

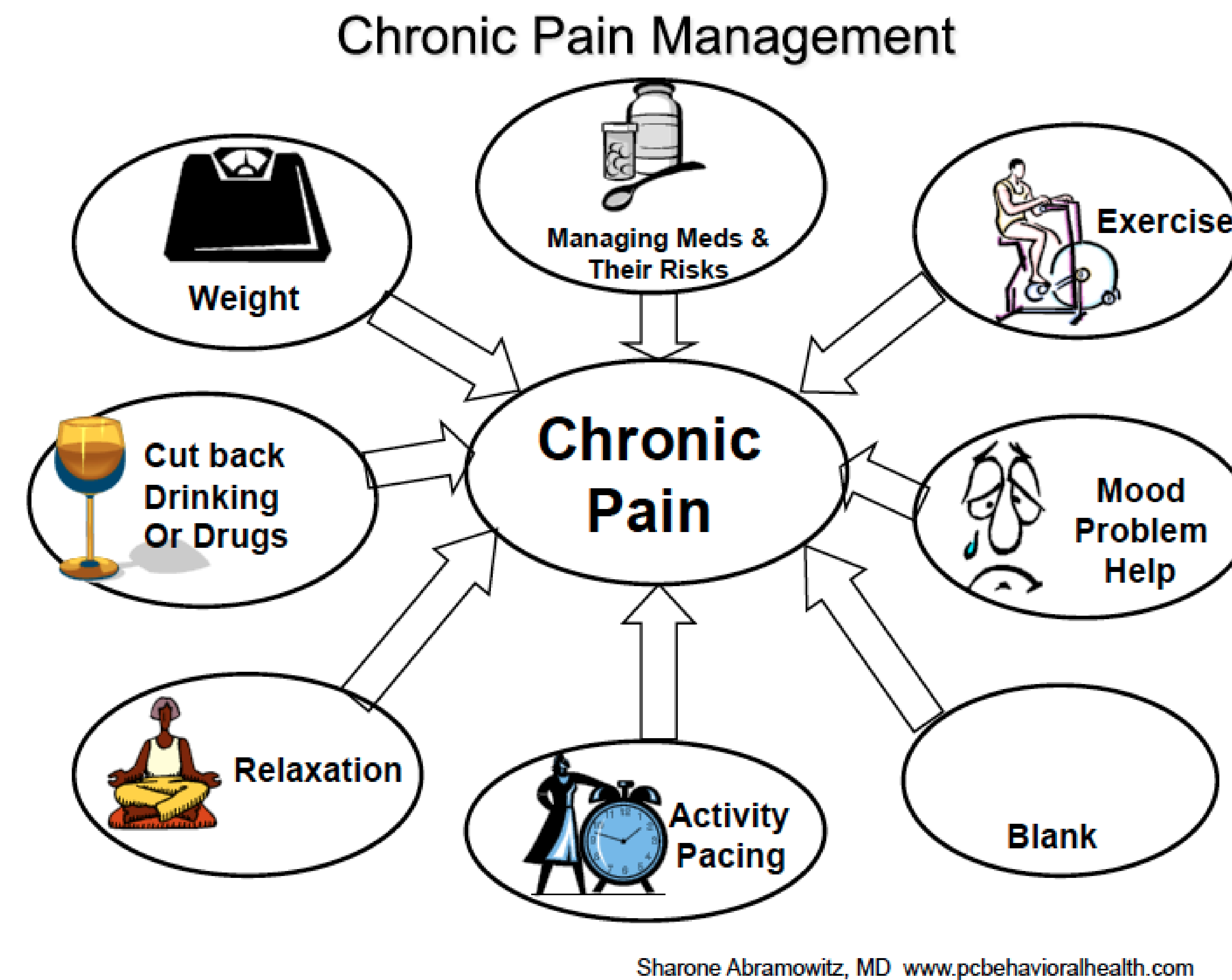
Chronic Pain Management in Primary Care: Tools for Safe Opioid Prescribing



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Background

- In 2012, there were 259 million opioid prescriptions written in the US,¹ nearly half in primary care.²
- Between 1999 and 2014, >165,000 people died from prescription opioid overdose.³
- 4 out of 5 heroin users started out misusing prescription pain pills.⁴
- To address this trend, Department work group developed evidence based guidelines to improve safety, equity and efficacy in our chronic pain management (CPM).



What's Next

- Tracking quality data with CPM Panel.
- Improving efficiency and consistency of Supervisory Committee reviews.
- Surveying patients and providers about the value of behavioral health visit.

References

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Elements of CPM

- Guidelines for max opioid dosing
- Opioid refills must occur in a visit
- Naloxone prescribing guidelines
- Personal Care Plan for CPM
- EPIC Smartset with note templates for assessment and follow up visits
- Quality checklist in problem list under “Chronic Pain Syndrome”
- Signed opioid treatment agreement
- Rapid urine drug screen use
- Minnesota Prescription Monitoring Program Database use
- Monthly visits for high risk individuals
- CPM Panel and Supervisory Committee
- Required Behavioral Health visit



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