

# Opioid Education and Nursing Knowledge

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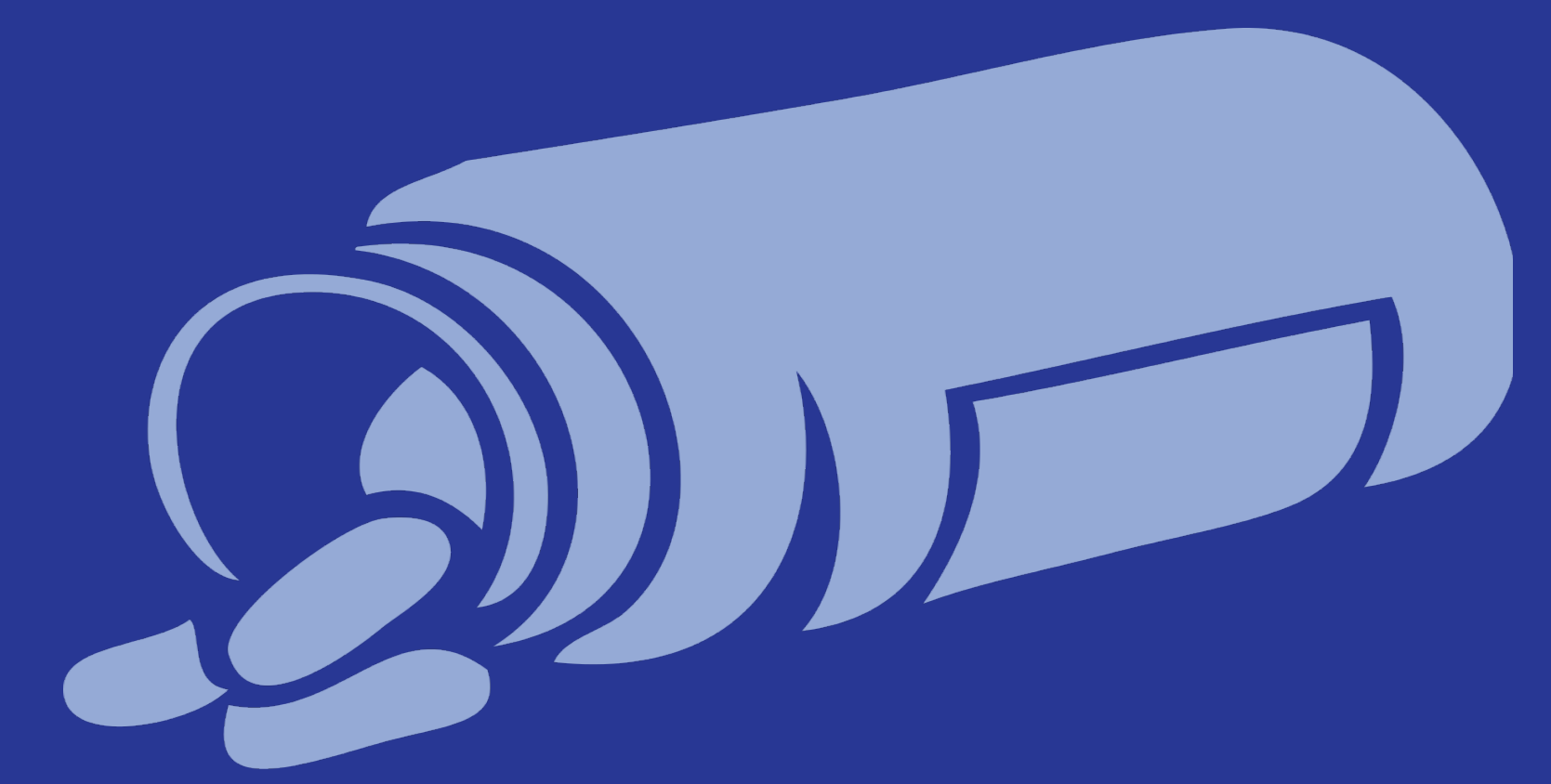
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# Opioid Education and Nursing Knowledge

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## BACKGROUND

- In the immediate post operative period, pain control is a priority.
- With shorter hospital stays, patients are being sent home with short term narcotic pain medications.
- The After Visit Summary (AVS) is a standardized discharge tool utilized across LVHN, but there are little to no education tools included regarding opioid usage upon discharge.

## PICO

P- Medical/surgical nurses who are discharging patients with opioid prescriptions

I- Providing education on the tool kit.

C- Only reviewing AVS

O- Increase nursing knowledge about the tool kit and increasing patients receiving the opioid tool kit.

- In Medical/Surgical nurses who are discharging patients with opioid prescriptions, does educating nurses on the pain medication tool kit, compared to AVS only, increase nursing knowledge about the tool kit and increase patients receiving education on opioids at discharge.

## EVIDENCE

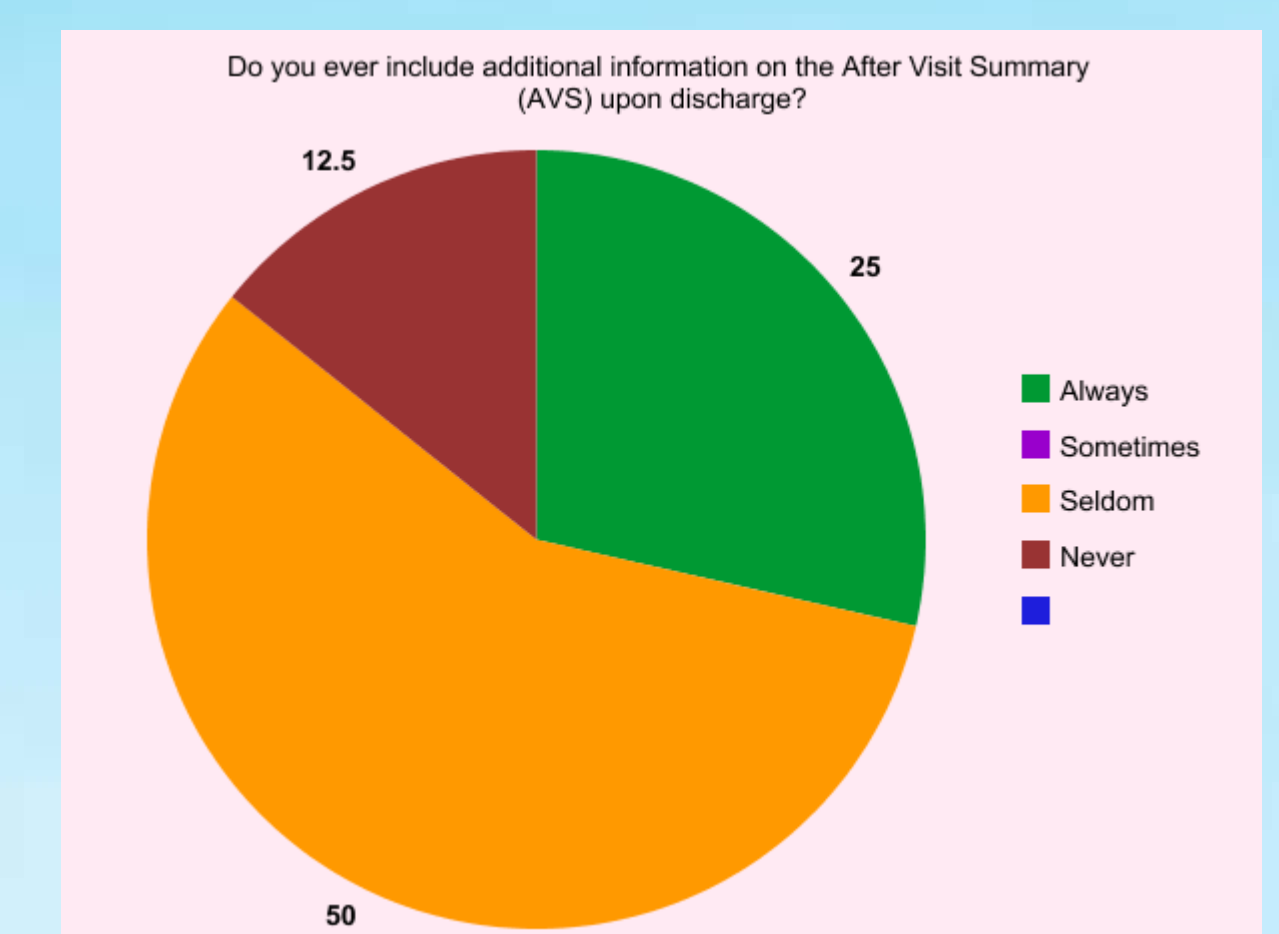
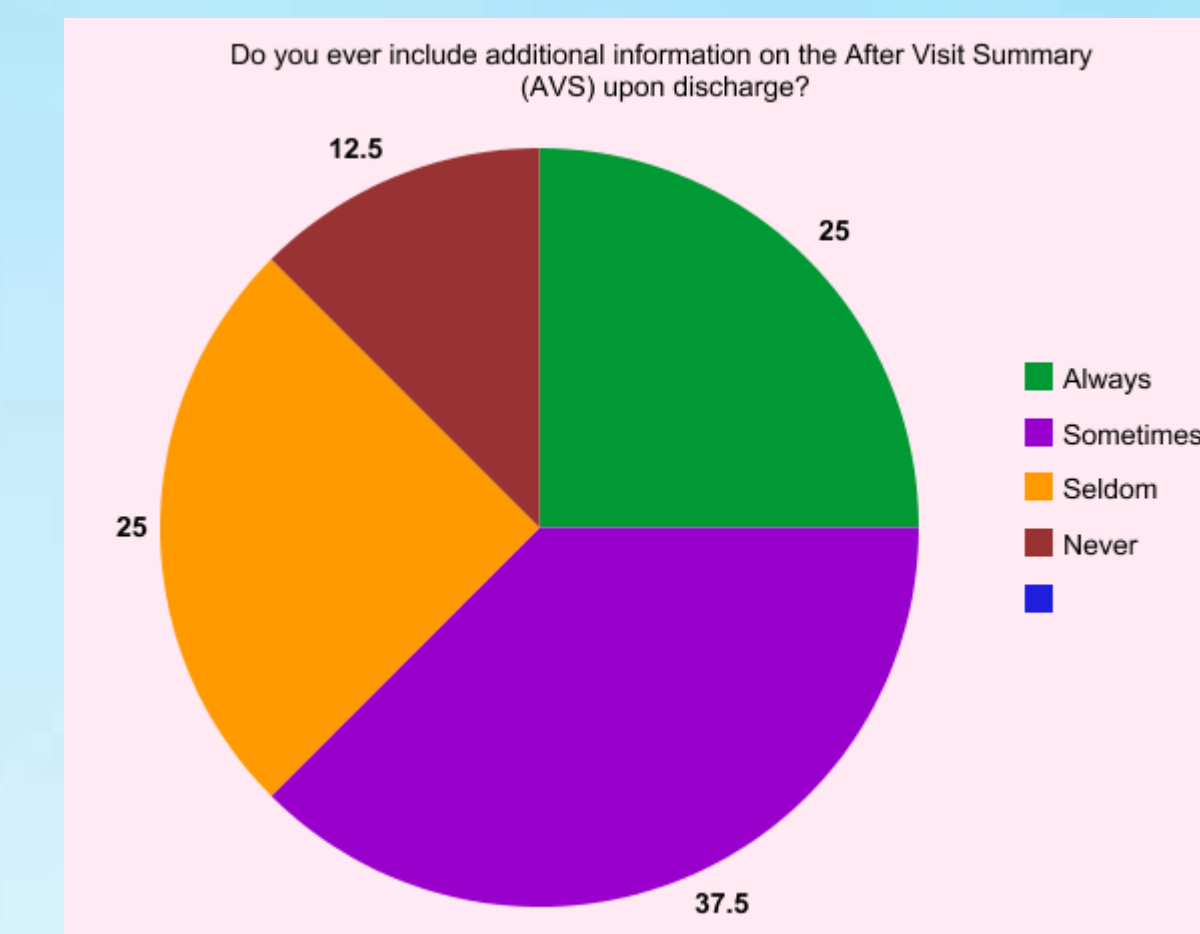
- In “Managing opioid addiction risk in plastic surgery during perioperative period,” (Demsey et. al.) it was found that in urology patients 92% of patients did not receive instructions on how to dispose of left over opioids.
  - 83% of thoracic and gynecologic post op patients had left over opioid medications and 71-73% stored the leftover unsafely. (Demsey et. al.)
- A hospital survey conducted in Canada was used to study nurses’ attitudes and behaviors towards pain and pain management. The survey discovered that questions concerning the S/S of opioid overdose (respiratory depression/sedation) were scored the lowest.(Brunjer et. al)

## METHODS

- Nurse residents educate staff on providing patients with home pain medication education and where to document that the information was given.
- Nurse residents will receive and review checklist after patients are discharged.
- Nurse residents will review discharge notes to see if nurses gave discharge pain medication education to patients.
- Assign research helpers and frequent emails to encourage coworkers to hand out packets and chart that the patients received the packets.

## DATA

- Ten nurses from both units completed the survey, however, only eight completed both the pre and post survey. Only the nurses who completed the pre and post surveys were included in the data collection.
- After completing chart reviews, only five patients were sent home with the Lexicomp Toolkit handout.



## BARRIERS

- Limited response to Survey.
- Limited number of patients given Lexicomp Toolkit Opioid Handout.

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