

Objective

Develop a standardized approach to managing long-term controlled substance use among patients while assessing abuse risk and verifying pain causing diagnoses to safely treat patient reported pain.

Background

In the past, it was not uncommon for patients with pain to be prescribed a narcotic. Reasons included:

- Widely accepted practice to treat pain completely with medication
- Patients expected quick relief
- Dangers of long term narcotic use not widely known/accepted
- Prescribers wanted to please patients/ meet their expectations in fear of poor performance scores if they did not.

Actions Taken

Based on CDC recommendations:

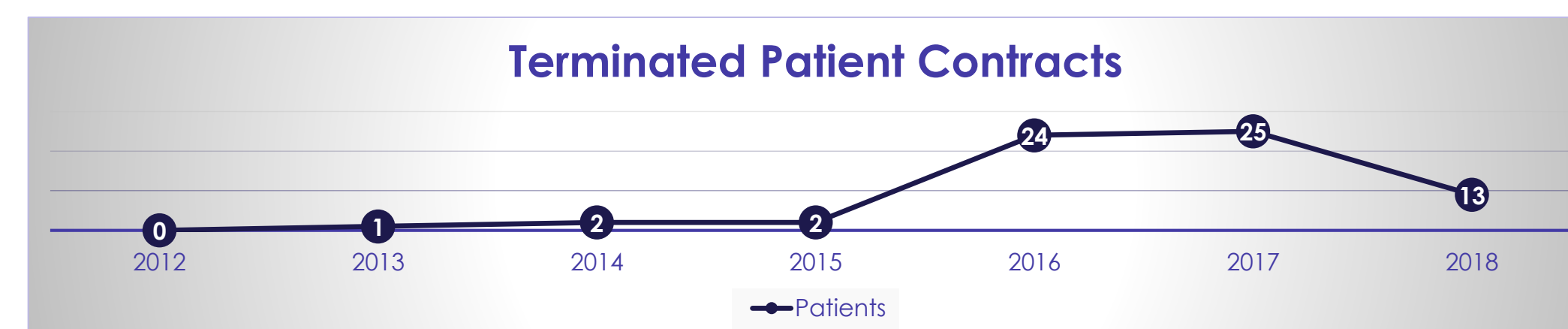
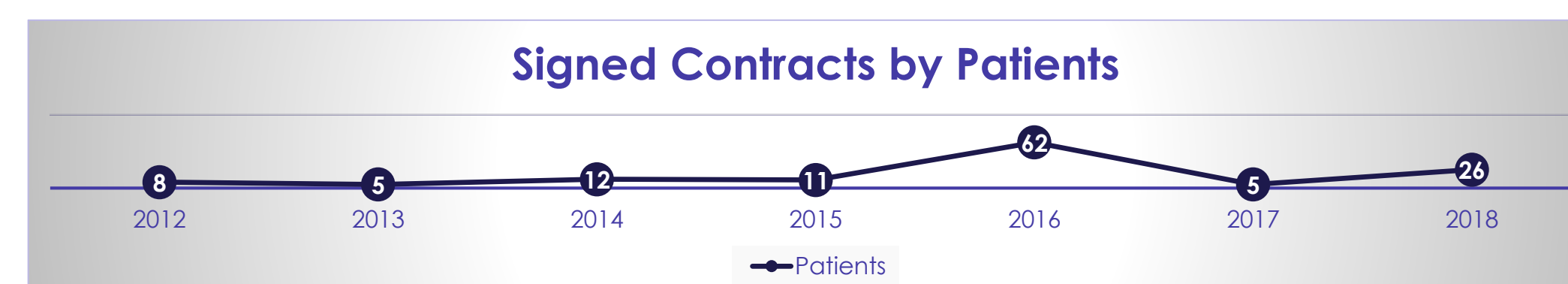
- Encourage non-opioid medications, physical therapy or interventional procedures
- Checked PDMP at initiation, every 6 months and PRN
- If prescribed chronic pain meds, placed on a pain contract thoroughly reviewed with patient
- Pharmacies notified of pain contract and pharmacy choice
- Regular and random drug screens
- PEG scale and Opioid Risk tool used
- All controlled substances monitored by one nurse
- Quantities and dates verified with each refill
- Documentation in the chart of pain contracts and those fired

Taking the “Pain” Out of Pain Management

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Metrics

From 2012 to present, our practice has had a total of 132 unique patients sign pain contracts. By implementing a comprehensive opioid management program monitored by a pain coordinator RN, we have decreased our number of chronic opioid patients by nearly half. Currently we have 52% of these patients on a pain contract and 48% are resolved.



Analysis

Due to new guidelines published by the CDC in 2016, the enterprise pain contract was updated with new requirements. This led to adding many patients not previously required to have a pain contract. This also led to an increase in patient monitoring. Utilizing a pain coordinator RN to assist providers in meeting these new requirements along with a champion physician led to a standardized approach to pain management used by all of the providers in our practice.

Next Steps

- Electronic medical record interface with prescription drug monitoring is now easily available to view and review for all prescribers.
- Our practice continues to strive to improve patient and provider education on pain management best practices and CDC recommendations.
- Our champion provider has expanded his practice to offer alternate therapies to chronic opioid use in our rural setting such as radiofrequency ablation, epidural steroid injections, joint injections, and trigger point injections. He also accept referrals.

