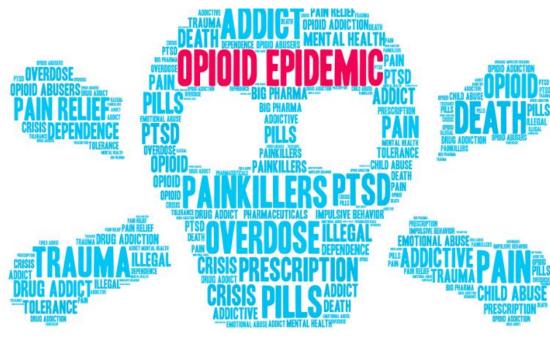


Analgesic Administration for Patients
with Renal Colic in the Emergency
Department Before and After
Implementation of an Opioid Reduction
Initiative

Sergey Motov, MD
Jefferson Drapkin, BS
Mahlaqa Butt, BA
Andrew Thorson, MD
Antonios Likourezos, MPH
Peter Flom, PhD
John Marshall, MD



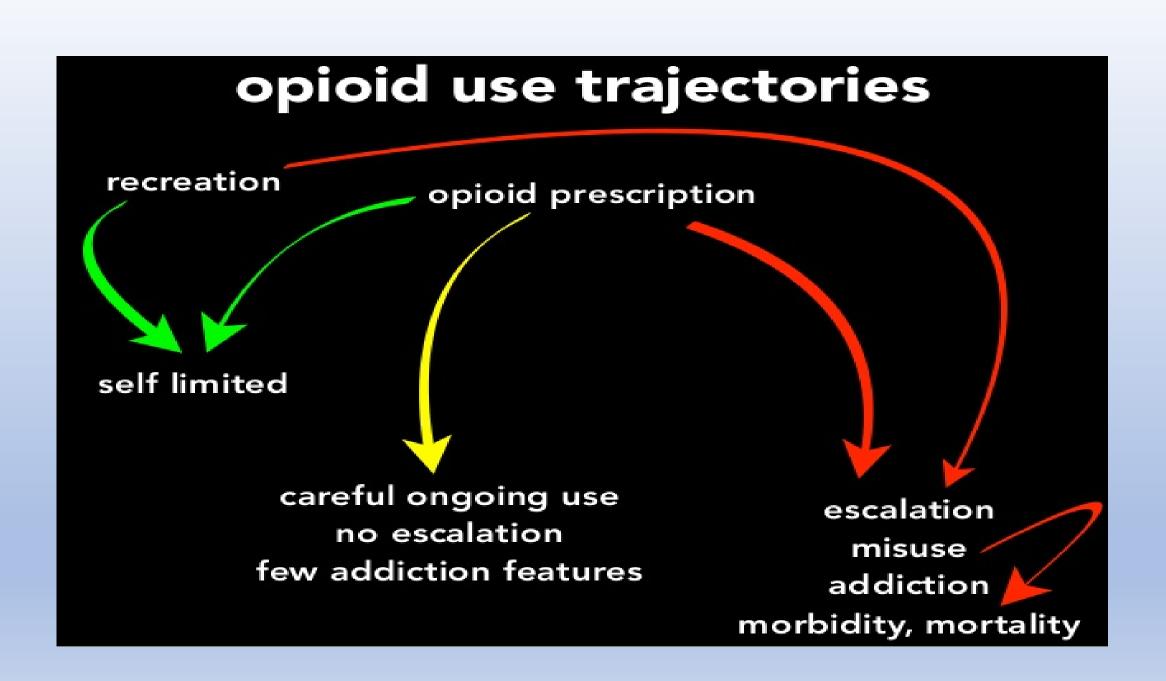




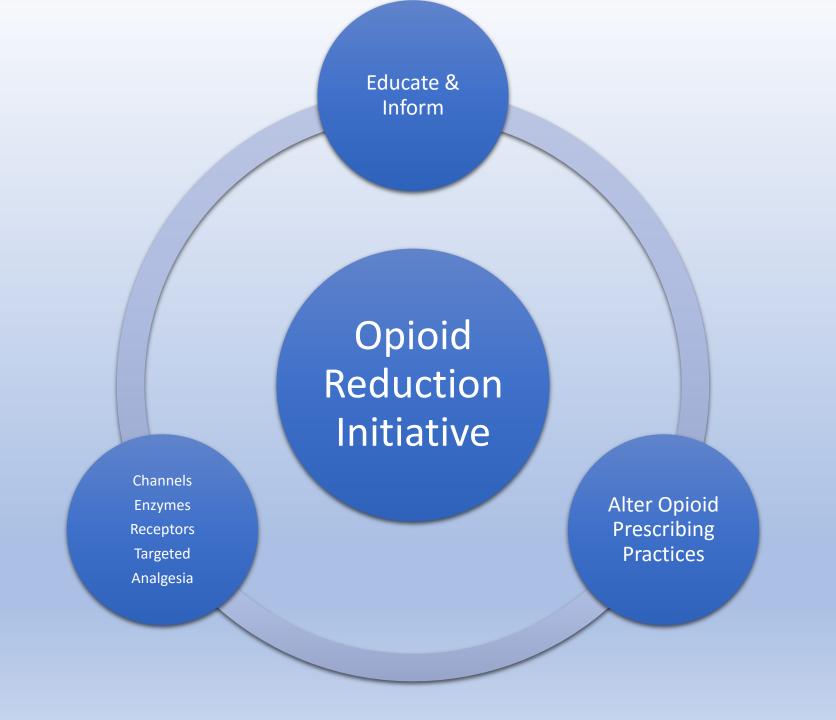


HEALTH ON INJECTIONS HARM
MEDICAL ADDICTION DEPRESSION NO
CHRONIC ADDICTION DEPRESSION NO
HARM DRUGS IN POLITICAL TREATMENT WITHDRAWL
ABUSE FAMILIES ADDICTS OVERDOSE EPIDEMIC
CONTROLLUSE DEATHS OVERDOSE ANTIDOTE
COMPULSIVE OF THE COMMUNITIES NOW
HEROIN DEPRESSION TO THE POLICING DEPENDENCE
ABUSE THE ATT OF THE COMMUNITIES

CHRONIC WITHDRAWL TO SEEK DEPRESSION TO SEEK







 Implementing an opioid reduction initiative in the ED will result in an overall decrease in opioid utilization for patients during their stay and at discharge.







Pre-Implementation Phase

2012 - 2014

Implementation Phase

2014 - 2015

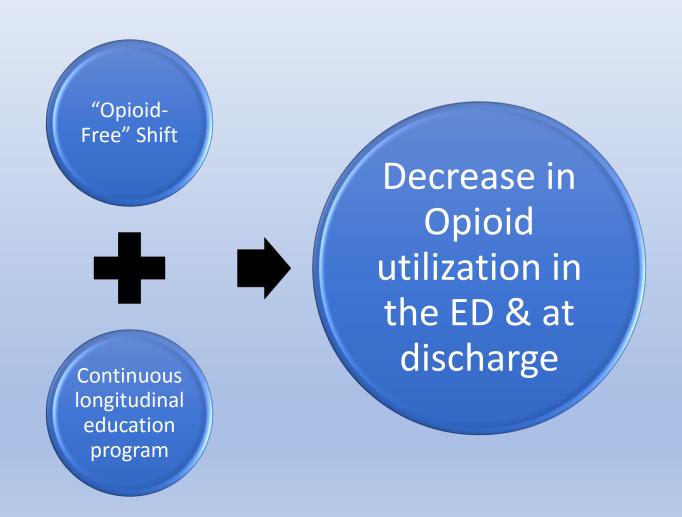
Post-Implementation Phase

2015 - 2017

Data Collection Points

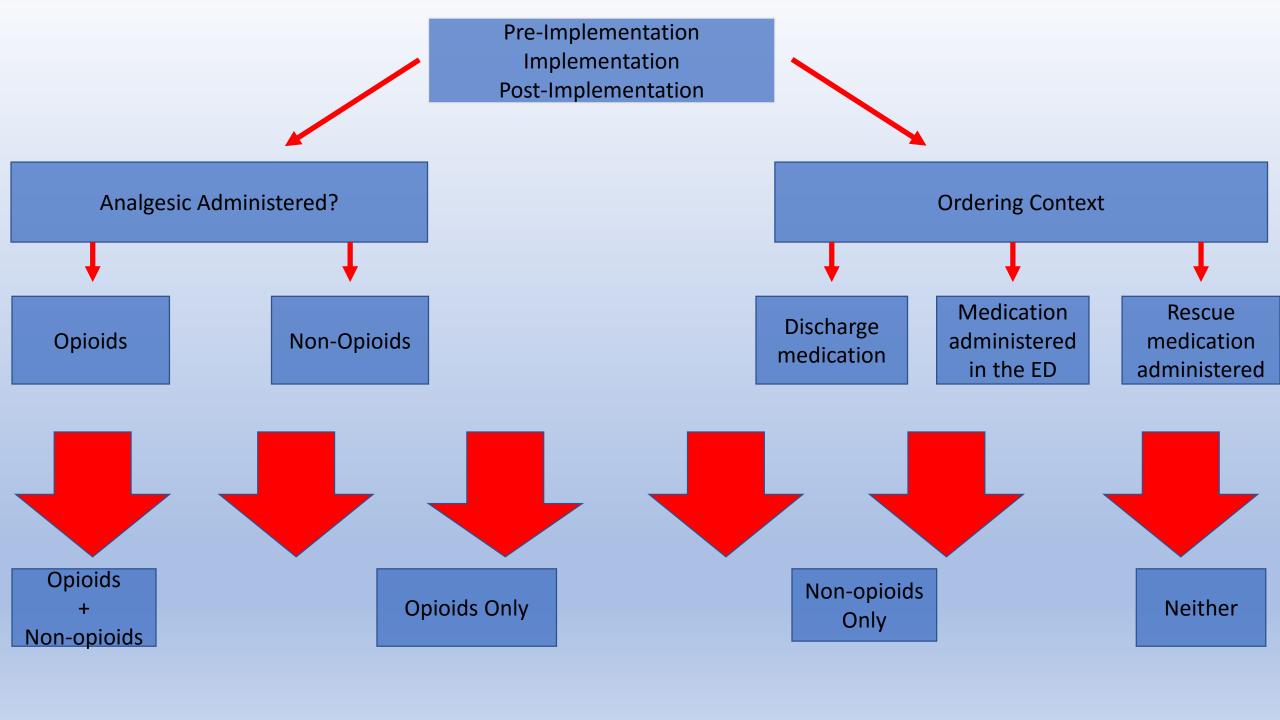
- Age
- Gender
- Chief complaints of abdominal pain and flank pain
- Final diagnoses of renal colic, kidney stone, nephrolithiasis, urinary calculus, and calculus in the kidney
- Analgesics administered in the ED (primary and rescue)
- Analgesics given at discharge (name, dose, route, and frequency of administration)

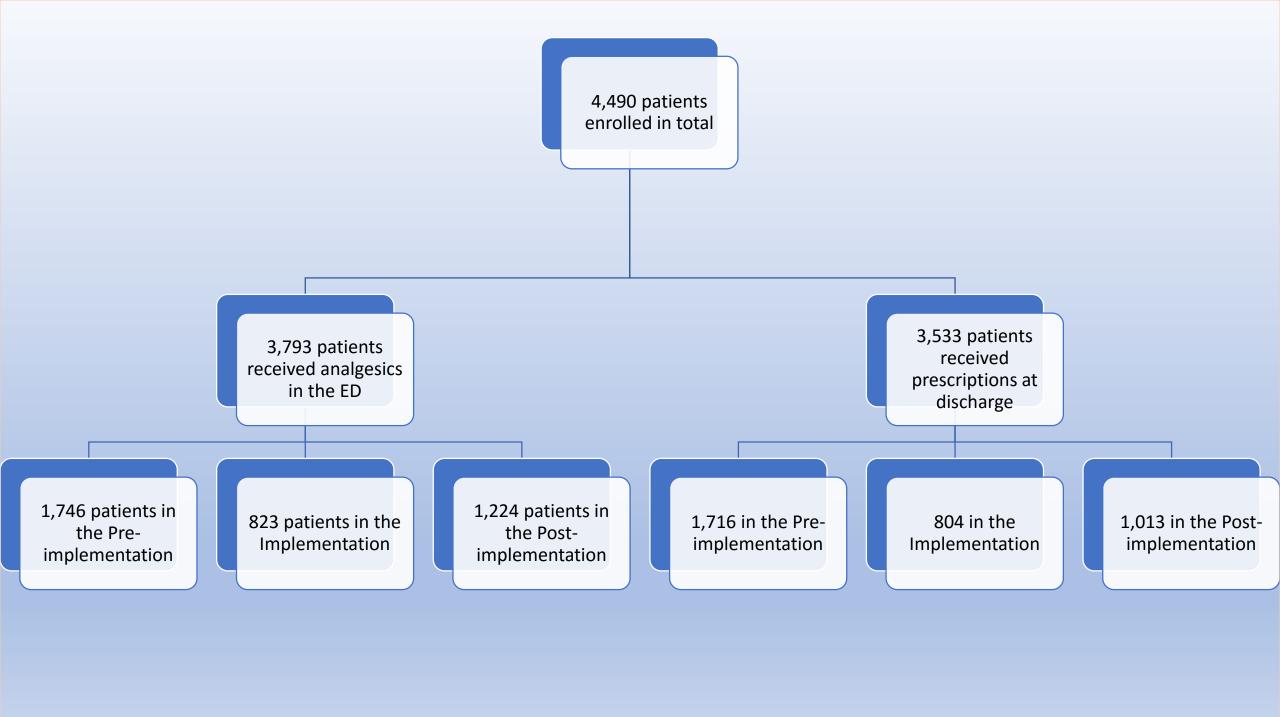
Implementation Phase Opioid Reduction Initiative



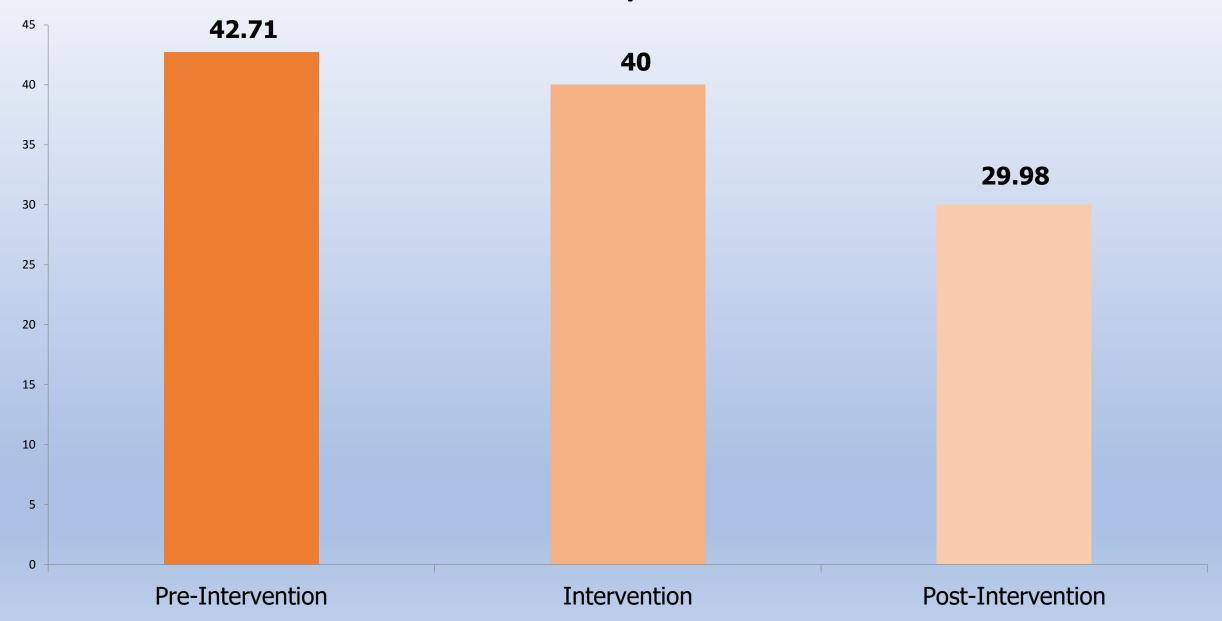
Educational Program Topics

History of Opioid Epidemic in the US	Regional Anesthesia and Analgesia in the ED
Alternatives to Opioid Analgesics in the ED	Pitfalls of Parenteral Opioid Use in the ED
Concept of Opioid-Free ED	Evolution of ED Pain Management
Ketamine for Pain Management in the ED: Myth or Reality?	Topical Analgesics for Acute and Chronic Pain
Ketamine Infusion for ED Pain Management	Nitrous Oxide for Pain Management in the ED
Dexmedetomidine in the ED	IV Acetaminophen for Pain Management in the ED

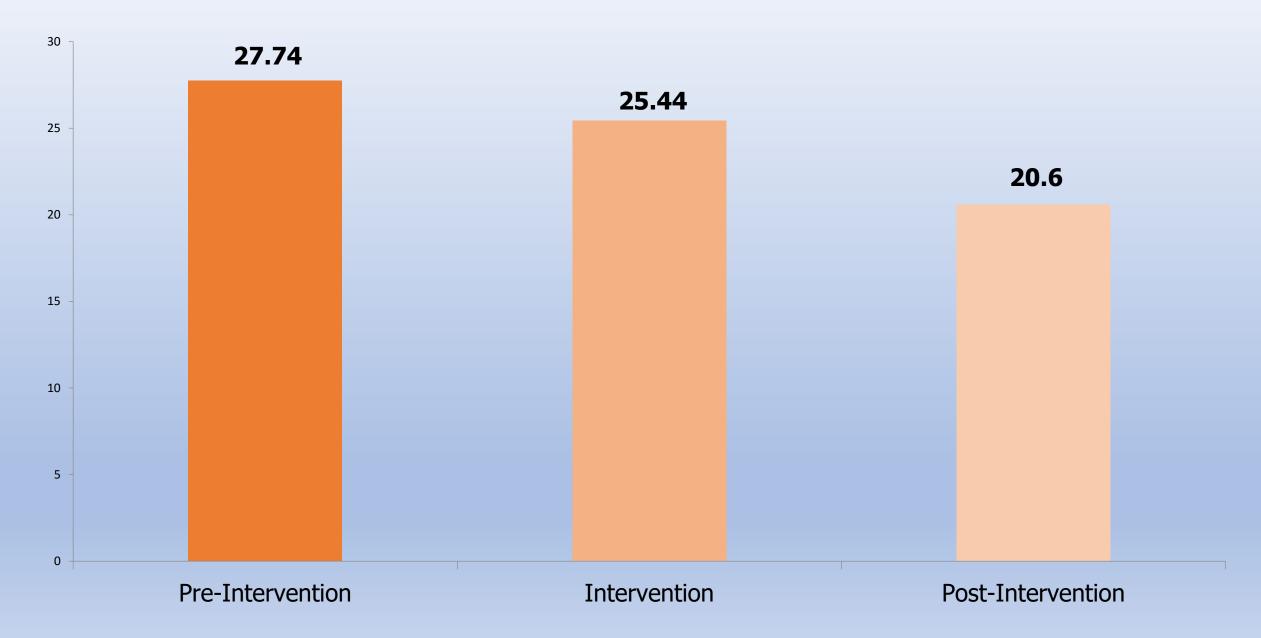




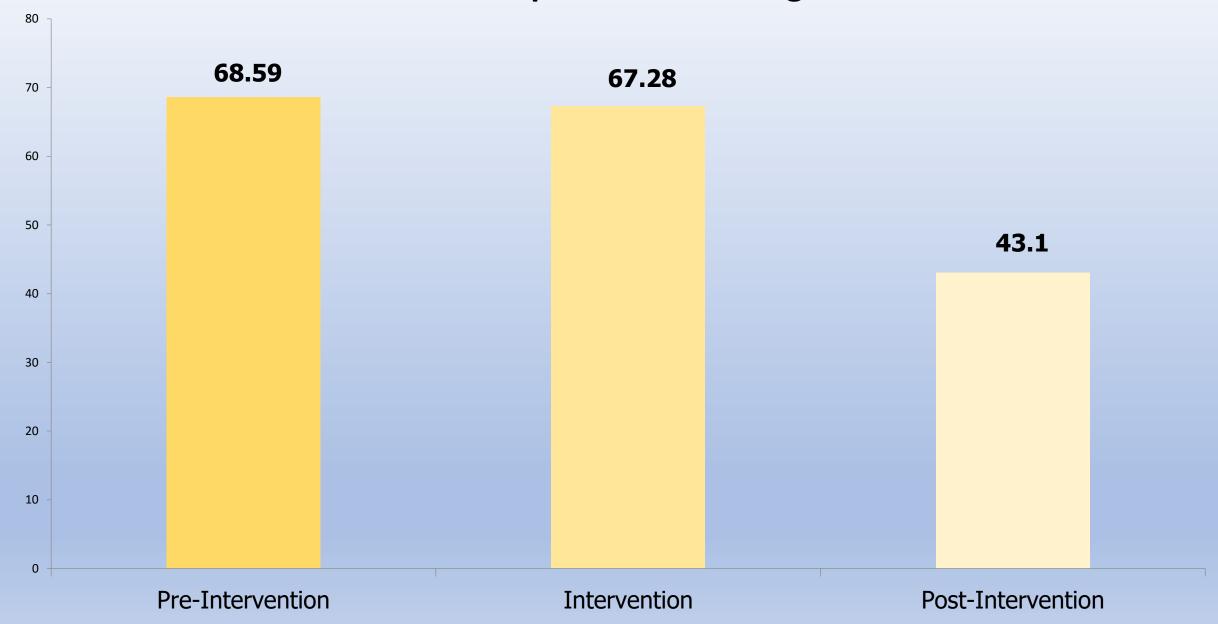
Total Opioids



Opioids Only



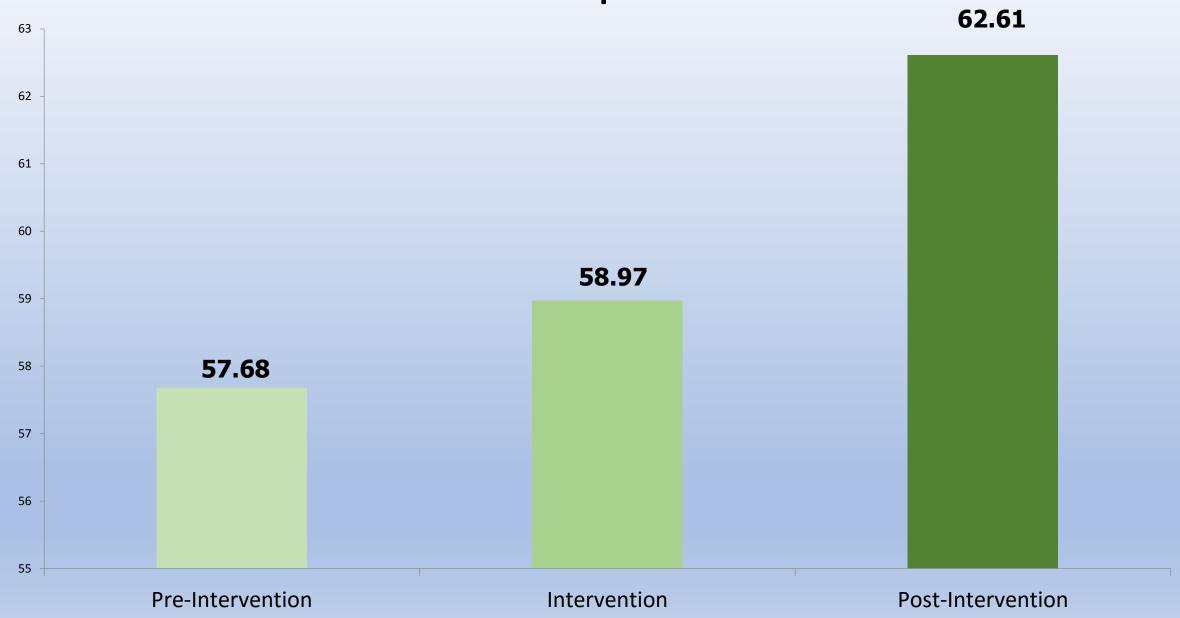
Total Opioids at Discharge



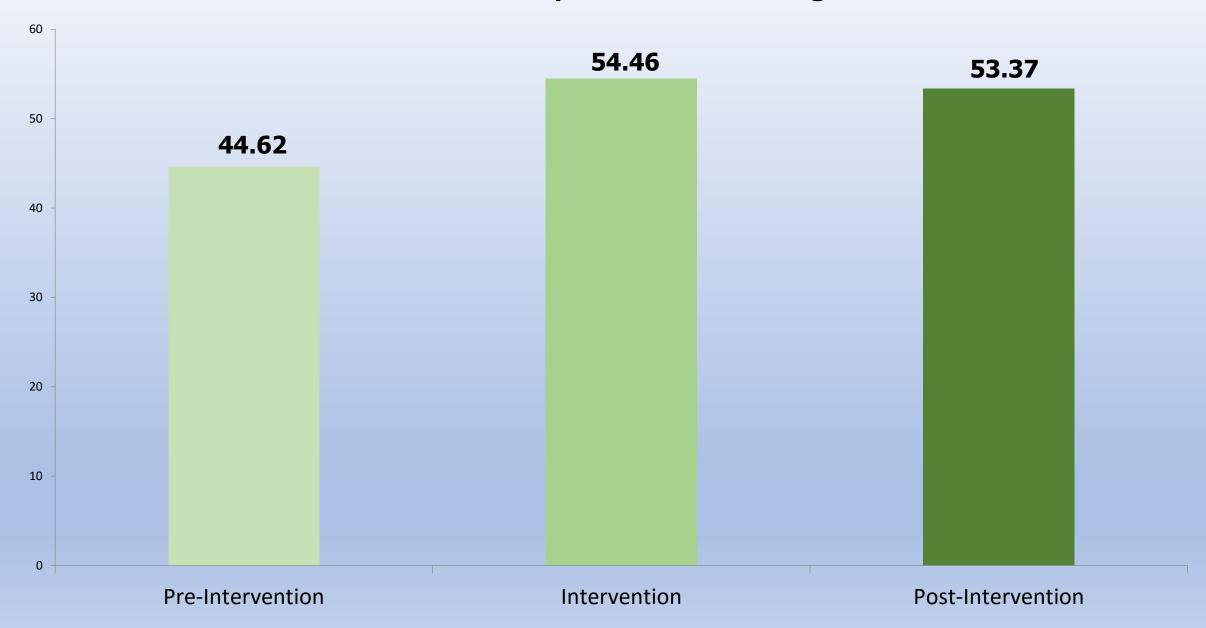
Opioids Only at Discharge



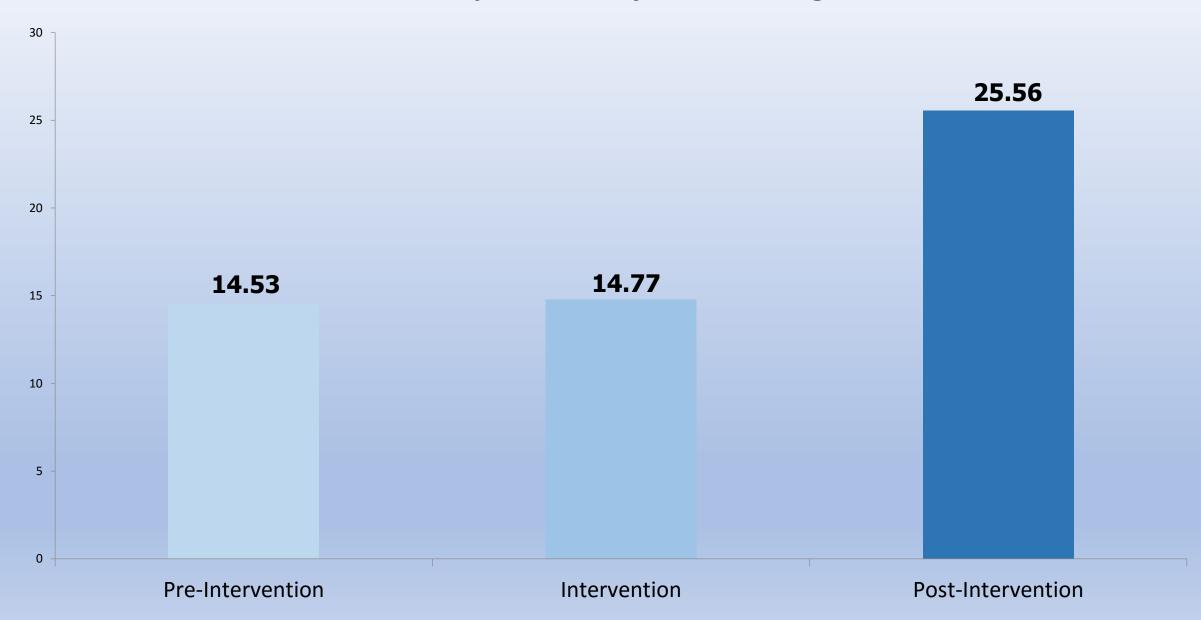
Total Non-Opioids in ED



Total Non-Opioids at Discharge



Non-Opioids Only at Discharge



In Emergency Department	Pre - Intervention	Intervention	Post - Intervention
Morphine Sulfate	39.58	36.62	28.35
Hydromorphone	0.83	0.72	0.07
Demerol	0.05	0	0
Fentanyl	0.05	0	0.27
Oxycodone/Acetaminophen	2.2	2.67	1.29
Codeine/Acetaminophen	0.15	0	0
At Discharge	Pre - Intervention	Intervention	Post - Intervention
Morphine Sulfate Immediate Release	0.05	0.2	5.3
Hydromorphone	0.1	0.1	0
Demerol	0.05	0	0
Hydrocodone/Acetaminophen	7.24	1.44	1.29
Oxycodone	0.2	0.1	0.2
Oxycodone/Acetaminophen	61.2	65.74	36.51
Codeine/Acetaminophen	1.17	1.23	1.29
Rescue	Pre - Intervention	Intervention	Post - Intervention
Morphine Sulfate	23.34	19.79	15.5
Hydromorphone	1.32	2.46	0.34
Demerol	0.05	0	0
Fentanyl	0.1	0.41	0.61
Oxycodone/Acetaminophen	5.77	3.79	1.63
Codeine/Acetaminophen	0.1	0	0.07

In Emergency Department	Pre - Intervention	Intervention	Post - Intervention
Ketorolac	55.28	56.51	56.15
Ketamine	0.05	0	0.07
Acetaminophen	1.13	1.33	4.35
Ibuprofen	1.17	0.72	2.72
Lidocaine	0	1.13	0.75

At Discharge	Pre - Intervention	Intervention	Post - Intervention
Gabapentin	0	0	0.07
Ketorolac	7	1.33	5.91
Acetaminophen	0.05	0.1	3.26
Ibuprofen	34.74	51.69	42.49
Lidocaine Patch	0	0	0.27
Naproxen	1.96	0.51	3.06

Opioid
Reduction
Initiative

Opioid
Prescribing
Practices

