

Opioid analgesic stewardship: 9c - Proportion of patients separated from the emergency department with a supply or prescription of opioid analgesics where the supply or prescription exceeded 3 days of treatment

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Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Indicator
Short name:	9c - Proportion of patients separated from the emergency department with a supply or prescription of opioid analgesics where the supply or prescription exceeded 3 days of treatment
METEOR identifier:	755576
Registration status:	Australian Commission on Safety and Quality in Health Care, Standard 27/04/2022
Description:	The proportion of non-admitted emergency department (ED) patients who physically departed the emergency department with a supply or prescription of opioid analgesics where the supply or prescription exceeded 3 days of treatment.
Rationale:	<p>Appropriate opioid analgesic prescribing on discharge balances adequate pain relief with reducing the risk of prolonged opioid analgesic use and reducing community reservoirs of unused opioid analgesics.</p> <p>If a patient is discharged from ED with an opioid analgesic, the quantity supplied may be for up to a maximum of three days' treatment. The quantity should be based on the expected course of the patient's condition and the day of the week the patient is discharged, to provide adequate supply until the patient can visit their general practitioner.</p>
Indicator set:	Clinical care standard indicators: Opioid Analgesic Stewardship in Acute Pain - Acute care edition Australian Commission on Safety and Quality in Health Care, Standard 27/04/2022

Collection and usage attributes

Computation description:	<p>The numerator and denominator include non-admitted patients treated in the emergency department.</p> <p>'Physically departed' means at that end of the emergency department stay, the patient departs the hospital without being admitted to the same hospital or transferred to another hospital.</p> <p>The Episode end status data element can be used to help identify denominator cases. The inclusion value for this data element is:</p> <p>2 - Emergency department stay completed - departed without being transferred to a short stay unit, hospital-in-the-home or other admitted patient care unit in this hospital or referred to another hospital</p> <p>Presented as a percentage.</p>
Computation:	$(\text{Numerator} \div \text{Denominator}) \times 100$
Numerator:	Number of patients in the denominator who received a supply or prescription of opioid analgesics that exceeded 3 days of treatment.
Denominator:	Number of non-admitted emergency department patients where the patient has physically departed from hospital with a supply or prescription of opioid analgesics.

Comments: This indicator is based on existing indicators in use in the United States. For example, the following indicator in the Houston Methodist Hospital Study (Rizk et al, 2019) 'Proportion of patients with opioid discharge prescriptions given in the ED that exceed 3–5 days'.

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.

Rizk E, Swan JT, Cheon O, Colavecchia AC, Bui LN, Kash BA, Chokshi SP, Chen H, Johnson ML, Liebl MG, Fink E. Quality indicators to measure the effect of opioid stewardship interventions in hospital and emergency department settings. American Journal of Health-System Pharmacy. 2019 Feb 15;76(4):225-35.
<https://doi.org/10.1093/ajhp/zy042>