

Wisconsin Department of Safety and Professional Services
Office of the Secretary
4822 Madison Yards Way
PO Box 8368
Madison WI 53708-8368



Phone: 608-266-1352
Web: <http://dsps.wi.gov>
Email: dsps@wisconsin.gov

Tony Evers, Governor
Dan Hereth, Secretary

December 19, 2025

Wisconsin State Senate
Chief Clerk
PO Box 7882
Madison, WI 53707-7882

Wisconsin State Assembly
Chief Clerk
PO Box 8952
Madison, WI 53708-8952

Dear Chief Clerks:

As specified in Wis. State. § 961.36 (3), I am submitting the 2025 Controlled Substances Board Annual Report. Questions regarding the report can be directed to Deputy Secretary Jennifer Garrett at (608) 266-6795.

Sincerely,

A handwritten signature in black ink, appearing to read 'Dan Hereth'.

Dan Hereth
Secretary-designee

Compliance with Controlled Substances Law

Diversion Control and Prevention 2025 Annual Report

Wis. Stat. § 961.36 (3)



December 2025

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I. Controlled Substances Board Membership

The members of the Controlled Substances Board (CSB) are appointed as outlined in Wis. Stat. § 15.405 (5g). The Board consists of seven members with no term expiration dates, including the Attorney General, the Secretary of Health Services, and the Secretary of Agriculture, Trade and Consumer Protection, or their designees; the chairperson of the Pharmacy Examining Board, the chairperson of the Medical Examining Board, the chairperson of the Dentistry Examining Board, and the chairperson of the Board of Nursing, or a designee; and two members appointed by the Governor to serve 3-year terms: one psychiatrist member and one pharmacologist member.

- Doug Englebert, Chairperson – Department of Health Services (Designee)
- Yvonne M. Bellay, Secretary – Department of Agriculture, Trade and Consumer Protection (Designee)
- Subhadeep Barman – Psychiatrist
- Cullen M. Eberhardy – Attorney General (Designee)
- David Gundersen – Dentistry Examining Board Representative
- Amanda K. Kane – Board of Nursing Representative
- Lubna Majeed-Haqqi – Medical Examining Board Representative
- Christopher Olsen – Pharmacologist
- John G. Weitekamp – Pharmacy Examining Board Representative

II. Drug Scheduling

Under its authority to promulgate rules under Wis. Stat. Chapter 961, the CSB took scheduling action on the following substances as of November 4, 2025:

Schedule I

- Addition of Ethylphenidate (CSB 2.011)
- Addition of 7 Fentanyl-Related Substances (CSB 2.012)
 - Para-chlorofentanyl
 - Ortho-chlorofentanyl
 - Meta-fluorofuranyl fentanyl
 - Ortho-methylcyclopropyl fentanyl
 - Beta-methylacetyl fentanyl
 - Tetrahydrothiofuranyl fentanyl
 - Para-fluoro valeryl fentanyl
- Addition of Dipentylone (CSB 2.013)
- Addition of 2 Synthetic Benzimidazole-Opioids (CSB 2.014)
 - N-pyrrolidino metonitazene
 - N-pyrrolidino protonitazene
- Addition of 7 Synthetic Benzimidazole-Opioids (CSB 2.015)
 - Ethyleneoxynitazene
 - Methylenedioxynitazene
 - 5-methyl Etodesnitazene
 - N-desethyl Etonitazene
 - N-desethyl Protonitazene
 - N,N-dimethylamino Etonitazene
 - N-pyrrolidino Isotonitazene

III. The Wisconsin Prescription Drug Monitoring Program

The Enhanced Prescription Drug Monitoring Program (ePDMP) is a program established by the CSB under Wis. Stat. § 961.385 to combat prescription drug abuse in Wisconsin. By providing information about monitored prescription drugs that are dispensed in the state, it aids healthcare professionals in their prescribing and dispensing decisions. The ePDMP also fosters the ability of pharmacies, healthcare professionals, law enforcement agencies, and public health officials to work together to reduce the misuse, abuse, and diversion of monitored prescription drugs.

2025 Accomplishments

- Since the WI ePDMP migrated to an enhanced data system in the fall of 2023, the system has allowed for improved data quality and user experience. As a result of this update, processing of submitted dispensing records now occurs in real-time. Additionally, the patient matching algorithm has been improved to effectively accommodate search terms and notably reduced the episodes of falsely matched patient profiles. Results of the user satisfaction survey conducted in Summer 2025 indicated an 87% overall user satisfaction rate among respondents.
- In 2025, the WI PDMP continued to expand access to ePDMP data within an electronic health record (EHR) application by eliminating integration service fees for healthcare organizations. This will continue to greatly benefit under-resourced healthcare facilities and independent practices.

Top 15 Dispensed Monitored Prescription Drugs

In general, the top 15 drugs have remained the same quarter to quarter, with some changes in the rankings. Notably, Phentermine, a weight loss medication, joined the list for the first time in 2025, surpassing Morphine Sulfate. The Top 15 Dispensed, Monitored Prescription Drugs (by Dispensing) in the third quarter (July-September) of 2025 were:

1. Gabapentin (Other)
2. Amphetamine-Dextroamphetamine (Stimulant)
3. Hydrocodone-Acetaminophen (Opioid)
4. Lisdexamfetamine Dimesylate (Stimulant)
5. Oxycodone HCl (Opioid)
6. Tramadol HCl (Opioid)
7. Methylphenidate HCl (Stimulant)
8. Lorazepam (Benzodiazepine)
9. Pregabalin (Other)
10. Alprazolam (Benzodiazepine)
11. Clonazepam (Benzodiazepine)
12. Zolpidem Tartrate (Other)
13. Buprenorphine HCl-Naloxone HCl Dihydrate (Opioid)
14. Oxycodone w/ Acetaminophen (Opioid)
15. Phentermine (Other)

2025 Dispensing Trends

The decreasing trend of monitored drug dispensations from 2023 to 2024 continued from 2024 to 2025. This section of the report summarizes PDMP data from January 1, 2025–September 30, 2025 (Quarters 1-3) and the same timeframe in 2024, for comparison.

There was a 1% decrease in monitored prescription drugs dispensed in Wisconsin from Q1 to Q3 2025 compared to the same timeframe in 2024. Decreases in dispensing were recorded across all the drug classes including Opioids (2%), Benzodiazepines (2%) and Other (1%), with the exception of Stimulants which had a 10% increase from 2024. Gabapentin, introduced as a monitored drug in Q3 2021, accounted for 996,146 dispensations in the ‘Other’ drug class through Q3 2025, a 5% decrease compared to the same timeframe in 2024. Gabapentin dispensing comprised 51% of the total drugs dispensed in the ‘Other’ drug class in 2025.

Compared to the same timeframe in 2017 when the WI ePDMP was launched, an overall 9% decrease in the total dispensing of monitored prescription drugs was observed. The breakdown of changes between 2017 and 2025 by drug classes are as follows:

- 41% decrease in the number of opioid prescriptions dispensed.
- 37% decrease in the number of benzodiazepine prescriptions dispensed.
- 29% increase in the number of stimulant prescriptions dispensed.
- 90% increase in the number of other prescriptions dispensed. This increase can be largely associated with gabapentin which was introduced as a monitored drug in 2021.

For additional information about the WI ePDMP, go to: <https://pdmp.wi.gov/>

IV. Special Use Authorization (SUA) Permits

Under Wis. Stat. Chapter 961, the CSB issues Special Use Authorization (SUA) Permits. SUA Permits authorize individuals to manufacture, obtain, possess, use, administer or dispense controlled substances. SUA Permits are necessary for scientific research, instructional activities, chemical analysis and other special uses, including industrial applications, humane societies' use, and drug detection dog training.

Special Use Authorization Permits Issued

SUA TYPES/ MONTH	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC*	Total per SUA Type
Analytical Lab	2	4	1	5	3	1	2	3	5	1	1		28
Humane Society	1		3	2		1	2	6	3	1	1		20
Instruct. Activities			1										1
Narcotic Dog Training	5		7	7	2	3	7	12	8	8	3		62
Research	1	14	15	8	4	9	9	9	21	11	3		104
Law Enf. Animal Control Officers								1					1
Industrial/ Commercial Processing		2				1	1			1			5
Drug Movement for Training Purposes				1									1
Other													0
Total SUAs Issued in 2025	9	20	27	23	9	15	21	31	37	22	8		222

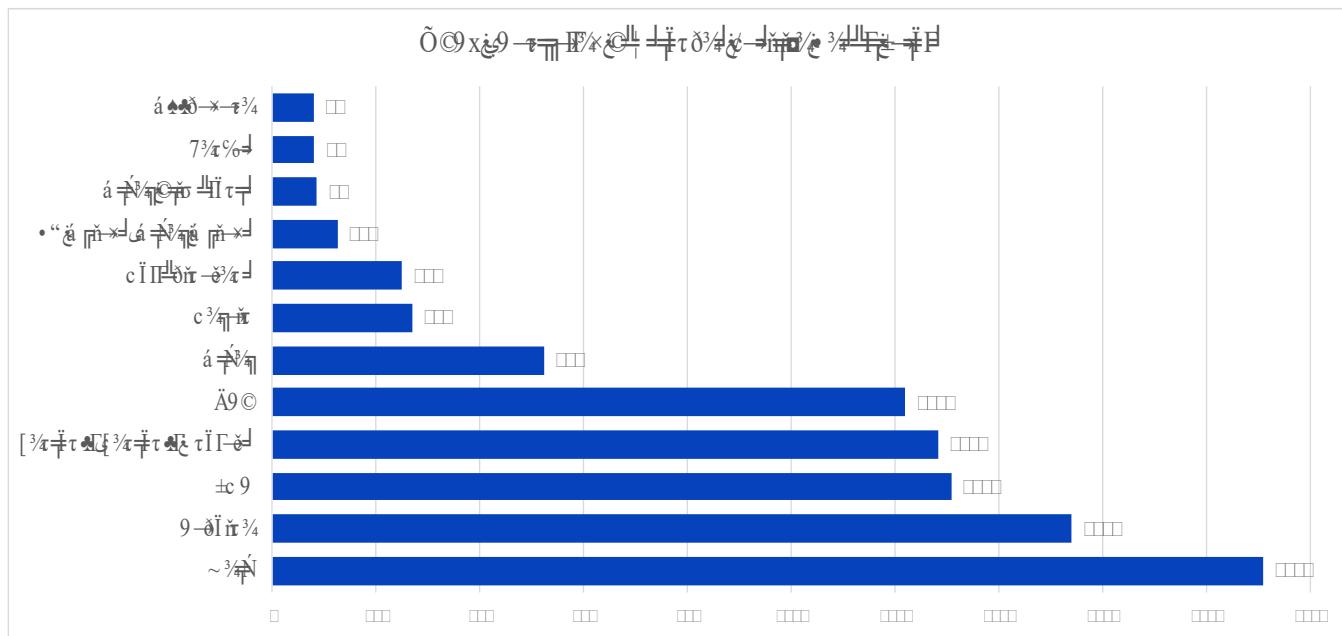
Note: 46 amendments to existing SUA Permits were recorded

*Data current through 11/28/2025

V. Drug Use Trends in Wisconsin

Drug Prevalence

The table below displays total results of substances tested by the Controlled Substances Unit of the Wisconsin State Crime Laboratory. This information does not represent total cases nor total substances tested. It is possible for one case to have multiple items tested and for one item to have multiple drugs present – including residues. As a result, the counts shown here are higher than case count and test count.



*Notes:

- The total counts represent completed laboratory assignments from 1/1/2025–11/30/2025.
- The “NCS” category includes substances that are not controlled – i.e., acetaminophen, melatonin, ibuprofen, etc.
- The “Other” category includes drugs that do not fall into the other groups.

VI. Recommendations for Improving Control and Prevention of the Diversion of Controlled Substances

1. Exercise CSB rule making authority to add, delete or reschedule substances listed in the schedules in Wis. Stat. § 961.14, 961.16, 961.18, 961.20, 961.22 and pursuant to the rule-making procedures of Wis. Stat. Ch. 227
2. Work closely with the ePDMP to review referrals of potentially suspicious and dangerous conduct, prescribing data and dispensing trends
3. Provide information to the public about CSB Actions and the ePDMP
4. Communicate with stakeholders regarding CSB actions, the ePDMP, Diversion Data, Trends and Accomplishments