Title: Implementation of an Acute Pain Service at the Alaska Native Medical Center

Author(s):
CDR Aimee Young, PharmD
LCDR Ashley Schaber, PharmD

Institution: Alaska Native Tribal Health Consortium Anchorage, Alaska

Abstract Text:

Purpose: Implement a multidisciplinary Inpatient Pain Service (IPS) team consisting of a midlevel provider, pharmacist, and a registered nurse with the goals of reducing the use of opioids, improving post-operative pain control, increasing patient safety, and improving patient satisfaction scores regarding inpatient pain relief.

Methods:

Timeline:
- **July 2014:** A Gap Analysis was performed on opioid adverse drug event prevention prior to proposing project to hospital administration and it was used to identify areas for improvement on inpatient pain management.
- **August 2014:** Developed a plan to include funding and justification needed to implement an inpatient pain service. Proposal submitted to hospital administration to request “Strategic Initiative” funds for implementation of a multidisciplinary acute pain management team. Hospital administration approved request.
- **September 2014:** Pharmacist selected for Inpatient Pain Pharmacist position. Pharmacist obtained additional training through American Society of Health System Pharmacists Pain & Palliative Care Traineeship Levels 1&2.
- **October 2014:** Midlevel provider hired. Inpatient Pain Service formed.
- **November 2014:** Inpatient Pain Service began advertising service and consulting on inpatients. Pharmacist became available on the surgery floor for nursing and provider staff to answer questions or discuss pain management for specific patients.
- **December 2014:** Began updating hospital policies and procedures to standardize pain management. Provided education to hospital staff regarding acute pain control as well as the inpatient pain service.
- **January 2015:** Consult function made available to providers to request the pain service for their patients. Ongoing staff education provided regularly.

Results:
- From November 2014 until July 2015, the Inpatient Pain Service received 99 consults totaling 213 provider/patient encounters. There were 668 pharmacist interventions and 129 pharmacist encounters.
- Over 120 nursing, pharmacy, and provider staff were educated regarding clinical pearls of pain management, as well as the function and goals of the inpatient pain service.
- The Inpatient Pain Pharmacist prevented an average of 5 drug related events daily.
- Educational interventions created included an opioid conversion chart, and three presentations on epidurals, low dose ketamine infusions, and opioid withdrawal.
- Established a Pain Resource Nurse training packet which includes 12 hours of nursing education on pain.
- Established a consult function for the service in the electronic health record.
- Updated electronic order sets related to pain, including the creation of a ketamine order set, and a complete overhaul of the non-L&D epidural order set.
- Received approval and funding for an automatic consult function for patients with high pain scores over a period of time.

Conclusions:
The Inpatient Pain Service was well received by patients and providers. To maintain long term positive results, additional staff will need to be hired, and ongoing provider/nurse training should take place.

Disclosures:
Authors of this presentation have the following to disclose concerning possible financial or personal relationships with commercial entities that may have a direct or indirect interest in the subject matter of this presentation.

Aimee Young: Nothing to disclose
Ashley Schaber: Nothing to disclose