagonist. I do not believe this has been done on purpose, I believe it has been a matter of oversight. After my first surgery, my caregiver was not educated in the hospital on this aspect of my discharge, though was verbally given instruction on a myriad of other issues that may arise- the opioid education was in my discharge paperwork and offered a website for more information. This is concerning, as I was prescribed a number of opioids at once, along with muscle relaxers, and am an asthmatic. I exercised due diligence by keeping naloxone in my home for those who cared for me after my surgery, in the event I experienced an adverse reaction. Not all patients know what I know- that an overdose reversal antidote exists, or how to access this life-saving resource. It was an unfortunate realization that significant inequities exist in how we are treating patients for pain.

As medical professionals, it is our job to provide consistent, quality care to the residents of Maryland. With a consistent educational and co-prescribing reporting requirement across all prescribers, it will ensure that patients at risk of overdose will have the same care no matter where in Maryland the at-risk patient is treated. We face many challenges in treating substance-use disorder and patients with chronic pain, these challenges could be lessened.

I ask that you consider supporting HB1125 from not only a medical perspective, but a patient perspective. We should not be relying on recommendations to ensure patient safety, we should be mandating prescribers follow proven guidelines that mitigate the risks of prescribed opioids.

Sincerely,  
Shari Hames, RN  
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Woodbine, MD

