Opioid analgesic stewardship: 5b - Proportion of opioid-naïve surgical patients separated from hospital with a supply or prescription of opioid analgesics where the supply or prescription was for a modified-release formulation

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# Opioid analgesic stewardship: 5b - Proportion of opioid-naïve surgical patients separated from hospital with a supply or prescription of opioid analgesics where the supply or prescription was for a modified-release formulation

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| Identifying and definitional attributes | |
| Metadata item type: | Indicator |
| Indicator type: | Indicator |
| Short name: | 5b - Proportion of opioid-naïve surgical patients separated from hospital with a supply or prescription of opioid analgesics where the supply or prescription was for a modified-release formulation |
| METEOR identifier: | 755561 |
| Registration status: | [Australian Commission on Safety and Quality in Health Care](https://meteor.aihw.gov.au/RegistrationAuthority/18), Standard 27/04/2022 |
| Description: | The proportion of admitted opioid-naïve surgical patients who separated from hospital with a supply or prescription of opioid analgesics where the supply or prescription was for a modified-release formulation. |
| Rationale: | There is no evidence to support the use of modified-release opioid analgesics for acute pain. Some emerging evidence shows that their use is problematic.  The aim of this indicator is to monitor a specific patient group where modified release opioid analgesics should not routinely be supplied or prescribed on separation from hospital. |
| Indicator set: | [Clinical care standard indicators: Opioid Analgesic Stewardship in Acute Pain - Acute care edition](https://meteor.aihw.gov.au/content/755544)  [Australian Commission on Safety and Quality in Health Care](https://meteor.aihw.gov.au/RegistrationAuthority/18), Standard 27/04/2022 |

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| Collection and usage attributes | |
| Computation description: | The numerator and denominator include patients admitted to hospital.  The numerator and denominator only include patients that separate from the hospital to their usual place of residence, which may include a residential care facility.  The [Separation mode](https://meteor.aihw.gov.au/content/722644) data element for admitted patients can be used to help identify denominator cases. Inclusion values for these data elements are:  21 - Discharge/transfer to a residential aged care service, which is not the usual place of residence  22 - Discharge/transfer to a residential aged care service, which is the usual place of residence  90 - Other: includes discharge to usual residence (not including residential aged care), own accommodation/welfare institution (includes prisons, hostels and group homes providing primarily welfare services).  For the clinical care standard and this indicator 'opioid naïve’ means patients who have not received opioid analgesics in the 30 days before the acute event or surgery.  Presented as a percentage. |
| Computation: | (Numerator ÷ Denominator) x 100​ |
| Numerator: | Number of patients in the denominator who were supplied or prescribed a modified-release formulation of opioid analgesics. |
| Denominator: | Number of opioid naïve patients admitted for surgery who separated from hospital with a supply or prescription of opioid analgesics. |
| Comments: | This indicator is based on existing indicators in use in North America. For example, the following indicator by Health Quality Ontario (2018) ‘Percentage of people with acute pain prescribed an opioid whose prescription is for an extended-release opioid’. |
| Representational attributes | |
| Representation class: | Percentage |
| Data type: | Real |
| Unit of measure: | Service event |
| Format: | N[NN] |
| Source and reference attributes | |
| Submitting organisation: | Australian Commission on Safety and Quality in Health Care |
| Reference documents: | Australian Commission on Safety and Quality in Health Care. Opioid Analgesic Stewardship in Acute Pain Clinical Care Standard – Acute care edition. Sydney: ACSQHC; 2022.  Health Quality Ontario. Opioid Prescribing for Acute Pain: Care for People 15 Years of Age and Older, Quality Standards: Ontario: HQO; 2018. |