



I, Dr. Yakub Abu-Ghazaleh, provide the following undertaking and acknowledgement to the College of Physicians and Surgeons of Saskatchewan.

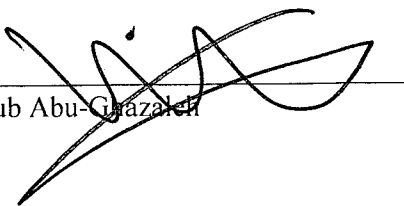
- 1) In this undertaking “chronic pain patients” means those patients to whom I prescribe any drug listed under Regulatory Bylaw 18.1 “The Prescription Review Program” for the indication of chronic non-cancer pain;

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- 2) I will diligently work with my chronic pain patients to assist them to transition their care to another physician as soon as possible;
- 3) I will discontinue prescribing any drug listed under Regulatory Bylaw 18.1 “The Prescription Review Program” to chronic pain patients as soon as their care has been transitioned to another physician;
- 4) I will, in any event, discontinue prescribing any drug listed under Regulatory Bylaw 18.1 “The Prescription Review Program” to chronic pain patients within 12 months from the date of this undertaking;
- 5) I will diligently review my prescribing to all chronic pain patients to assess whether, in my opinion, the prescribing to them is appropriate, both to the indication for the use of, and the doses of the medication used. If I conclude that the prescribing is not appropriate, I will alter my prescribing so that it is, in my opinion, appropriate. That may include instituting tapering to determine the lowest effective dose, which I will do according to the Canadian Guideline for Safe and Effective Use of Opioids for Chronic Non-Cancer Pain;
- 6) I will consider co-prescribing, providing the patient with, or instructions on how to obtain a Naloxone kit to patients meeting the following criteria:
  - those prescribed opioids at a daily dosage of 50 morphine milligram equivalents or more;
  - those prescribed opioids who also have reported excessive alcohol use; have been prescribed benzodiazepines; have a nonopioid substance use or mental health disorder; or have a respiratory condition such as obstructive sleep apnea or COPD (regardless of opioid dose);
  - those who use heroin, illicit synthetic opioids or are misusing prescription opioids;

- those who use stimulants, including cocaine and methamphetamine, which may possibly be contaminated with illicit synthetic opioids like fentanyl;
  - those who receive treatment for opioid use disorder, including medication-assisted treatment with buprenorphine, naltrexone or methadone; and
  - those who misused opioids in the past and were also recently released from incarceration or other controlled settings where tolerance to opioids has been lost.
- 7) If I will maintain a patient on opioid doses in excess of 90 morphine equivalents per day, I will provide the patient with information that research shows that opioids, once believed to be safe, can be very dangerous when prescribed in high doses or used long term. I will only continue to prescribe opioid doses in excess of 90 morphine equivalents per day if I conclude that such prescribing is appropriate and the patient acknowledges, in writing, that the patient has been so advised and that, notwithstanding the risk, the patient requests me to continue to prescribe opioid doses in excess of 90 morphine equivalents per day, and that the patient will be given a prescription for Naloxone or instructions on how to obtain a Naloxone kit;
- 8) I understand that failure to comply with this undertaking may constitute unbecoming, improper, unprofessional or discreditable conduct;
- 9) I understand that the College of Physicians and Surgeons policy it is to publish any restrictions on a physician's ability to practise medicine on its profile for physicians, and that this undertaking will be published in that manner;
- 10) This undertaking will remain in effect until the earlier of the following:
- a) I have given 60 days notice in writing to the College that I am withdrawing from the undertaking. I acknowledge that if I do this, the College may decide to take steps that it thinks are appropriate for public protection;
  - b) The investigation into my prescribing practices have been finalized. That will occur if the College decides that a preliminary inquiry committee will not be appointed, if the College decides that a charge or charges of unprofessional conduct will not be laid or, if a charge or charges are laid, by the completion of the discipline process.

DATED this 26 day of July, 2019

  
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Dr. Yakub Abu-Ghazaleh