## PAIN & SPINE CARE MASROOR AHMED, M.D.

## **CONTROLLED SUBSTANCE AGREEMENT**

I have been fully informed by Dr. Masroor Ahmed and his staff regarding	
Psychological Dependence (addiction) of Controlled Substance Medications, which	1
understand is rare.	

I know that some individuals may develop a tolerance to the medications, necessitating a dose increase to achieve the desired effect, and that there is a risk of becoming physically dependent on the medication. I must do so slowly and under the Medical Supervision or I may have withdrawal symptoms.

I have read this contract and the same has been explained to me by Dr. Masroor Ahmed. In addition, I fully understand the consequences of violating this agreement.

Patient Signature	Date
Employee Signature	 Date