Enhancing Opioid Stewardship Among Surgeons

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Reducing Initial Postoperative Opioid Prescribing Following Laparoscopic Cholecystectomy

GOAL: Improve adherence to the SCW Best Practice threshold (≤10 oxycodone tablets) for post-operative prescribing of opioid analgesics following laparoscopic cholecystectomy and define threshold levels for additional SCW Core Procedures.

Collaborative Intervention	Components
Adhere to the SCW Best Practice post-operative prescribing guideline for laparoscopic cholecystectomy	▪ SCW "Best Practice" threshold set at ≤10 oxycodone tablets or equivalent ▪ Evaluate individual performance measures to determine adherence (limited by lag in data)
Engage in purposeful pre-operative counseling	▪ Clear understanding of post-operative pain expectations ▪ Proposed pain management strategy ▪ Dangers of opioid medications ▪ Methods for safe disposal of unused pills
Increase use of non-opioid analgesics	▪ Perioperative use of local anesthetics, non-opioid medication (ketorolac) ▪ Scheduled acetaminophen and NSAIDS x48h ▪ Use of ice-packs
Define prescribing threshold for SCW Core Procedures (laparoscopic cholecystectomy, breast biopsy/lumpectomy, colectomy, appendectomy, inguinal hernia repair)	▪ Evaluate current prescribing practices ▪ Develop consensus threshold for each procedure

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Intervention 1: Prescribe 10 or fewer tablets of opioid medication following laparoscopic cholecystectomy

1. Identify characteristics about your practice that will either help or hinder your ability to implement this intervention (barriers/facilitators).

2. Who do you need to engage and what are their roles?

3. Initial tasks to get started(first steps/strategies needed to reach aim/desired outcome).

4. How will you determine success?Your goal(s) for success should answer the question, "What do you want to accomplish?" Well written goals should be S.M.A.R.T.: S –Specific ; M –Measurable ; A –Achievable ; R –Realistic ; T –Time-based; Write your goal(s)in the space below

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Intervention 2: Engage in purposeful pre-operative counseling with patients regarding pain expectations, pain management strategies and rational for minimizing opioids prescribed/used, safe disposal of unused pills

1. Identify characteristics about your practice that will either help or hinder your ability to implement this intervention (barriers/facilitators).

2. Who do you need to engage and what are their roles?

3. What are the initial tasks to get started (first steps/strategies needed to reach aim/desired outcome)?

4. How will you determine success? Your goal(s) for success should answer the question, "What do you want to accomplish?" Well written goals should be S.M.A.R.T.: **S – Specific ; M – Measurable ; A – Achievable ; R – Realistic ; T – Time-based;** Write your goal(s) in the space below

Goal 1:

Goal 2 (if applicable):

Goal 3 (if applicable):

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Intervention 3: Increase use of non-opioid analgesics

1. What non-opioid pain management options do you employ in your practice? Are there other you are interested in using?

2. Identify characteristics about your practice that will either help or hinder your ability to implement this intervention (barriers/facilitators). Who do you need to engage and what are their roles?

3. Initial tasks to get started (first steps/strategies needed to reach aim/desired outcome).

4. How will you determine success? Your goal(s) for success should answer the question, "What do you want to accomplish?" Well written goals should be S.M.A.R.T.: **S – Specific ; M – Measurable ; A – Achievable ; R – Realistic ; T – Time-based;** Write your goal(s) in the space below

Goal 1:

Goal 2 (if applicable):

Goal 3 (if applicable):

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Intervention 4: Define prescribing threshold for SCW Core Procedures (breast biopsy/lumpectomy, colectomy, appendectomy, inguinal hernia repair)

1. What do you feel is the "correct" amount of opioids to prescribe following each of these procedures?
   Current Prescribing:

2. Do you agree with the Michigan Opioid Prescribing Engagement Network (OPEN) recommendations: oxycodone tablets at initial discharge prescription, breast biopsy/lumpectomy-5, colectomy-15, appendectomy-10, inguinal hernia repair-10

3. What additional information do you require to feel confident about choosing a collaborative wide threshold for postoperative opioid prescribing following laparoscopic cholecystectomy?

Definitions

Determine Priority: Answering these questions will help you determine an activities priority and if a particular activity is worth doing

Aim/Desired Outcome: This is what you're hoping to achieve by accomplishing your plan or your goal.

Characteristics about your practice that will help or hinder your ability to implement: These are problems, attitudes, and challenges that you should think about and address to achieve success (barriers) or resources in-hand (facilitators). These could include people, time, materials, and know-how that already exist within your program and could be used to accomplish your tasks. This is an opportunity to identify resources that are needed in order to accomplish your tasks.

Determination of Success – How will the team know if the aim is achieved? - This is a simple way of keeping track of progress toward an aim/desired outcome. It should be easily tracked, and commonly understood. It data should be regularly checked to avoid wasting time on strategies that do not achieve your aim/desired outcome. Successful programs check in on average of every two weeks. For example, if you have a goal of increasing physical activity you need to:
1) Understand how many minutes of physical activity is currently happening on average throughout the program
2) Introduce your task/strategy for achieving your increased minutes of physical activity
3) Re-measure the amount of time of physical activity occurring in the program after your strategy has been rolled out
4) If your goal has not been reached, try a new strategy