

**Tapentadol for the management of severe non-cancer pain in adults**

**PRIOR APPROVAL FORM**

**Please ensure all sections are completed and any requested supporting information is provided to ensure a prompt decision. Unless the patient fully meets the criteria, funding will not be approved unless there are exceptional reasons.**

**Please note:** All patients currently prescribed Tapentadol in primary care in Gloucestershire who have not been reviewed by local pain services, must be referred to secondary care for review as per the

IFR Policy

**PART A – MUST BE COMPLETED FOR ALL REQUESTS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **GP/CONSULTANT DETAILS** | | | | |
| Name: | |  | | |
| Address: | |  | | |
| Preferred Contact for Reply (Email) - Only NHS.NET addresses are acceptable: | | @nhs.net | | |
| **PATIENT’S DETAILS** | | | | |
| NHS No: |  | | MRN (if applicable) |  |
| Date of Birth |  | | | |

**Requesting clinician – please confirm the following**

|  |  |  |
| --- | --- | --- |
| Patient Consent: The Patient hereby gives consent for disclosure of information relevant to their case from professionals involved and to the CCG. | Yes | No |
| I have informed the patient that this intervention will only be funded where the criteria are met. | Yes | No |
| I confirm that I have reviewed the patient against the commissioning criteria and that the information provided within this application is accurate. | Yes | No |

**PART B – MUST BE COMPLETED FOR ALL REQUESTS**

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| --- | --- | --- |
| **ACCESS CRITERIA** | | |
| Patient has trialled first and second choice Gloucestershire Joint Formulary recommended opiate analgesics (E.G. Zomorph® and Longtec®) but these were ineffective or intolerable.  **Please note:**  If a patient is already taking Tapentadol but details of previous opioid trials are not available, before submitting an IFR application, first line opioids should be re-trialled for a period of two weeks to assess efficacy and potentially limiting adverse effects.  If the GHNHSFT pain consultant’s judge that Tapentadol should be used as a first line drug (before other opioid preparations) in exceptional clinical circumstances. The clinical justification should be clearly documented within the supporting information section below and these exceptional cases will be presented to the pain programme team 6 monthly. | Yes | No |
| **AND** Patient has defined painful pathology (including nerve injury or disease) for which a trial of opioid treatment is reasonable (e.g. not fibromyalgia, non-specific back pain). Patient has engaged with appropriate self-management interventions e.g. weight loss for lower limb arthritis and exercise. | Yes | No |
| **AND** Demonstrable improvement in function and substantial (approaching 50%) pain reduction following trial of Tapentadol.  Please specify % pain reduction | Yes    % | No |
| **AND** For patients already taking Tapentadol:   * Observable decrement in function and increase in pain on Tapentadol taper, with pain relief and improvement in function on re-establishing dose   Consultant to GP referral to include the following information:  Patients taking Tapentadol who **do not** sustain their pain relief and improvement in function should be considered non-responders and the drug tapered and stopped | Yes | No |
| **AND** The maximum doses of Tapentadol has been agreed and will be shared with the GP as part of the primary care referral process | Yes | No |

**Please provide evidence below to support the information provided. Without evidence your application may be rejected. If you prefer you can attach supporting information, such as a clinic letter, rather than completing the box below.**

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| Supporting information: |

How to complete:

* Add GP/Consultant details
* Add Patient details
* Tick to answer yes or no to criteria listed under the procedure being requested
* Provide supporting information to evidence assessment in the free text area or attach supporting information such as clinic letter
* Email form to [glccg.ifr@nhs.net](mailto:glccg.ifr@nhs.net)
* Response will be sent from Gloucestershire CCG to preferred contact for reply within a maximum of 10 working days.