

## *Caring for Legacy Patients*

The purpose of this document is to guide registrant on the challenges of caring for legacy patients. Registrants must both manage the expectations of legacy patients and independently assess the risk and benefit of their existing treatment plan. These challenges are particularly difficult when involving medication regimes that do not conform to current best practice standards or guidelines.

### **Professional Standards and Guidelines Regarding Caring for Legacy Patients**

#### **Preamble:**

In this document, legacy patients are defined as those whose care is taken over by a registrant, after a treatment plan was established by another provider.

#### **Registrants must:**

1. not refuse to accept patients to their care because of the medical condition of the patient or their treatment plan; and
2. assess the legacy patient and provide patient-centered care, tailored to the specific circumstances and needs of the patient.

Good care should always consider the individual needs and circumstances of the patient. To provide safe and respectful care to legacy patients in particular, registrants should:

1. consider patient autonomy in shared decision making around treatment expectations. The College encourages the use of agreed upon treatment plans that are documented in the patient record;
2. regularly review medication regimes and discuss the risks and benefits of medications with legacy patients;
3. where appropriate, engage the patient in a discussion about tapering of medications to promote a shared decision-making approach;
4. where appropriate, implement a tapering program that is individualized to patient need and circumstances; and
5. recognize that tapering is not always possible or appropriate. Vulnerable patients should not be destabilized by the imposition of tapering. There will be circumstances where patients cannot tolerate the effects of tapering or refuse to engage in tapering.

#### **Document History:**

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