



## QUESTIONS FOR YOUR CHILD'S DOCTOR

- Does the prescribed medication have addictive side effects?
- Is there an alternative medication available that poses less or no risk of addiction?
- Are there drug free alternatives such as physical therapy or exercise available that can reduce or eliminate the duration of consumption, or the need for pain medication?
- Is the duration of the prescription consistent with the duration that medication will be required?
- Can the dosage be reduced over time, or adjusted per the level of pain being mitigated?

## PARENT PLAN

**Count It!** Monitor your prescription drugs. Make it a goal to store your pills in a secure place, count them frequently, and check expiration dates.

**Lock It!** Use a lock bag to securely store your prescription medications and protect them from theft.

**Drop It!** Take advantage of the secure dropboxes located at all East Bay Police Departments to dispose of unused or expired drugs. Boxes are available 24/7, 365 days a year, and are completely anonymous.



## RHODE ISLAND RESOURCES

**BH Link 401-414-LINK (5465)**

**Kids Link 1-855-543-5465**

East Bay Regional Coalition is not suggesting that prescribed opioids cannot be an effective component of pain management; we are simply encouraging you to educate yourself on the risks, expectations, and available alternatives Adapted from materials developed by Think About Pain. For more information please visit [www.thinkaboutpain.com](http://www.thinkaboutpain.com).



[www.Riprevention.org](http://www.Riprevention.org)

East Providence, Barrington, Warren and Bristol  
Working together toward a safer & healthier community



# SIDELINED

*A parent's guide to youth injury and pain management*

EAST BAY

## LEARN THE LINGO

*Brush up on the pain medications your students may be prescribed*

## YOUR CHILD'S BEST ADVOCATE

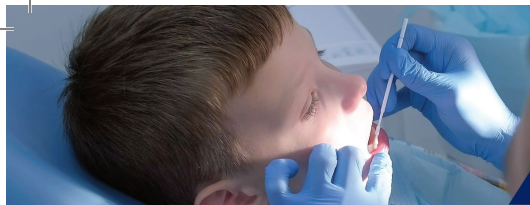
*Hint: It's YOU!*

## PLAYING THROUGH PAIN

*Why rest is (truly) best*







YOUR CHILD GETS HURT OR  
HAS WISDOM TEETH REMOVED.  
...NOW WHAT?



## KNOWLEDGE IS POWER

— *The best defense is a good offense* —

Approximately 8.6 young people suffer an injury or have extensive medical procedures each year with many of them requiring some form of pain management. In the event that your child is prescribed an opioid pain medication for an injury or surgery,

your knowledge and support is critical in helping him or her avoid possible opioid misuse. While you can't anticipate injury accidents, or sudden medical procedures, it helps to arm yourself with knowledge even before setting foot in a doctor's office.

### HOW YOU CAN HELP

- **Avoid pressuring.** Allow your child to rest, heal, and rehabilitate before returning to normal activities.
- **Foster dialogue.** Encourage open communication between yourself, doctors, teachers and coaches, and your son/daughter about their treatment plan.
- **Be aware.** Educate yourself on signs of opioid use and misuse.

Opioids essentially rewire the brain, meaning that users often require increasingly higher dosages to feel "normal." The still-developing teenage brain is at even greater risk of addiction, sometimes turning teens who have been prescribed opioids into accidental users.

### Signs of potential OPIOID MISUSE:

- Small pupils
- Slurred speech
- Redness of face and neck
- Becoming withdrawn
- Complaints of constipation

### ALTERNATIVE TREATMENT OPTIONS:

- Ibuprofen or Acetaminophen
- Physical therapy
- Chiropractic care
- Massage
- Cognitive Behavioral Therapy

## YOUR CHILD'S BEST ADVOCATE

— *Communicating knowledgeably with doctors* —

Knowing how to advocate for your child in the doctor's office can be confusing and overwhelming. It's important to remember that you, not the doctor, has the final say on what medications your child takes and for how long. Asking questions is always okay.

Does the prescribed medication have addictive side effects? Are there any drug-free pain management alternatives we can try? For a full list of questions to ask your child's doctor and to consider yourself, see the back cover of this pamphlet.

### OPIOID PRESCRIPTION PAIN MEDICATION:

- Act on the brain the same way as heroin.
- Cause the brain to block the feeling of pain; they do not treat the injury.
- Are very addictive, even in low doses, and even in short durations.
- Can cause a person to stop breathing, leading to an accidental overdose.
- Increase the chances of having an accidental overdose if drinking alcohol, or if taking a prescription anti-anxiety medication (e.g., Xanax®, Ativan®), and/or a sedating medicine (e.g., Ambien®).
- Can make a person feel too tired to safely drive or operate heavy equipment.

### LEARN THE LINGO

*Opioid pain medication an injured athlete may be prescribed or given in the hospital:*

**Hydrocodone:** Vicodin, Norco, "Vikes", Hydrocodan cough syrup

**Oxycodone:** Percocet, Oxycontin, "Percs"

**Oxymorphone:** Opana

**Hydromorphone:** Dilaudid, Exalgo

**Codeine:** Tylenol #3, Tylenol #4, cough syrup with "AC"

It's important to lock up all opioids and monitor them closely to avoid misuse. If your son/daughter has leftover prescription medication from an injury, encourage him/her to dispose of it properly. For more information on safe medication disposal, visit [www.ripvention.org](http://www.ripvention.org).

### Addiction can occur as soon as 5 days:

Guidelines increasingly recommend treating acute pain first with non narcotics. If narcotics are deemed necessary, they should be limited to just two to three days.

### Did you know?

The American Society of Addiction Management stated that in 2014 alone, nearly half a million adolescents were non-medical users of pain relievers, with 168,000 having developed an addiction.

