

4731-11-03

Utilization of anabolic steroids, schedule II controlled substance cocaine hydrochloride, and schedule II controlled substance stimulants.

(A) A physician shall not:

- (1) Utilize anabolic steroids, growth hormones, testosterone or its analogs, human chorionic gonadotropin ("HCG"), or other hormones for the purpose of enhancing athletic ability.
- (2) Utilize the schedule II controlled substance cocaine hydrochloride for a purpose other than one of the following:
 - (a) As a topical anesthetic in situations in which it is properly indicated; or
 - (b) For in-office diagnostic testing for pupillary disorders.
- (3) Utilize a schedule II controlled substance stimulant in any of the following circumstances:
 - (a) For purposes of weight reduction or control;
 - (b) When the physician knows or has reason to believe that a recognized contra-indication to its use exists; or
 - (c) In the treatment of a patient who the physician knows or should know is pregnant.

(B) Utilizing a schedule II controlled substance stimulant:

- (1) Before initiating treatment utilizing a schedule II controlled substance stimulant, the physician shall perform all of the following:
 - (a) Obtain a thorough history;
 - (b) Perform an appropriate physical examination of the patient; and
 - (c) Rule out the existence of any recognized contra-indications to the use of the controlled substance stimulant to be utilized.
- (2) A physician may utilize a schedule II controlled substance stimulant only for one of the following purposes:
 - (a) The treatment of narcolepsy, idiopathic hypersomnia, and hypersomnias due to medical conditions known to cause excessive sleepiness;
 - (b) The treatment of abnormal behavioral syndrome (attention deficit disorder, hyperkinetic syndrome), and/or related disorders;

- (c) The treatment of drug-induced or trauma-induced brain dysfunction;
 - (d) The differential diagnostic psychiatric evaluation of depression;
 - (e) The treatment of depression shown to be refractory to other therapeutic modalities, including pharmacologic approaches, such as antidepressants;
 - (f) As adjunctive therapy in the treatment of the following:
 - (i) Chronic severe pain;
 - (ii) Closed head injuries;
 - (iii) Cancer-related fatigue;
 - (iv) Fatigue experienced during the terminal stages of disease;
 - (v) Depression experienced during the terminal stages of disease; or
 - (vi) Intractable pain, as defined in rule 4731-21-01 of the Administrative Code.
 - (3) Upon ascertaining or having reason to believe that the patient has a history of or shows a propensity for alcohol or drug abuse, or that the patient has consumed or disposed of any controlled substance other than in strict compliance with the treating physician's directions, the physician shall perform both of the following:
 - (a) Reappraise the desirability of continued utilization of schedule II controlled substance stimulants and shall document in the patient record the factors weighed in deciding to continue their use; and
 - (b) Actively monitor such patient for signs and symptoms of drug abuse and drug dependency.
- (C) A violation of any provision of this rule, as determined by the board, shall constitute any or all of the following:
 - (1) "Failure to maintain minimal standards applicable to the selection or administration of drugs," as that clause is used in division (B)(2) of section 4731.22 of the Revised Code;
 - (2) "Selling, giving away, personally furnishing, prescribing, or administering drugs for other than legal and legitimate therapeutic purposes," as that clause is used in division (B)(3) of section 4731.22 of the Revised Code;

- (3) "A departure from, or the failure to conform to, minimal standards of care of similar practitioners under the same or similar circumstances, whether or not actual injury to a patient is established," as that clause is used in division (B)(6) of section 4731.22 of the Revised Code.

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Certification

Date

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