

Abstract Submission Form 2017

#13

Salutation: *

Dr.

First Name: *

Kevin

Last Name: *

Samson

Clinic/Company: *

East Wellington Family Health Team

Role: *

MD, IT Lead

Phone Number *

Email Address: *

Type: *

Concurrent Session

Salutation: *

Dr.

First Name: *

Kevin

Last Name: *

Samson

Role: *

MD, IT Lead

How long have you been using an EMR? *

10 years

Salutation:

First Name:

Last Name:

Role:

How long have you been using an EMR?

Salutation:

First Name:

Last Name:

Role:

How long have you been using an EMR?

Who is your target audience? *

New EMR Users
Intermediate EMR Users
Advanced EMR Users

Abstract Title: *

Mind Your MEQ's: Optimizing your EMR for safer opioid management

Learning Objectives: *

Become familiar with how new, innovative EMR tools based on 2017 guidelines can be used to promote the safer and more efficient prescribing of opioids to patients with chronic non-cancer pain

Ensure that EMR charting requirements for opioid prescribing are being met

Review workflows to integrate opioid management tools into your practice

Abstract: *

Each year more than 650,000 Ontario Drug Benefit (ODB) eligible Ontarians receive a prescription for opioids. This represents 20% of all ODB eligible residents. More than 34,000 are on long term opioid therapy. Today, prescription opioids are more likely to be found on the street than heroin and have become the drug of choice for teens. More than 3,000 opioid related emergency department visits and 640+ opioid related deaths occur each year. We all need to focus on this issue!

Through the use of innovative new EMR tools, we will demonstrate how clinicians can use their EMR's to optimize their approach to the safe prescribing of opioids and have a significant impact on the clinical outcomes of these patients.

Meeting the recommended prescribing requirements and having the time and expertise required to provide optimal, individualized opioid treatment for patients with chronic non-cancer pain is a real challenge for physicians.

In response to this, and built upon the updated 2017 Canadian Guidelines, a new set of EMR tools have been developed to enable clinicians to safely and effectively prescribe opioid medications to their patients with chronic non-cancer pain.

These tools are presented in the form of a toolbar which appears in the patient's chart within the EMR should they require opioid therapy. A highlight of the toolbar is that it displays the calculated morphine equivalents (MEQ's) that the patient is on, and it turns color to attract attention when the levels are above certain ranges. The toolbar also includes a number of simple buttons which represent each of the recommended requirements (ex. pain condition diagnosis, risk screening, goal setting, informed consent, appropriateness of opioid(s) selected and dose, opioid effectiveness, and drug testing). The buttons also turn colour if any of the requirements are either missing or out of date, providing clinicians with an 'at a glance' view of the status of the patient's opioid management. Clicking the buttons brings up standardized, evidence based tools used to manage the patient's care. There are also buttons that provide links to other related tools, references, handouts and patient report cards.

These tools are being deployed to a number of practices and data will be presented on the feedback from patients and physicians, the effect on the quality and completeness of the opioid related data in the EMR, and the impact on prescribing patterns.

We look forward to sharing our experiences and results, and to showing you how you can use these tools in your practices.

