

PROVIDER TIPS

Best Practices for Safe Opioid Prescription

Recommendations to primary care providers regarding the appropriate use of opioid pain medications in order to improve pain management and patient safety.

Understanding Prescription Opioids

Opioids are natural or synthetic chemicals that relieve pain by binding to receptors in the brain and body. Opioids can have serious risks including addiction and death from overdose, according to the U.S. National Institute for Occupational and Rehabilitation Health (NIH).

Goals

- To improve the way opioids are prescribed through clinical practice guidelines.
- To provide patients with safer, more effective chronic pain treatment while also lowering the number of people who misuse or overdose on these drugs.

When to Prescribe

- Do not prescribe opioids as first-line treatment for pain. Exception: patients who are in active cancer treatment, palliative care, or end-of-life care.
- Use evidence-based pain management and opioid prescribing.

Before Prescribing

- Discuss a treatment plan with patients. Discuss realistic pain and function goals with them and help them understand that pain is a normal part of life and healing. Ascertain that they are aware of the serious risks associated with opioid use.
- Unless contraindicated, ensure that non-opioid alternatives, such as non-steroidal anti-inflammatory drugs (NSAIDs) and acetaminophen, tricyclic antidepressants (TCAs), serotonin-norepinephrine reuptake inhibitors (SNRIs), anti-convulsant, heat/cold, exercise, massage therapy, and cognitive behavioral therapy are considered before using opioid medications.

When Considering Prescribing

- Only consider prescribing opioid therapy if the benefits outweigh the risks.
- Consider nonpharmacologic therapy and nonopioid pharmacologic therapy as the first line of therapy.
- If opioids are considered, they should be used in conjunction with nonpharmacologic and nonopioid pharmacologic therapy, as needed.
- Discuss the risks and benefits of opioids, including patient and provider responsibilities for managing therapy before and during therapy.

If You Prescribe

Start low and go slow. Prescribe the lowest effective dosage for the shortest duration.

- Acute pain: prescribe the lowest effective dosage for acute pain. Therapy longer than seven days will rarely be required.
- No more than a 7-day supply of opioid medication for adults or a 3-day supply (or 10 pills maximum) for youth 20 years and younger.
- Chronic pain: If prescribing opioids for chronic pain, monitor patients within 1 to 4 weeks of starting opioid therapy and every three months, or as needed.
- Use a lower maximum dose threshold of 90 Morphine Milligram Equivalent (MME) MED/day for chronic conditions.
- Use short-acting opioids for acute pain or immediate-release for both acute and chronic pain, depending on the type of pain.
- Avoid co-prescribing opioids, benzodiazepines (such as Xanax or Valium), and muscle relaxants (such as Soma or Flexeril) concurrently whenever possible.
- Avoid > 90 mg MME Morphine Equivalent Dose (MED) /day. Refer to a pain specialist if more is being considered.

Use an Interdisciplinary Team-Based Approach

- Monitor the patient's-controlled substance prescription usage through the state's Prescription Drug Monitoring Program (PDMP) data to avoid risks (e.g., over prescribing, dangerous combinations) for overdose.
- Perform urine drug testing at least annually to assess the usage of prescribed medications and other controlled prescription drugs and illicit drugs.
- Conduct a risk assessment, establish a baseline pain, and function assessment (e.g., PEG), develop a care plan that includes functional goals, and obtain signed informed consent.
- Monitoring approaches should be applied transparently and consistently in a manner that emphasizes safety so that miscommunication and accidental stigmatization are minimized.
- Provide a holistic care approach by determining and coordinating with internal and external specialists (e.g., psychologists, psychiatrists, clinical pharmacists, addiction specialists, social workers, rehabilitation medicine, physical therapists, chiropractors, anesthesiologists, occupational therapists, and acupuncturists or other providers of complementary and alternative medicine).
- Providers should offer or arrange evidence-based treatment (usually medication-assisted with buprenorphine or methadone in combination with behavioral therapies) for patients with opioid use disorder.

Resources

Providers can download free CDC Opioid Guideline App for MME calculator, key recommendations, and the full Prescribing Guidelines at: https://www.cdc.gov/drugoverdose/pdf/App_Opioid_Prescribing_Guideline-a.pdf

CDC OPIOID PRESCRIBING GUIDELINE MOBILE APP

Safer Opioid Prescribing at Your Fingertips

THE OPIOID GUIDE APP

Opioids can have serious risks and side effects, and CDC developed the CDC Guideline for Prescribing Opioids for Chronic Pain to encourage safer, more effective chronic pain management. CDC's new Opioid Guide App makes it easier to apply the recommendations into clinical practice by putting the entire guideline, tools, and resources in the palm of your hand.



Since 1999, the amount of prescription opioids sold in the U.S. has nearly quadrupled.

FEATURES INCLUDE:



MME Calculator

Patients prescribed higher opioid dosages are at higher risk of overdose death. Use the app to quickly calculate the total daily opioid dose (MME) to identify patients who may need closer monitoring, tapering, or other measures to reduce risk.



Prescribing Guidance

Access summaries of key recommendations or link to the full Guideline to make informed clinical decisions and protect your patients.



Motivational Interviewing (MI)

To provide safer, more effective pain management, talk to your patients about the risks and benefits of opioids and work together towards treatment goals. Use the interactive MI feature to practice effective communication skills and prescribe with confidence.

MANAGING CHRONIC PAIN IS COMPLEX, BUT ACCESSING PRESCRIBING GUIDANCE HAS NEVER BEEN EASIER.

Download the free Opioid Guide App today!

www.cdc.gov/drugoverdose/prescribing/app.html



This App, including the calculator, is not intended to replace clinical judgment. Always consider the individual clinical circumstances of each patient.



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

LEARN MORE | www.cdc.gov/drugoverdose/prescribing/guideline.html