A Resident-Driven Quality Initiative for Reducing Opioid Prescribing in Patients Undergoing Elective General Surgery Procedures, With Long-Term Follow-Up

Over the study period, 6,831 of the 12,061 opioid tablets prescribed were unused.

Patients who took 7 or more doses of oral opioids in the last 24 hours before discharge had significantly fewer (30%) pills remaining compared to patients who took 0–6 doses (68% remaining).

Patients who left with an opioid prescription despite taking 0 tablets 24 hours prior to discharge

This created a diversion pool of 2,419 pills remaining out of 3,353 prescribed (72%).

Using data like these, surgical departments can develop opioid reduction toolkits aimed at reducing the potential diversion pool of opioids in our communities.

One such was implemented at TJUH Inc. and has had a sustained positive impact.