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Title: *Quality Improvement Project: Assessing the Implementation of an Opioid Withdrawal Order Set*

Abstract

Opioid usage in the United States is a national crisis that takes the lives of many Americans. It is extremely important for hospitals to be prepared to properly care for a growing population of healthcare users. Standardized order sets for opioid withdrawal guide physicians, nurses, and pharmacists in proper patient care for patients experiencing opioid withdrawal symptoms. This quality improvement project examines how a pilot opioid withdrawal order set has improved patient care and outcomes. Patients (n=51) with a positive opioid urine screen with no corresponding diagnosis or an opioid-related ICD-10 diagnosis code were included. Electronic medical record data from this period showed that patients admitted to the hospital were 63% male, with an average age of 40 (± 12.2) years old. The patients were admitted to the hospital for a variety of reasons including overdose, withdrawal symptoms, infection, chronic obstructive pulmonary disease exacerbations, pain, diabetic ketoacidosis, and other conditions. The majority of patients (55%) were prescribed medication assisted therapy, a 45% increase from before the pilot order set. Patients recorded as receiving a naloxone prescription upon discharge was 43%. The number of patients leaving against medical advice fell by 38%.