

Improving Pediatric Opioid Safety Through Enhanced Patient Education Primary

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Introduction: Postoperative pediatric patients are often discharged with oral liquid opioids. Caregivers must administer precise doses using syringes, but without proper education, dosing errors can lead to serious adverse events, including overdose.

Identification of the Problem: Prior to this initiative, there was no standardized process for caregiver education, pharmacy counseling, or EHR documentation related to opioid discharge, increasing the risk of harm.

QI Question/Purpose of the Study: To develop and implement standardized best practices for prescribing, dispensing, educating, and documenting opioid discharge instructions to improve safety and prevent overdose.

Methods: From July 2022 to December 2023, a multidisciplinary team created a comprehensive discharge protocol. Nurses were trained to educate caregivers on safe administration, storage, overdose recognition, and disposal. Caregivers were asked to verbalize and demonstrate understanding, which was documented in the EHR. Outpatient pharmacy staff provided additional counseling. Retrospective chart audits assessed compliance with education, counseling, and documentation.

Outcomes/Results: Initial compliance rates were 10% for education and pharmacy counseling, and 0% for documentation. By December 2022, education and counseling reached 100% compliance. Documentation improved to 90% by December 2023. No opioid overdose events were reported post-implementation, indicating improved caregiver comprehension and adherence.

Discussion: Standardizing discharge practices and incorporating return demonstration significantly enhanced caregiver understanding and safety. Collaboration among nursing, pharmacy, and clinical leadership was essential.

Conclusion: This initiative improved discharge safety, documentation, and caregiver education. Sustained training and standardized protocols are critical for pediatric opioid stewardship.

Implications for perianesthesia nurses and future research: Perianesthesia nurses are key educators in discharge planning. This model can be replicated in other institutions to reduce opioid-related risks. Future research should explore long-term outcomes and broader implementation strategies.