eFig. 1   Prescribing an opioid pain medication: hospital poster

Prescribing an opioid pain medication?

Here are some tips when discussing opioids as part of pain management with your patients:

Patient understanding
Discuss patient's pain expectation and set goal for tolerable pain and NOT zero pain.

Alternatives
Consider combination of acetaminophen, ibuprofen and/or other multimodal analgesia, as well as, non-pharmacological therapies such as heat and/or cold therapy.

Indications
Not all pain needs to be treated by opioids and some types of pain might not even respond to an opioid. When possible, choose oral administration instead of intravenous

Necessary quantity only
For acute pain a duration of 3 days or less is often sufficient. If a duration more than 7 days is indicated a follow up pain management assessment should be arranged. Consider part-fill prescriptions with expiry dates.

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eFig. 2   Opioids for pain after surgery: patient handout. Adapted from ISMP Canada

eTable   Step selection model

		Estimate (MME)	95% CI	Pr(>|t|)
Main effects	(Intercept)*	95.6	82.8 to 108.5	<0.001
	Surgery year: 2019	-72.6	-76.5 to -68.7	<0.001
	Multiple gestation: yes	-4.2	-12.1 to 3.8	0.31
	Parity: 2 or more	-2.5	-7.8 to 2.9	0.37
	Cesarean delivery number: 2 or more	1.2	-4.4 to 6.8	0.68
	Length of stay (days)	-1.2	-2.4 to 0.1	0.06
	Incision type: midline or T	7.4	-4.7 to 19.4	0.23
	Incision type: high transverse	-0.5	-10.3 to 9.3	0.92
	Opioid use in-hospital: yes	2.8	-0.7 to 6.3	0.12
	Month of surgery: July	1.5	-11.4 to 14.4	0.82
	Month of surgery: August	1.6	-11.3 to 14.5	0.81
	Month of surgery: September	5.2	-7.7 to 18.1	0.43
	Month of surgery: October	3.6	-9.2 to 16.5	0.58
	Month of surgery: November	1.0	-11.9 to 13.9	0.88
	Month of surgery: December	6.0	-6.9 to 19.0	0.36
Effect modifiers for 2019	Multiple gestation: yes	7.6	-3.4 to 18.6	0.18
	Parity: 2 or more	6.7	-1.4 to 14.7	0.10
	Cesarean delivery number: 2 or more	-8.1	-16.5 to 0.3	0.06
	Incision type: midline or T	12.2	-6.1 to 30.6	0.19
	Incision type: high transverse	6.5	-7.1 to 20.1	0.35
	Opioid use in-hospital: yes	22.6	17.5 to 27.7	< 0.001

The step selection model was generated with the ordinary least squares regression using the lm() package in R statistical software. Each of these variables was allowed to interact with the intervention period. The penalty term was set to k = 1.074, which is equivalent to a P value threshold of 0.3 for variable inclusion at each step of the algorithm. Coefficient estimates and Wald-test P values for the final model are reported in this table.

CI = confidence interval; MME = morphine milliequivalents.

* refers to discharge opioid prescription in morphine milliequivalents in June 2018 with all categorical variables set to their respective reference categories, and all continuous variables centered and scaled to 0.