INsight® Risk Assessment for Safe Opioid Practices

Fast, effective way to assess risks

ECRI Institute's web-based risk assessment provides perspectives from the front-line to leadership to help the organization assess the strength of their opioid practices. Reports are generated based on survey results to help identify opportunities so you can focus on improvements.

Sample Questions

- ➤ Smart infusion pumps with dose error reduction software are utilized whenever PCA or PCEA is administered. (Administration)
- ► The patient's last dose of an opioid or other sedating medication is reviewed before administering opioid medications.

 (Administration)
- ➤ All parenteral opioids compounded in the pharmacy undergo an independent double check prior to dispensing, (Dispensing)
- Controlled substances are prohibited from being assigned to automated dispensing cabinets (ADCs) matrix type drawers. (Dispensing)
- ▶ Patients receiving opioid medications are assessed for levels of sedation using an evidence-based standardized sedation scale. (Monitoring)
- ▶ Patients receiving oral opioid medication are assessed for adequate pain relief by using an evidence-based standardized pain scale within 30 to 60 minutes after administration. (Monitoring)
- Opioid order sets that include separate protocols for opioid naïve and opioid tolerant patients are used in the organization. (Prescribing)
- ▶ Range-of-dose orders for opioids include the organization's approved pain scale to assist nurses in determining the appropriate dose to administer. (Prescribing)
- Naloxone use is tracked and monitored in your organization. (Quality)
- Patient falls are reviewed for opioid related factors. (Quality)

Key areas:

Administration

Dispensing

Monitoring

Prescribing

Quality



Take the first step in reducing risk associated with opioid practices.

To learn more about INsight for safe opioid practices, call (610) 825-6000, ext. 5891, e-mail insight@ecri.org or visit www.ecri.org/INsight.