

**Asheville Internal Medicine
60 Livingston Street, Suite 200
Asheville, NC 28801**

NARCOTIC MEDICATION

I, _____, have been informed and understand as a new patient of Asheville Internal Medicine, that narcotic medications such as **Vicodin, Percocet, Percodan, Methadone, Oxycodone, Oxycontin, Morphine, Fiorinal with Codeine, Tylenol #3 and Lorcet** will not be prescribed for me and attest that I will not attempt to seek these types of medications through physicians of Asheville Internal Medicine. Once established should an acute problem arise, these medications may be given on a temporary basis.

Patient Signature

Date

Witness

Date