2019 NEHS Annual Meeting Abstract Submission

ABSTRACT TITLE *	Trends In Intern Opioid Prescribing At An Academic Institution And Opioid Prescribing Protocols
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Name of who will present abstract at NEHS meeting on December 6, 2019 **Please note that the same person cannot present more than one abstract at the meeting.** *	Craig Moores (2 sumbitted, will present 1)
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ABSTRACT – should include background information and a description of methods, programs, or practices. *

Purpose: We hypothesized that an evidence-based opioid prescription protocol as well as a formal intern education session would significantly decrease the prescription of opioids by the interns in a surgical training program.

Methods: An opioid prescription protocol was presented to the intern class during a formal opioid prescribing education session in an academic medical center. Using a national prescription monitoring program (PMP), we analyzed the prescription habits of the interns and compared them to the intern class from two years prior.

Results: A total of 5,075 prescriptions were analyzed. The intern class of 2017 (cohort 1) was compared to the class of 2019 (cohort 2). There were 19 interns in each cohort for a total of 38 prescribers evaluated. A 10 month prescribing period was assessed. The average monthly umber of prescriptions written was 329 in Cohort 1 and 299 in cohort 2. The average daily Morphine Milligram Equivalents (MME) was 66.83 in cohort 1 compared to 40.27 in cohort 2 (p-value < 0.0001). The average total MME per prescription was 752.57 in cohort 1 and 220.76 in cohort 2 (p-value 0.0001). The average numbers of tabs per prescription was 62.26 (SD 18.41) in cohort 1 and 20.92 (SD 6.03) in cohort 2 indicating a more standardized prescribing pattern in cohort 2.

Conclusion: We achieved a significant reduction in the mean MME per prescription by implementing a prescription protocol and a low fidelity intern education session in a surgical residency. Formal physician opioid prescribing should be a mandatory requirement of resident training programs. National and state prescription monitoring programs should continue to partner with physician scientists to evaluate what prescribing practices are most beneficial to patients

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