

# Board of Registration in Pharmacy

## Pharmacy Substance Use Disorder Program (PSUD)

### PSUD HANDBOOK

#### **Background**

In accordance with Massachusetts General Laws Chapter 112 § 24H, the Massachusetts Board of Registration in Pharmacy (Board) established a rehabilitation program to assist pharmacist, pharmacy interns and pharmacy technicians whose competency was impaired by the use of, or dependence on, alcohol and/or other drugs to return to pharmacy practice. This voluntary program is a non-disciplinary approach to the problem of substance abuse among pharmacist, pharmacy interns and pharmacy technicians.

The Pharmacy Substance Use Disorder Program (PSUD) is a five-year abstinence-based program designed to protect the public health, safety and welfare by establishing adequate safeguards to maintain professional standards of pharmacy practice while monitoring and supporting participants' ongoing recovery and their return to safe pharmacy practice.

The rehabilitation program provides assistance to pharmacist, pharmacy intern and pharmacy technician participants by developing and monitoring individualized substance abuse recovery plans. PSUD *may* serve as a voluntary alternative to the Board's complaint resolution process, provided the pharmacist, pharmacy interns and pharmacy technician cooperates with the recommended recovery program and fully complies with the requirements of the ***Consent Agreement for PSUD Participation (CAPP)*** and with monitoring of his/her continued abstinence from all substances of abuse until the program is successfully completed.

Participants assume financial responsibility for all aspects of their application to, and their participation in, PSUD.

#### **Mission**

The mission of the Pharmacy Substance Use Disorder Program (PSUD) is to assist pharmacist, pharmacy interns and pharmacy technician who have problems with alcohol and/or other drugs to return to practice, while protecting the public health, safety and welfare.

#### **Definitions**

An understanding of the following terms will assist the reader to better comprehend the information in the sections of the Handbook that follow.

**PSUD Assessment:** a comprehensive bio-psychosocial history of the pharmacist, pharmacy interns or pharmacy technician by a skilled provider meeting criteria established by PSUD for Licensed Mental Health Professionals (Designated Provider). The Assessment includes recommendations for PSUD Participation CAPP provisions.

**Chemical Dependency:** a dysfunctional pattern of human response evidenced by habituation, tolerance and the psychological and/or physiological compulsive use of or addiction to any mood/mind altering drug (including alcohol) to the extent that such use interferes with function in important areas of that person's life.

**The Consent Agreement for PSUD Participation (CAPP)** is a legally binding document entered into by the PSUD participant as a condition of acceptance into the Program. By signing the CAPP, the participant agrees that should s/he fail to successfully complete participation in PSUD, either by withdrawal from the Program or by termination from the Program for noncompliance with the terms of her/his CAPP, s/he agrees to voluntarily surrender her/his pharmacist, pharmacy intern or pharmacy technician license.

**Designated Providers:** a licensed mental health professional meeting certain licensing and credentials set by PSUD to complete an assessment and treatment plan.

**Discharge:** the release of a participant from PSUD by the Board based on a recommendation from REC. This occurs after the participant has successfully fulfilled the 5-year CAPP responsibilities.

**Licensee/Participant:** a pharmacist, pharmacy intern or pharmacy technician licensed to practice in the state of Massachusetts who meets all PSUD admission criteria and is voluntarily participating in PSUD.

**Drug Testing Management Company (DTMC):** a Board-approved organization which provides random, supervised collection and testing of urine, blood, hair and/or saliva specimens for the express purpose of screening for the presence of alcohol and/or drugs.

**Monitoring:** the oversight and tracking of a PSUD participant's adherence to program requirements and his/her CAPP.

**Noncompliance:** failure of a PSUD participant to adhere to any or all of the CAPP provisions.

**Progress Reports:** periodic reporting by PSUD participants, their employers and the providers involved in their care which addresses and tracks participants' progress of recovering from chemical dependency or substance abuse.

**Relapse:** the resumption of the use of alcohol and/or drugs (physiological relapse), but may also include the return to old patterns of behavior (emotional relapse). For purposes of this regulatory program, physiological relapse refers to any break in abstinence.

**Release of Information Forms:** documents, signed by PSUD participants, which give legal permission for PSUD staff to request or share confidential information.

**Substance Abuse:** a dysfunctional pattern of human response characterized by excessive, inappropriate or unhealthy use of chemical substances.

**Rehabilitation Evaluation Committee (REC):** a group of individuals knowledgeable in the field of chemical dependency and/or psychiatric disorders, appointed by the Board in accordance with M.G.L., Chapter 112, § 24H, who, with the assistance of the PSUD Supervisor, assess, plan, implement and evaluate the treatment plans of licensees participating in PSUD.

**Pharmacy Substance Use Disorder Program (PSUD):** the Substance Use Rehabilitation Program, developed and governed by the Massachusetts Board of

Registration in Pharmacy, is a structured program designed to assist pharmacist, pharmacy intern or pharmacy technicians with alcohol and/or drug problems.

**Pharmacy Substance Use Disorder Supervisor:** a currently licensed Massachusetts Registered Pharmacist and demonstrated professional expertise in the field of chemical dependency and substance abuse, who serves as a liaison between the Board, REC, PSUD participants, treatment providers and others and oversees participants' compliance with the provisions of their CAPP.

**Termination:** the discontinuation of the pharmacist, pharmacy intern or pharmacy technician's participation in PSUD due to voluntary withdrawal from the Program or noncompliance with the CAPP provisions.

### **Complaints**

For a pharmacist, pharmacy intern or pharmacy technician whose substance abuse has resulted in a complaint against his/her pharmacist, pharmacy intern or pharmacy technician license, PSUD participation may be a voluntary alternative to the Board's usual complaint resolution process. Completion of the five-year PSUD program allows pharmacist, pharmacy intern or pharmacy technicians to maintain their licenses and avoid a record of license discipline. Complaints are closed upon a pharmacist, pharmacy intern or pharmacy technician's admission to PSUD, and dismissed upon successful completion from the program.

### **License Status**

During any period in which you have a full practice restriction, your publicly viewable license will be "non-disciplinary restriction". During all other periods of your participation in the program, your publicly viewable license status will be "non-disciplinary conditions". Once you have successfully completed the rehabilitation program, typically after 5 years, your license will not reflect any discipline relating to your participation in this program or related to the event that caused entry into the program. Any pre-existing discipline, or discipline based on non-compliance with the rehabilitation program will be listed as it is for all licensees.

### **Admission to PSUD**

Massachusetts licensed pharmacist, pharmacy intern or pharmacy technician who have a substance abuse problem may apply for admission to PSUD. Most pharmacist, pharmacy intern or pharmacy technician who apply have a related complaint against their pharmacist, pharmacy intern or pharmacy technician license for some substance abuse-related problem, but pharmacist, pharmacy intern or pharmacy technician may apply in the absence of any license complaint.

**The application process** may take from one to three months, depending on the applicant's individual circumstances.

### **Length of PSUD**

PSUD is a five-year program and participation begins on the date that a participant's CAPP is signed by the Board's designee.

### **Eligibility Criteria for Admission to PSUD**

1. The pharmacist, pharmacy intern or pharmacy technician must have a valid Massachusetts pharmacist, pharmacy intern or pharmacy technician license, or be determined by the Board to be eligible to hold such a valid license.

2. The pharmacist, pharmacy intern or pharmacy technician must agree in writing to refrain from practicing in pharmacist, pharmacy intern or pharmacy technician practice pending review of his/her PSUD application and acceptance into PSUD.
3. The pharmacist, pharmacy intern or pharmacy technician must submit a completed application to PSUD.
4. At his/her own expense, the pharmacist, pharmacy intern or pharmacy technician must obtain a written assessment and recommendation for admission to PSUD from a substance abuse specialist (Designated Provider) meeting PSUD approved criteria.
5. The pharmacist, pharmacy intern or pharmacy technician must agree to remain abstinent from all substances of abuse, including alcohol, while participating in PSUD.
6. The pharmacist, pharmacy intern or pharmacy technician must attend and complete a PSUD admission orientation.
7. The pharmacist, pharmacy intern or pharmacy technician must be able to document that he/she has enrolled in the Board-approved urine toxicology testing program before attending the admission orientation.
8. The pharmacist, pharmacy intern or pharmacy technician must sign a CAPP, the terms of which are specified by REC and approved by the Board.
9. The pharmacist, pharmacy intern or pharmacy technician must acknowledge that the goal of PSUD is to monitor pharmacist, pharmacy intern or pharmacy technician with substance abuse problems who hold a valid Massachusetts pharmacist, pharmacy intern or pharmacy technician license, to return to safe and competent pharmacist, pharmacy intern or pharmacy technician practice, while protecting public health and safety.
10. The pharmacist, pharmacy intern or pharmacy technician's admission to PSUD must be approved by the Board.

#### **PSUD Admission**

1. Pharmacist, pharmacy intern or pharmacy technician contacts the Board's PSUD Supervisor for an application packet and the Supervisor mails it to the pharmacist, pharmacy intern or pharmacy technician within three days.
2. The PSUD Supervisor receives a completed PSUD application from the pharmacist, pharmacy intern or pharmacy technician and contacts the pharmacist, pharmacy intern or pharmacy technician to provide the criteria of a Designated Provider (DP) to schedule an admission assessment.
  - The pharmacist, pharmacy intern or pharmacy technician must call the DP within five days to schedule an admission assessment.
  - The DP will schedule an admission assessment within ten days of contact from the pharmacist, pharmacy intern or pharmacy technician, and will inform the PSUD Supervisor of the appointment date.
3. At the admission assessment, the DP obtains all appropriate releases of information authorizations and documentation of treatment by appropriate providers; body fluid toxicology screening is done.
4. The DP, upon receipt of the admission assessment fee from the pharmacist, pharmacy intern or pharmacy technician, forwards his/her written assessment to the PSUD Supervisor within thirty days, or informs the PSUD Admission Coordinator if the assessment process will exceed thirty days.
5. The PSUD Supervisor receives and reviews the admission assessment, medical records, and PMP information and determines the applicant's eligibility in conjunction with REC and recommends admission directly to the Board.
6. The pharmacist, pharmacy intern or pharmacy technician whose application for admission to PSUD is approved is sent a copy of an individualized CAPP, information

about enrollment in the Board-approved DTMC, and is notified by PSUD Supervisor of the scheduled PSUD admission orientation time and date.

- If a pharmacist, pharmacy intern or pharmacy technician decides to withdraw from the admission application process, information that was obtained during the admission application process about a pharmacist, pharmacy intern or pharmacy technician's substance abuse problem is forwarded to the Board.

### **Admission Orientation to PSUD**

1. An overview of the program is provided, and there is an opportunity for the applicant to get answers to all questions about the program.
2. Each person entering PSUD must agree to the terms and conditions of, and sign, the CAPP on the day of orientation.
3. The CAPP is then signed by the Board's designee. Once it has been signed by all appropriate parties, a signed original CAPP will be mailed to the pharmacist, pharmacy intern or pharmacy technician. The CAPP becomes effective, and participation begins on the date that the CAPP is signed by the Board's designee.

### **Note to the Participant**

It is advisable for the PSUD participant to keep a copy of his/her CAPP in a safe, accessible place for personal reference.

### **Consent for PSUD Participation (CAPP)**

This is a legally binding document that must be signed by each participant as a condition of admission to PSUD. The CAPP outlines the individual participant's plan requirements as well as has an Individualized Rehabilitation Program (IRP) approved by REC. Each CAPP is signed by the Participant and the Board's Executive Director. The initial CAPP stipulations once established and approved by the Board, can only be changed by recommendation of REC with a new IRP executed. The updated IRP is signed by the PSUD Program Supervisor and the Participant as well approved by the Board of Pharmacy is applicable. A participant's failure to comply with the terms of the CAPP will result in termination from PSUD and referral to the Board for disciplinary action.

### **Confidentiality**

All files pertaining to a pharmacist, pharmacy intern or pharmacy technician's participation in the PSUD are kept strictly confidential. Participants admitted into the program are not reported to any disciplinary database. When a pharmacist, pharmacy intern or pharmacy technician has successfully completed PSUD, all PSUD records are sealed, and any related complaints are dismissed.

While PSUD participation is confidential, communication among PSUD staff and the participants, participants' therapists, employers and other appropriate individuals is necessary, as specified in the CAPP, and as permitted by the pharmacist, pharmacy intern or pharmacy technician's signed authorization for information about the pharmacist, pharmacy intern or pharmacy technician's PSUD participation to be disclosed.

Information obtained during the PSUD application process and during PSUD participation is *not* kept confidential if the pharmacist, pharmacy intern or pharmacy technician is terminated from, or withdraws from the PSUD application process or from PSUD participation.

## **Monitoring of Compliance**

Each participant is required to report for monitoring sessions with the PSUD Supervisor and REC on a quarterly basis, as outlined in his/her individual CAPP. Monitoring session reporting months for each participant are listed on the face sheet of each participant's CAPP.

Each participant is required to submit documentation of his/her compliance with the terms of his/her CAPP, on PSUD approved forms, to each monitoring meeting. Required documentation includes, but is not limited to: Licensee's Self Assessment Report; pharmacist, pharmacy intern or pharmacy technician's Supervisor Report; Individual Therapist/Treatment Provider Report; Meeting Record; and Health Care/Medication Report.

Failure to provide the required documentation is considered to be non-compliance with the CAPP and may result in termination from PSUD.

**Relapses and any significant changes in work or living situations must be reported to a PSUD Supervisor immediately.**

## **Pharmacist, Pharmacy Intern or Pharmacy Technician Practice**

As part of the CAPP, each participant is subject to pharmacist, pharmacy intern or pharmacy technician practice restrictions.

## **Applications for CAPP Changes**

All requests for CAPP change(s) must be made in writing and forwarded to the PSUD Supervisor.

CAPP changes will only be considered after the participant has demonstrated compliance with all CAPP provisions and documentation requirements prior to the request. The participant may be required to provide supporting recommendations from therapists, employers, etc.

Requests are only considered at specified timeframes as outlined in the CAPP.

All CAPP changes must be reviewed and approved by REC. The participant is required to attend the REC meeting to discuss the change(s). The participant will be advised of REC's decision in writing. At the REC meeting, if approved, both the pharmacist, pharmacy intern or pharmacy technician and the PSUD Supervisor will sign duplicate original Amendments (changes) to the CAPP; one retained by PSUD and one for the pharmacist, pharmacy intern or pharmacy technician's record. The signed Amendment will not be made effective until 10 business days following the meeting with REC to allow for the Board's Approving Authority to review and sign the Monitoring Meeting Minutes. All original CAPP provisions remain in full force and effect until officially changed.

## **On-Going Assessment**

The PSUD participant is required to meet with REC to discuss his/her recovery status. Meetings are scheduled to discuss requests for CAPP changes, relapses, noncompliance with a CAPP, or other concerns. The participant may also request a meeting with REC to discuss certain issues or changes, or to request additional support.

## **Relapse**

In the event of a relapse, a PSUD participant who is employed in a patient care/clinical setting is removed from practice until cleared to return by REC or its designee. Upon receipt of

information that a participant has relapsed, a REC Supervisor will notify the participant and her/his employer(s) that the pharmacist, pharmacy intern or pharmacy technician may no longer practice pharmacy. The PSUD participant is also required to notify his/her employer(s) that he/she is restricted from pharmacy practice.

A PSUD participant in non-patient care settings is individually evaluated by PSUD Supervisor to determine whether continued practice after a relapse is safe.

Therapists and pharmacy employers are required to report all breaks in a participant's abstinence to PSUD. In addition, the PSUD participant is required to self-report relapses to the PSUD Supervisor.

Upon report to PSUD of a participant's relapse, the participant must be evaluated by a Designated Provider (DP) within ten days.

The DP will send a written report of the relapse evaluation to the PSUD Supervisor and the evaluation will be reviewed by REC. Upon review of the relapse evaluation, REC will proceed with appropriate action. Relapses will be evaluated and managed on an individual basis.

### **Discharge**

Routine discharge of a participant from PSUD occurs after successful completion of five years in the Program, unless otherwise stipulated by the CAPP. Upon discharge, the record of the participant will be sealed.

### **Noncompliance**

The PSUD participant is required to be in compliance with the recovery plan and all provisions of the CAPP developed by REC and approved by the Board. Any failure to comply with the provisions of the CAPP, including CAPP changes and reporting requirements, is cause for termination from PSUD.

### **Termination/Withdrawal**

Termination of a participant for noncompliance with the CAPP, or participant withdrawal will result in suspension of the participant's pharmacist, pharmacy intern or pharmacy technician license.

### **Relocation outside Massachusetts**

A PSUD participant must immediately notify the PSUD Supervisor of intentions to relocate outside the Commonwealth of Massachusetts. REC will review the participant's relocation plans to determine whether the participant may remain in PSUD.

### **Applying for a License in another state while participating in PSUD**

A PSUD participant who applies for a license by reciprocity to another state should involve the PSUD Supervisor, who will attempt to work collaboratively with other Board(s) of Pharmacy in the reciprocity process.

### **PSUD Participants with Dual or Multiple Licenses**

A pharmacist, pharmacy intern or pharmacy technician entering PSUD with a current license in another state(s) shall be required to have his/her current out-of-state license(s) held in his/her PSUD file. Out-of-state licenses that are renewed while the pharmacist, pharmacy intern or pharmacy technician is a PSUD participant must also be forwarded to the PSUD Supervisor.

## **Therapy Requirements**

Each PSUD participant is required to be in formal substance abuse therapy for the time period specified in his/her CAPP. Each participant is responsible for providing all therapists with:

- a copy of the CAPP, including a copy of any amendments to the CAPP;
- Memorandum to the Individual Therapist/Treatment Provider Report and/or the Peer Support Group; and
- PSUD standardized reporting forms.

Therapists must agree to submit to PSUD on a quarterly basis a report regarding the participant's progress in therapy, and any specifics required by the individual CAPP. Therapists must also agree to immediately report any concerns about a participant's recovery and/or relapses to the PSUD Supervisor.

Selection of a therapist is an important element of PSUD. Each participant shall choose a therapist who has demonstrated education and experience in the field of chemical dependency/substance abuse, and who is willing to collaborate with PSUD and fulfill the necessary program requirements.

## **Random Drug and/or Alcohol Testing**

PSUD CAPPs require that the PSUD participant undergo random, supervised testing of appropriate body fluids for the express purpose of monitoring compliance to the CAPP. The PSUD participant is expected to comply with all requests for testing.

There is a single, Board-approved designated Drug Testing Management Company (DTMC) to provide such services. All DTMC fees are the responsibility of the PSUD participant

A PSUD participant's failure to comply with the DTMC and the PSUD policy and procedures for random supervised testing will result in termination of the participant from PSUD. Failure to report for testing, failure to report for testing within the designated time period, or failure to provide a specimen or a sufficient specimen will be considered a positive test result.

## **DTMC Testing Procedures:**

- Participant calls a toll-free number every day to determine if he/she is required to be tested on that date.
- Participant reports to one of many available testing sites and provides the required specimen according to DTMC requirements.
- The DTMC submits a bill to each participant monthly. A participant who does not pay the DTMC bill in a timely manner will be suspended from testing until the bill is paid in full.
- Participant's daily call history, including missed calls and failure to report for testing, as well as all test results is reported electronically to the PSUD Supervisor on a daily basis.
- Participants who are enrolled in Opioid Substitution Therapy on admission will have additional requirements.

## **Self-Help Groups**

Each participant in PSUD is required to regularly attend self-help group meetings, as specified in his/her CAPP. Alcoholics Anonymous, Narcotics Anonymous, Cocaine Anonymous, A Way of Life, Rational Recovery, and Women for Sobriety are the group meetings which are PSUD-approved. Each participant is required to join a group and obtain a sponsor.

## **Self Assessment Reports**

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Each participant in PSUD is required to submit a written self-report on a PSUD standardized form to each PSUD monitoring meeting. Information about the pharmacist, pharmacy intern or pharmacy technician's recovery progress and life changes is to be included in the report.

Each participant is required to attend 12-Step meetings and a PSUD-approved professional peer support group.

Al-Anon and Adult Children of Alcoholics meetings are **not** acceptable in fulfilling the number of required group meetings, unless stipulated in the CAPP.

Each PSUD participant is required to submit a list of meetings attended, unless agreed by PSUD.

Any participant determined by sufficient evidence to be falsifying meeting attendance will be terminated from PSUD.

Attendance at Professional Peer Support Groups outlined in the CAPP is required for a minimum of 46 out of 52 weeks per year, or as outlined in the CAPP.

### **Medical Plan**

Each PSUD participant is required to inform all treatment professionals (doctors, dentists, podiatrists, nurse practitioners) about his/her recovery program and PSUD participation.

An initial health summary from all current health care providers, including prescription and over-the-counter medications, must be submitted upon admission to PSUD. Periodic medical updates are required when there is a significant health problem or when substances of abuse are being prescribed.

If a PSUD participant is prescribed or dispensed any medication by a licensed prescriber, the participant must provide the practitioner who prescribes the medication with a copy of a PSUD standardized reporting form and arrange for the practitioner to complete and return the form directly to the PSUD Supervisor within ten days of prescribing.

Each PSUD participant is responsible for immediately informing the PSUD Supervisor by certified mail or by telephone whenever he/she has been prescribed a controlled substance.

### **Use of Prescribed and Over-the-Counter Medications**

Participants with a drug and/or alcohol problem may have a peculiar susceptibility to any type of mood and/or mind altering substance. It is important to recognize this cross addiction characteristic and to avoid self-prescribing and self-medicating in order to avoid relapse.

Adhering to the following guidelines provides a safety net for avoiding relapse for PSUD participants who are building a life around recovery.

#### *Prescribed Medication*

At times during recovery, it may become necessary to take mood and/or mind altering substances such as narcotics prescribed by a health care provider, for medical or surgical conditions. In these circumstances, the following guidelines are used:

- Advise the health care provider of your drug and/or alcohol problem, and your participation in PSUD, as outlined in your PSUD CAPP.
- Notify PSUD and DTMC as outlined in your CAPP.

- Advise your physician to forward the appropriate documentation to PSUD within ten days.
- Advise appropriate family members and significant others, as well as your therapist, employer, and sponsor about your need to take the prescribed medication(s).
- Arrange for someone to assist you in the dispensing and administration of the medication(s).
- Accept only prescriptions with a limited amount of medication(s), e.g., 3 day supply, with no refills. When additional medication(s) is required, contact your prescriber for supplementary medication(s). Under no circumstances should refills or large doses of controlled substances, classes II-IV, be prescribed.
- Throw away unused excess medication(s). Utilize a witness if it is helpful.
- Pharmacist, pharmacy intern or pharmacy technician approved to participate in Opioid Substitution Therapy will be required to submit a quarterly medication report from their qualified provider.

#### *Over-the –Counter Medication*

Some over-the-counter medications (Ex.: sleeping pills, diet pills, benadryl) may be mood and/or mind altering as well as addictive and must be avoided.

#### **Family Treatment**

The PSUD recognizes that a participant's alcohol and/or drug abuse problem affects everyone in a family system. While PSUD can only require PSUD *participants* to comply with a CAPP, PSUD strongly encourages family participation in treatment and self-help groups. Participation in these activities is supportive to the PSUD participant and helpful in the recovery of family members as well.

#### **Employment**

The participant must inform PSUD before accepting a new pharmacy position, or when his/her current position and duties change, as per his/her CAPP. Each participant is responsible for providing all current pharmacy employers with a copy of the CAPP, a copy of any changes/amendments to the CAPP and PSUD standardized reporting forms. A PSUD Coordinator is available to speak with employers who have any questions.

If a formal CAPP or agreement is not initiated, the employer must notify PSUD in writing within two weeks of hire that they have read the participant's PSUD CAPP and are able to make the appropriate practice accommodations. The participant is expected to follow up with employers to assure compliance with this requirement.

Employers are required to submit job performance reports for the participant on a quarterly basis, as specified in the CAPP, and to immediately report any concerns or relapses to the PSUD Supervisor. When an employer contacts PSUD with concerns or with a report of a relapse, actions which must be taken swiftly will be discussed with the employer. The Licensee will be contacted and advised of any decisions or changes which are deemed appropriate.

### **PSUD Participation Outcomes**

Upon graduation, it is expected that the participant will be working as a pharmacist, pharmacy intern or pharmacy technician, that he/she will have the necessary tools to remain sober and to be integrated into the recovering community.

Upon a participant's successful discharge from PSUD, all PSUD files are sealed and any complaints related to the pharmacist, pharmacy intern or pharmacy technician's admission to PSUD are dismissed.

### **Emergency Office Closure**

#### **Office Closure**

When the Governor declares a State of Emergency in the Commonwealth or in Suffolk County and non-emergency state employees in the Executive branch are directed not to report to work due to the emergency situation, the Massachusetts Board of Registration in Pharmacy (Board) office will be closed. Official information regarding the emergency situation will be posted on the Commonwealth's website <http://www.mass.gov> as well as on the Board's website at [www.mass.gov/dph/boards/rn](http://www.mass.gov/dph/boards/rn).

### **PSUD Monitoring Program**

1. **Drug Screens-** Participants are still required to call in for drug screens daily. For questions contact FirstSource Solutions Lab 800-732-3784 x 5548 or [www.FirstSourcesolutions.com](http://www.FirstSourcesolutions.com).
2. **Admission Interview and Program Orientation** – Licensees scheduled for a PSUD Admission Interview or PSUD Program Orientation in an affected area of the Commonwealth will have appointments rescheduled. If the affected areas include Suffolk County all interviews will be rescheduled regardless of location. Contact the PSUD Supervisor for a new appointment date at 617-973-0908.