



Drug Enforcement Administration

Community Outreach

A decorative banner featuring a central white area with text, flanked by colorful handprints in shades of green, orange, red, and blue.

Community & Prevention
Outreach & Support

About Us

IPBHC Conference – November 13, 2019



Community Outreach

**Why is DEA
in the Prevention Space?**



Community Outreach

- Drug abuse prevention is a critical complement to DEA's law enforcement mission.
- DEA's drug education efforts began in 1986.
- Establish long-lasting partnerships:
 - Federal agencies (ONDCP, SAMHSA/CSAP, ED, NIDA)
 - State government agencies (NASADAD, NPN)
 - Local coalitions (DFCs)
 - Public and private national organizations
 - CADCA
 - IACLEA
 - Elks
 - PAAL
 - NASPA
 - Mentor Foundation
 - Milken Institute
 - Young Marines



Community Outreach

Websites



For Teens



For Parents



For Higher Ed

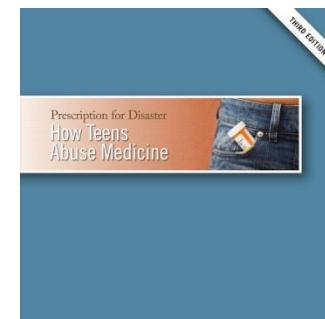
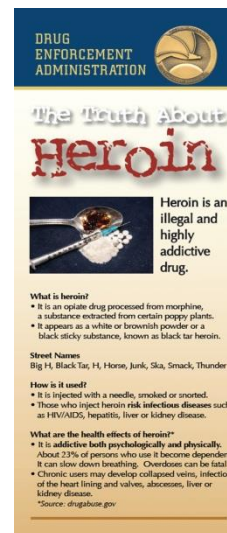
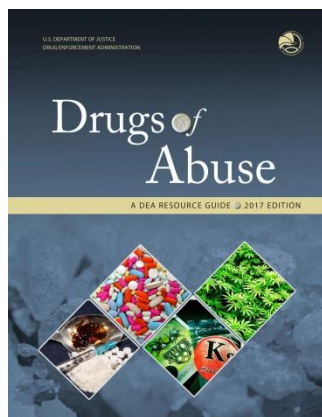
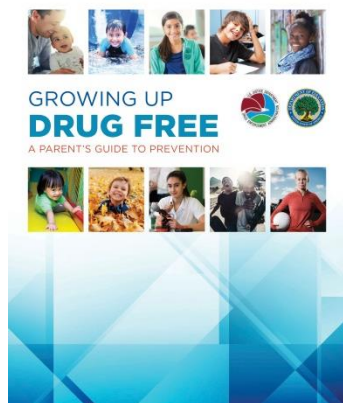


For Teachers



Community Outreach

Publications



www.getsmartaboutdrugs.com



Community Outreach

Programs



Red Ribbon Week
October 23 - 31



Community Outreach

Programs



DEA Citizens Academy



Community Outreach

The DEA Museum



www.deamuseum.org



Community Outreach

DEA Domestic Offices

U.S. Department of Justice
Drug Enforcement Administration





Drug Enforcement Administration

Community Outreach

DEA and Higher Ed

Campus Drug Prevention

www.campusdrugprevention.gov



Community Outreach



360.dea.gov



DEA 360 Strategy

- Comprehensive three-pronged approach:
 1. Law enforcement operations
 2. Diversion control
 3. Community outreach



DEA 360 Strategy

360 Pilot Cities

FY 2016:

Pittsburgh
Milwaukee
St. Louis
Louisville

FY 2017:

Manchester, NH
Charleston, WV
Dayton
Albuquerque

FY 2018:

Salt Lake City
South Jersey
Philadelphia
Newark
Knoxville
Baltimore

FY 2019:

New Orleans
Los Angeles
Cleveland
Tampa
New Bedford, MA
Flagstaff



Drug Enforcement Administration

Community Outreach

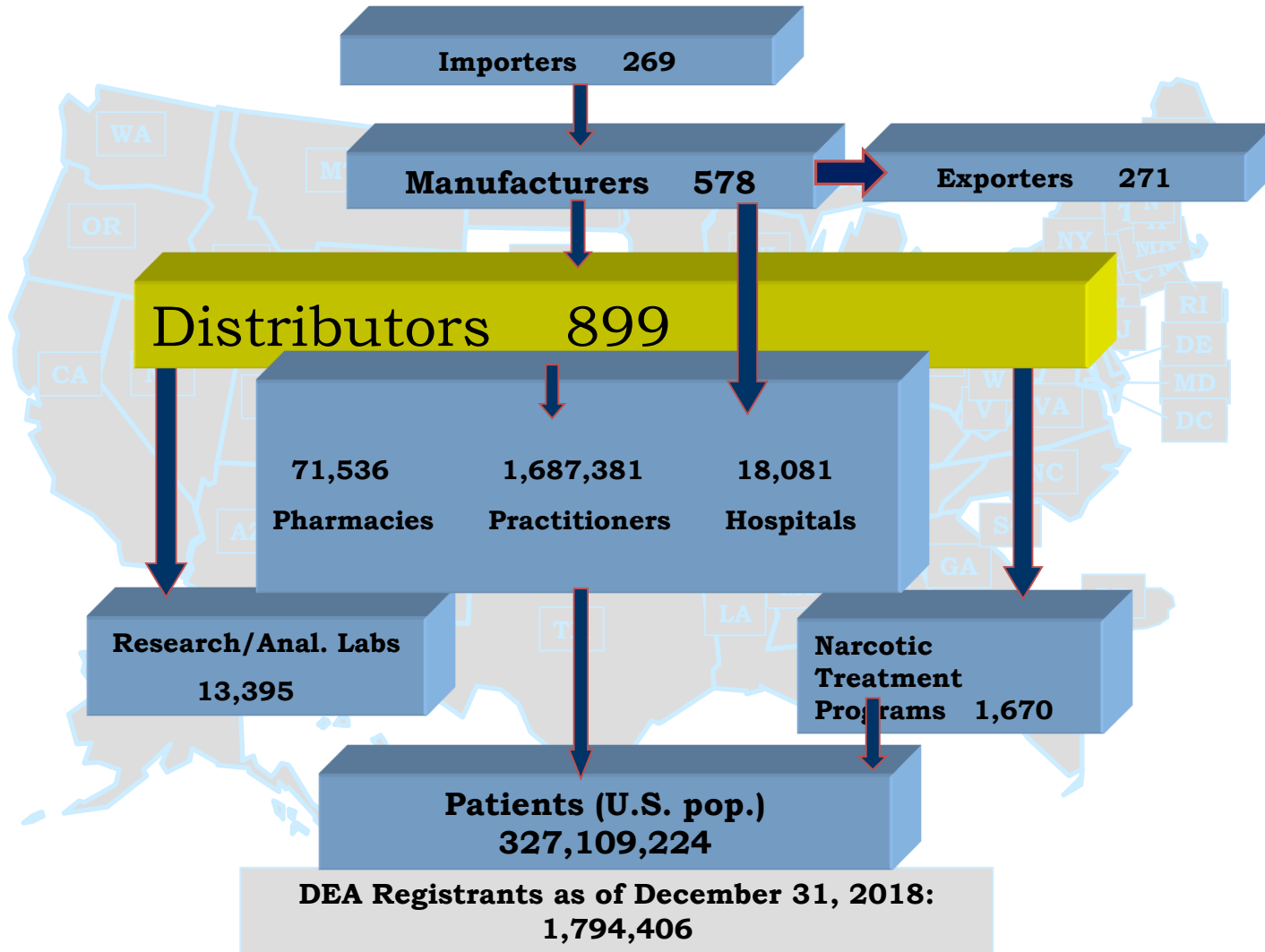
**OPERATION
PREVENTION**

A graphic of a red and blue pill, positioned between the words "OPERATION" and "PREVENTION".

www.operationprevention.com



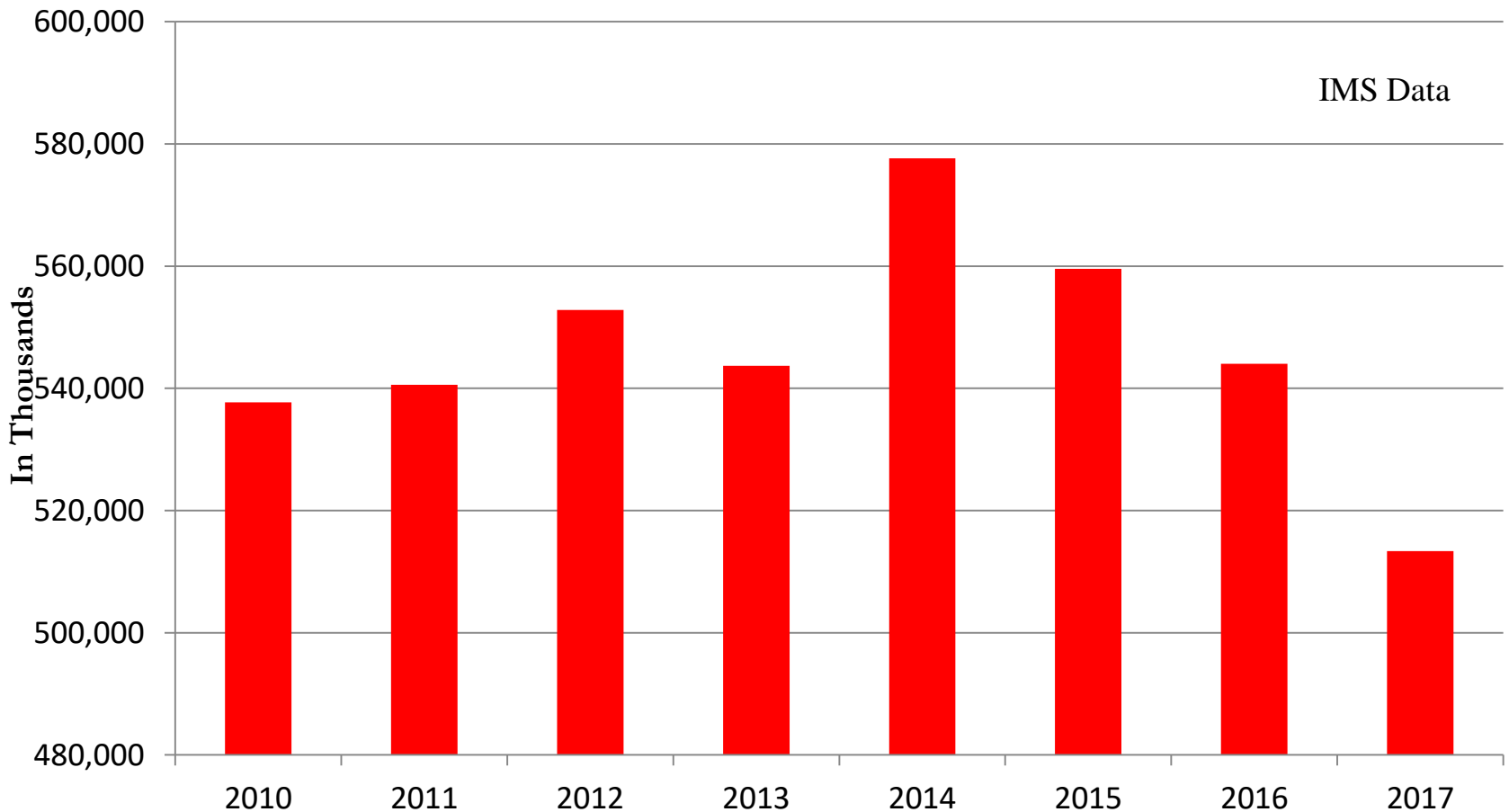
Diversion Control





Diversion Control

Total Controlled Substance Rx's 2009-2017 (In Thousands)





Diversion Control

**DON'T BE THE
DEALER**



Keep them safe. Clean them out.
Take them back.

Saturday, October 26
10 a.m. – 2 p.m.

DEA NATIONAL ^{Rx}
TAKEBACK

Visit DEATakeBack.com for a collection site near you.

www.deatakeback.com



Diversion Control

Nationwide Efforts to Combat the Problem:

States

Practitioners

Hospitals

Treatment Providers

Medical Schools

Pharmacies



Diversion Control



U.S. DEPARTMENT OF JUSTICE ★ DRUG ENFORCEMENT ADMINISTRATION
DIVERSION CONTROL DIVISION

Dear DEA-Registered Practitioner - February 2018

CDC's Recommendations for the Prescribing of Opioid Pain Medications

Dear DEA-Registered Practitioner:

In March, 2016, the Centers for Disease Control and Prevention (CDC) published its "CDC Guideline for Prescribing Opioids for Chronic Pain" to provide recommendations for the prescribing of opioid pain medication for patients 18 and older in primary care settings. Recommendations focus on the use of opioids in treating chronic pain (pain lasting longer than 3 months or past the time of normal tissue healing) outside of active cancer treatment, palliative care, and end-of-life care.

CDC's Guideline is part of a comprehensive approach to addressing the opioid overdose epidemic and is one step toward a more systematic approach to the prescribing of opioids, while ensuring that patients with chronic pain receive safer and effective pain management. According to the CDC, The Guideline's twelve recommendations, published in August 2017, are based on three key principles:

1. Non-opioid therapy is preferred for chronic pain outside of active cancer, palliative, and end-of-life care. Opioids should only be used when their benefits are expected to outweigh their substantial risks.
2. When opioids are used, the lowest possible effective dosage should be prescribed to reduce risks of opioid use disorder and overdose. Clinicians should start low and go slow.
3. Providers should always exercise caution when prescribing opioids and monitor all patients closely. Clinicians should minimize risk to patients—whether checking the state prescription drug monitoring program, or having an 'off-ramp' plan to taper.

You are receiving this email as part of DEA's effort to improve its communication with its more than 1.7 million registrants while simultaneously improving the dissemination of the CDC Guidelines to those authorized to prescribe opioids.

A copy of CDC's publication entitled, "Guideline for Prescribing Opioids for Chronic Pain: Recommendations" may be found at: https://www.cdc.gov/drugoverdose/pdf/Guidelines_Factsheet-a.pdf.

Additionally, an Interactive Training Webinar for providers who prescribe opioids may be found at: <https://www.cdc.gov/drugoverdose/training/index.html>.



Diversion Control



U.S. DEPARTMENT OF JUSTICE ★ DRUG ENFORCEMENT ADMINISTRATION
DIVERSION CONTROL DIVISION

Use of Telemedicine While Providing MAT - May 15, 2018

The Use of Telemedicine While Providing Medication Assisted Treatment (MAT)



Under the Ryan Haight Act of 2008, where controlled substances are prescribed by means of the Internet, the general requirement is that the prescribing Practitioner must have conducted at least one in-person medical evaluation of the patient. [U.S.C. § 829\(e\)](#). However, the Act provides an exception to this requirement. 21 U.S.C. § 829 (e)(3)(A). Specifically, a DEA-registered Practitioner acting within the United States, is **exempt** from the requirement of an in-person medical evaluation as a prerequisite to prescribing or otherwise dispensing controlled substances by

means of the Internet, **if** the Practitioner is engaged in the practice of telemedicine and is acting in accordance with the requirements of [21 U.S.C. § 802\(54\)](#).

Under 21 U.S.C. § 802(54)(A),(B), for **most** (DEA-registered) Practitioners in the United States, **including** Qualifying Practitioners and Qualifying Other Practitioners ("Medication Assisted Treatment Providers") who are using FDA approved Schedule III-V controlled substances to treat opioid addiction, the term "practice of telemedicine" means the practice of medicine in accordance with applicable Federal and State laws, by a practitioner (other than a pharmacist) who is at a location remote from the patient, and is communicating with the patient, or health care professional who is treating the patient, using a telecommunications system referred to in section 1395m(m) of Title 42 (42 C.F.R. § 410.78(a)(3)), which practice is being conducted:

A. while the patient is being treated by, and physically located in, a DEA-registered hospital or clinic registered under [21 U.S.C. § 823\(f\)](#) of this title; and by a practitioner

-who is acting in the usual course of professional practice;

-who is acting in accordance with applicable State law; and

-is registered under 21 U.S.C. § 823(f) with the DEA in the State in which the patient is located.

OR

B. while the patient is being treated by, and in the physical presence of, a DEA-



Diversion Control

Pills laced with deadly opioid infiltrating drug market, DEA says

The Guardian

By Susan Zalkind

The illegal drugs look like known prescription painkillers and contain high amounts of **fentanyl** as law enforcement says problem is expected to escalate. Hundreds of thousands of counterfeit prescription pills laced with a deadly synthetic opioid have infiltrated the US drug market, according to the (DEA)...



Questions?





Drug Enforcement Administration

Community Outreach

A decorative border on the left and right sides of the slide, consisting of numerous overlapping, colorful handprints in shades of blue, green, orange, and red.

Community & Prevention Outreach & Support

About Us

Call us: 202.307.7936

Email us: community.outreach@usdoj.gov

Online: dea.gov/community-outreach