Simple Strategies for Opioid Adverse Drug Events:
Keeping a Pulse Check on Your Facility's Events

Think About It!

Opioid-related adverse drug events are associated with negative patient outcomes and increased health system costs.

A recent study found that adverse drug events were the most common adverse events. As many as 25% of those adverse drug events have been found to be preventable *(Bates et al., 2023).*

Opioid-related adverse drug events can range in severity from opioid-related constipation, to decreased blood pressure, pulse, respiratory rate or unresponsiveness.

Download Your Free Review Tool

Click **HERE** to download your free Opioid Adverse Drug Event Review Tool. You can print it out the PDF to write on it or type in the fillable forms.

Take Action!

- Since prescribing errors and inconsistent or inadequate patient monitoring are main causes of opioid-related adverse drug events, system-wide changes that address these items is a critical aim *(Office of Disease Prevention and Health Promotion, 2014).*
- Tracking and investigating opioid-related adverse events allows key personnel to take action on contributing factors.
- Facilities differ in their ability to identify and track opioid-related adverse drug events. This can be accomplished through:
  - ° Leveraging electronic medical records (EMR)
  - ° Relying on incident reporting by staff or a third-party platform (not as reliable)
  - ° Tools such as the IHI Global Trigger Tool
- HQI's Opioid Adverse Drug Event Review Tool (**see page 2 or left column**) provides a way for facilities to investigate and keep track of communication regarding an opioid-related adverse drug event.
  - ° Listed ICD-10 codes provide a way for investigators to search for events
  - ° Identifying key stakeholders allows for open communication and follow-up
  - ° Documentation of contributing or associated factors allows providers to keep track of trends (Example: If best practices were followed regarding the ordering or dosing of an opioid, if sufficient review of the patient's full medication list occurred prior to prescribing, if the patient was appropriately monitored)
- The Opioid Review Tool is for documentation of next steps, or actions to be taken after an investigation or analysis of the event (such as sharing findings with appropriate staff or committees, or policy changes)
  - ° Can be used internally, as part of a formal review process
  - ° Can be used informally and serve as a way to open communication with your Quality Improvement Advisor, to determine if there are any tools or resources that can be provided to assist in decreasing future events.

Bates, D. W., Levine, D. M., Salmasian, H., Syrowatka, A., Shahian, D. M., Lipsitz, S., Zebrowski, J. P., Myers, L. C., Logan. M. S., Roy, C. G., Iannaccone, C., Frits, M., Volk, L. A., Dulgarian, S., Amato, M. G. Edrees, H. H., Sato, L., Folcarelli, P., Einbinder, J. S., . . . Mort, E. (2023). The safety of inpatient health care. The New England Journal of Medicine, 388(2), 142-153.

Office of Disease Prevention and Health Promotion. (2014). National action plan for adverse drug event prevention. U. S. Department of health and Human Services. https://health.gov/sites/default/files/2019-09/ADE-Action-Plan-508c.pdf

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Opioid Adverse Drug Event Review Tool

Name:	Date:		
MRN:	DOB:		
Unit:	☐ M	☐ F	☐ Other
Admission Date:	Discharge Date:		

ICD-10 Codes:

T40.2X1 – poisoning by other opioids, accidental (unintentional)
T40.2X4 – poisoning by other opioids, undetermined
T40.2X5 – adverse effect of other opioids
T40.3X1 – poisoning by methadone, accidental
T40.3X4 – poisoning by methadone, undetermined
T40.3X5 – adverse effect of methadone
T40.4X1 – poisoning by other synthetic narcotics, accidental (unintentional)
T40.4X4 – poisoning by other synthetic narcotics, undetermined

T40.4X5 – adverse effect of other synthetic narcotics
T40.411 – poisoning by fentanyl or fentanyl analogs, accidental (unintentional)
T40.414 – poisoning by fentanyl or fentanyl analogs, undetermined
T40.601 – poisoning by unspecified narcotics, accidental (unintentional)
T40.604 – poisoning by unspecified narcotics, undetermined
T40.605 – adverse effect of unspecified narcotics
T40.691 – poisoning by other narcotics, accidental (unintentional)
T40.694 – poisoning by other narcotics, undetermined
T40.695 – adverse effect of other narcotics

ICD-10 Code(s) Involved	Priority?	Reviewed With/ By:
	Ex: Is it an adverse event like opioid-related constipation, or was a reversal necessary?	Ex: Quality team? Pharmacy review team? Safety Committee?

Contributing/ Associated Factors:
Findings from RCA/investigation
Ex: were prescribing best practices followed?
Ex: was patient's history and medication list considered?
Ex: was correct medication/correct dose administered?
Ex: was patient being monitored properly?

Actions Taken:
Education
Ex: provider education on prescribing best practices
Ex: nurse education on appropriate monitoring/reporting of changes in patient's status
Policy Changes
Ex: specific process for prescribing and monitoring patients on opioids