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RE: Leon Margolin M.D. PhD  
5245 E Main ST. Columbus  
Ohio 43213

To Whom It May Concern:

I am writing to offer my strong support for Dr. Leon Margolin's advocacy for universal Screening, Brief Intervention, and Referral to Treatment (SBIRT) for all patients prescribed opioids, especially those at high risk, as well as his use of electrodiagnostic studies (NCS/EMG) to document organic pathology, such as neuropathic pain, in complex pain patients. As a board-certified anesthesiologist, pain medicine physician, and addiction specialist with over 30 years of experience, I have seen firsthand the value of these tools in enhancing patient safety, ensuring proper opioid prescribing, and improving outcomes. I am an authority on screening tools for substance use disorders for patients being considered opioid therapy.

SBIRT is a critical component of responsible opioid prescribing. By screening patients for risk factors such as substance misuse, intervening early, and referring them for additional support, when necessary, SBIRT helps mitigate the risks associated with opioid therapy. SBIRT reduces healthcare costs, decreases substance misuse, and lessens the likelihood of overdose. This tool is particularly vital in high-risk populations, who are often at a greater risk of addiction and adverse outcomes from opioid treatment. By integrating SBIRT as a universal precaution, we can enhance our ability to identify patients needing additional support, ultimately improving patient safety and care continuity.

The U.S. government, specifically the Substance Abuse and Mental Health Services Administration (SAMHSA), actively supports the use of SBIRT by providing funding for states, territories, and tribal organizations to implement SBIRT programs in various healthcare and community settings. SAMHSA funds training and technical assistance to support SBIRT implementation across healthcare practices, underscoring the recognized value of SBIRT as a proactive approach to substance misuse prevention.

Adopting these methods as standard practice offers a powerful approach to managing the complexities of opioid prescribing and chronic pain treatment. SBIRT and electrodiagnostic studies collectively provide a framework for comprehensive risk management, allowing providers to make well-informed decisions about pain management. These tools not only help ensure medical necessity for opioid use but also support providers in adhering to best practices and legal standards, safeguarding patient care and reducing liability.

I offer this letter of support freely and without compensation, drawing upon my background as a co-founder of the Utah Academy of Pain Medicine, past president of the American Academy of Pain Medicine, and current Senior Fellow at the Center for U.S. Policy, where I work on issues related to pain management and opioid safety. With over 300 peer-reviewed publications, multiple NIH and FDA engagements, and three decades of clinical research and education in pain and addiction medicine, I am confident that Dr. Margolin's approach will enhance patient care and set a high standard for safe, responsible opioid prescribing practices.

Thank you for considering this endorsement of Dr. Margolin's proposals to strengthen patient safety and opioid prescribing standards.

Warm regards,



Lynn Webster M.D.