

# THA Opioid Light ED Pilot Cohort 1



# Opioid Light ED Pilot

- Goal: Replicate success of Baptist Memorial Memphis and Swedish Medical Center in alternatives to opioids for pain management
- Utilize Pain Pathways by Indication
  - 1.) Headache/Migraine
  - 2.) Musculoskeletal Pain
  - 3.) Renal Colic
  - 4.) Chronic Abdominal Pain
  - 5.) Extremity Fracture/Joint Dislocation
- Allows for improved communication between staff and patients with tiered approach to pain

# Opioid Light ED Pilot Participants

## Cohort 1 – 30 Hospitals

- CHI Memorial Hospital-Chattanooga
- CHI Memorial Hospital-Hixson
- Henry County Medical Center
- Maury Regional Medical Center
- NorthCrest Medical Center
- Parkridge East Hospital
- Parkridge Medical Center
- Parkridge West Hospital
- Regional One Health
- Saint Thomas Dekalb Hospital
- Saint Thomas Hickman Hospital
- Saint Thomas Highlands Hospital
- Saint Thomas Midtown Hospital
- Saint Thomas River Park Hospital
- Saint Thomas Rutherford Hospital
- Saint Thomas Stones River Hospital
- Saint Thomas West Hospital
- Southern TN Regional Health System-Lawrenceburg
- Starr Regional Medical Center-Athens
- Starr Regional Medical Center-Etowah
- Sumner Regional Medical Center
- TriStar Ashlyn City Medical Center
- TriStar Centennial Medical Center
- TriStar Hendersonville Medical Center
- TriStar Horizon Medical Center
- TriStar Portland Medical Center
- TriStar Skyline Medical Center
- TriStar Southern Hills Medical Center
- TriStar StoneCrest Medical Center
- TriStar Summit Medical Center

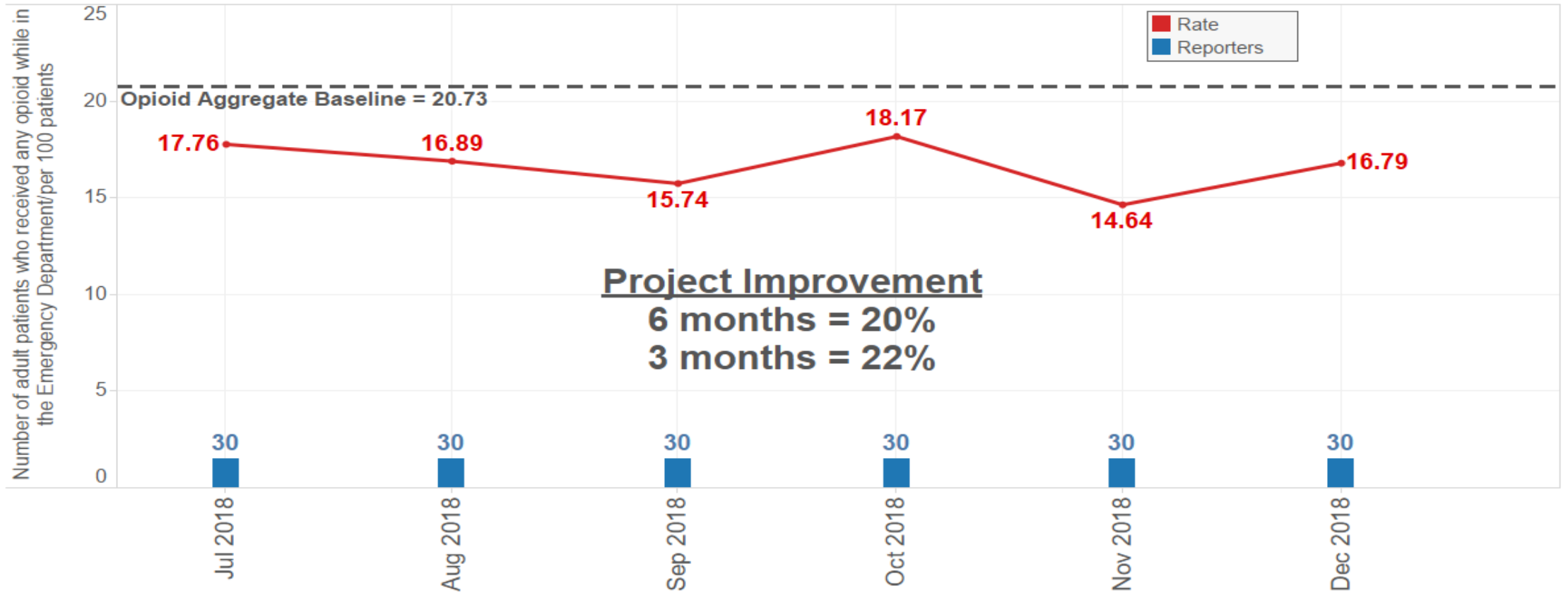
**Cohort 1: Submitted 2-3 months of data for baseline period and at least July – December 2018 for pilot**

Data Source: THA's Report Distributor as of January 31, 2019

# Opioid Light ED Pilot - Cohort 1

## Received Any Opioid in Emergency Room - Adult Patients

### July - December 2018



Numerator: Number of adult patients who received any opioid while in the Emergency Department

Denominator: Number of adult patient visits in the Emergency Department

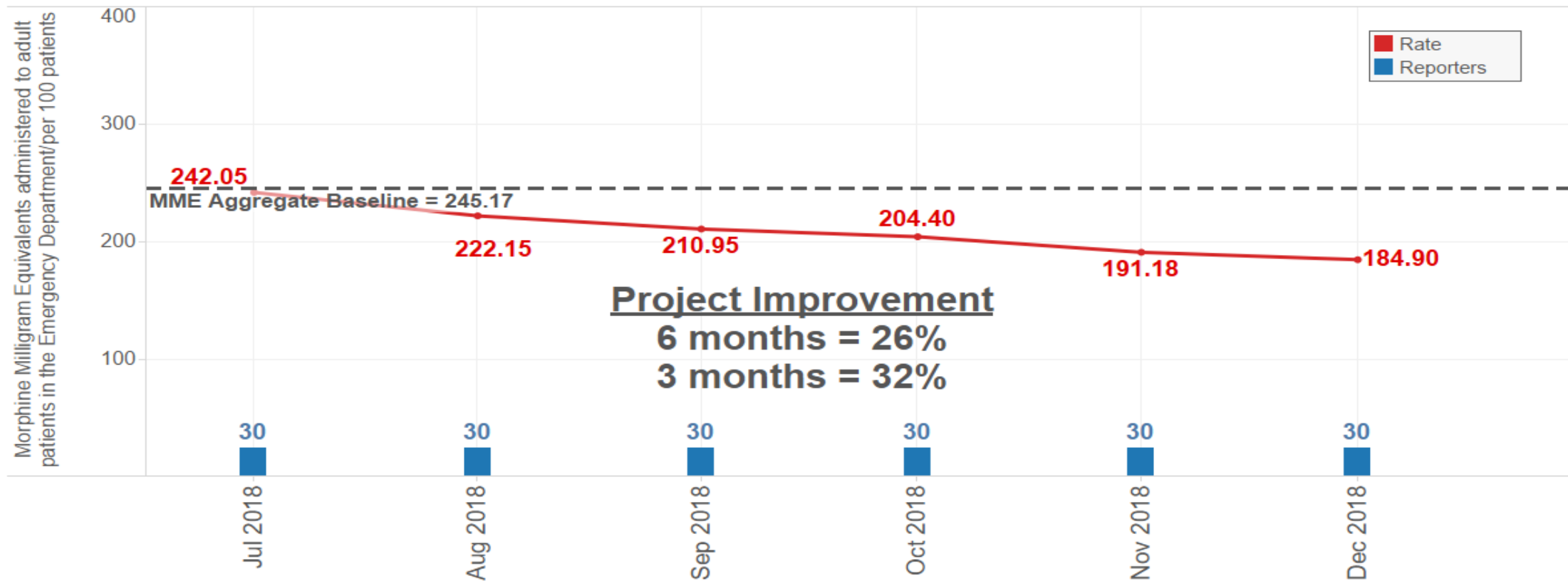
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This information is prepared and protected in accordance with the Tennessee Patient Safety and Quality Improvement Act of 2011. T.C.A. 68-11-272.

# Opioid Light ED Pilot - Cohort 1

## Morphine Milligram Equivalents - Adult Patients in Emergency Department

### July - December 2018



**Numerator:** Number of Morphine Milligram Equivalents administered to adult patients in the Emergency Department  
**Denominator:** Number of adult patient visits in the Emergency Department  
**Data Source:** THA's Report Distributor as of January 31, 2019

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# Opioid Light ED Pilot- Cohort 1 Results

## Number of hospitals who achieved 20% reduction

Baseline compared to most recent 3 Months (October – December 2018)

- 14 of 30 hospitals (46.7%) reduced the number of patients who received an opioid by 20% or greater
  - Range varied from no improvement to 56%
  - Longer the implementation period from baseline, the better the results achieved
- 21 of 30 hospitals ( 70%) reduced the total morphine milliequivalents given by 20% or greater
  - Range varied from no improvement to 57%

# Opioid Light ED Pilot- Cohort 1 Impact: Why This Work Matters

- Emergency Visits averaged approximately 70,000 patients/month
- Approximately 11,750 patients per month receive an opioid in the Emergency Department
- Achieving even a 20% reduction in opioid use, prevents opioid exposure to 2,350 patients per month
- Research shows that the dose and duration of opioid use in the opioid naive patient significantly increases the risk of long term use and addiction

# Baptist Memorial Hospital – Memphis Opioid Light Emergency Department Team





# Baptist Memorial Hospital – Memphis

## Key Contacts

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# Tennessee Hospital Association

## Key Contacts

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# Lessons Learned

- Time allocation needed to put together a multi-disciplinary team; plan for data collection and reporting; and formulate an implementation plan
- The longer the pain pathways are utilized, the greater the results

# Opioid Light ED – Next Steps

- Cohort 1
  - Report pilot results to THA Board
  - Ask hospitals to continue data submission
- Cohort 2
  - Recruitment starts in March
  - Launch June, 2019
  - Implementation September, 2019

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