



Governor's Cabinet Opiate Action Team

Opioids and Other Controlled Substances

Emergency Department and Acute Care Facility Guidelines

Professional Education Workgroup

The Governor's Cabinet Opiate Action Team (GCOAT) was established in the fall of 2011 to address the continuing epidemic of misuse and abuse and overdose from prescription opioids. The GCOAT consists of five working groups: (1) Treatment--includes Medication Assisted Treatment; (2) Professional Education; (3) Public Education; (4) Enforcement; and (5) Recovery Supports.

Under the leadership of Dept. of Health Director Dr. Ted Wymyslo and Department of Aging Director Bonnie Kantor-Burman, the Opioids and other Controlled Substances guidelines were developed so that drug-seekers would not be able to shop from one location to another until finding a physician willing to prescribe opiate painkillers. This was done through a multidisciplinary effort involving many state medical and health care associations, emergency departments and acute care facilities, state agencies and boards, as well as individual physicians, nurses and other clinicians.

Why Emergency Departments/Acute Care Facilities?

- The Emergency Department (ED) is a major source for opioid prescriptions with 39 percent of all opioids prescribed, administered, or continued in U.S. coming from EDs. This may be an even higher percentage in Ohio. (Source: 2006, NCHS)
- Nationally, opioid prescribing for pain-related ED visits increased from 23 percent in 1993 to 37 percent in 2005. (Source: JAMA, Trends in Opioid Prescribing by Race/Ethnicity for Patients Seeking Care in US EDs)
- Emergency Department/Acute Care Facilities treatment of pain is frequently indicated without the benefit of an established doctor-patient relationship and often is conducted in an environment of limited resources.
- In Ohio, **16 percent** of fatal overdose victims in 2008 had a history of *doctor shopping* (filled prescriptions from at least five different prescribers per year). (Source: OAARS & ODH Vital Statistics)
- Closure of "pill mills" may result in increased drug seeking behavior (e.g. doctor shopping) at EDs.

Ohio Process

- A subgroup of the Professional Education Workgroup was formed to develop the guidelines.
- Washington State prescription guidelines were used as a starting point in addition to feedback from Ohio emergency departments.
- The guidelines are endorsed by Ohio American College of Emergency Physicians, Ohio Association of Health Plans, Ohio Association of Physician Assistants, Ohio Bureau of Workers' Compensation, Ohio Hospital Association, Ohio Osteopathic Association, Ohio Pharmacists Association, Ohio State Medical Association, Ohio Bureau of Workers' Compensation and facilitated by the Ohio Departments of Health and Aging.
- Intended as guidelines not Standards of Care. Clinical judgment is still the determining factor in prescribing practices.