

MORNING CMO REPORT

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FROM THE DESK OF:
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UPSTATE
 UNIVERSITY HOSPITAL

Opioid Safety Initiatives

Applies to All Physicians

Opioids Advisory

In response to a recent quality safety event within the hospital and a review of broader prescribing practices regarding opioids, you will notice a few recent changes within EPIC that will help to ensure safer use of these opioid medications. These are the initial steps in a series of improvements underway over the upcoming weeks and months.

In follow up to the 6/5/14 meeting led by Dr. Lehmann, the following RISK REDUCTION STRATEGIES have been developed related to immediately actionable recommendations generated from recent RCA, CQI and P&T discussions:

Recommendation	Action Plan	Target date
Restrict long acting opioids to confirmed, recent preadmission use for chronic pain	Add "OPIOID HISTORY" field to order entry screen for all long acting oral morphine, long acting oxycodone, methadone and fentanyl patch ERXs. Provider will be required to select "Chronic use" or "new therapy". If chronic use is selected and pharmacist can affirm this, order will be allowed. If "new therapy", order will be disallowed and pharmacist will NOT validate order unless Acute Pain Service is consulted and communicates approval. Exceptions such as use by Palliative Care providers will be evaluated on a case by case basis.	6/26/14
Restrict maximum dose of immediate release oxycodone to 10mg per dose	EPIC order interface for oxycodone 5mg tablets and oral liquid will have "radio button" dose selections for 2.5, 5, 7.5 and 10mg only. Add "ORDER INSTRUCTION" field at the top of the order detail stating "Immediate release oxycodone is limited to 10mg per dose. Higher doses require Pain Service consult and approval." Patients who are admitted on a chronic outpatient regimen (consistent with definition of opioid tolerance), whose dose exceeds 10mg, with stable pain control and no changes to analgesic therapy being made will not require Pain service consult/approval. Pharmacy will acquire 15 and 20mg oxycodone tablets for rare but approved uses. ERXs for these two items will be hidden from provider preference lists. Only Anesthesia providers and pharmacists will have access to these ERXs for approved uses.	6/26/14
Add Naloxone warning in EPIC	Add "ORDER INSTRUCTION" field at the top of naloxone injection (ERX 5373, 5374) orders to read: "Naloxone only works for 30 minutes. Opioids last longer. For other than procedural reversal, initiate capnography, move patient to monitored unit or call Rapid Response Team. Anticipate need for repeated dosing or continuous infusion based on opioid exposure." Add hyperlink at top of naloxone order screen to Naloxone policy Add hyperlink at top of naloxone order screen to graph of naloxone and opioid duration of effect Add "Clinical Dialogue Message" to Pyxis for naloxone products, stating: "DANGER, this drug wears off before opioids do."	6/26/14

ALERT-Highest priority emergency communication; warrants immediate action or attention by the recipient.

HIGH ADVISORY-High priority does not warrant immediate action but recipients should be aware.

ADVISORY-Provides very important information for a specific incident or situation that does not require immediate action.

UPDATES TO ALERTS AND ADVISORIES-Provides updated information regarding an incident or situation; unlikely to require immediate action.

INFORMATIONAL MESSAGE-Provides timely information, important for review or serves as a reminder for an action that should be taken.