

Developed in cooperation with these important associations:

American College of Surgeons Advisory Councils

Cardiothoracic Surgery
Colon and Rectal Surgery
General Surgery
Gynecology and Obstetrics
Neurological Surgery
Ophthalmic Surgery
Oral and Maxillofacial Surgery
Orthopaedic Surgery
Pediatric Surgery
Plastic and Maxillofacial Surgery
Rural Surgery
Urology

American Pediatric Surgical Association

American Society of Hospital Pharmacists

Association of periOperative Registered Nurses

Centers for Disease Control and Prevention

Society of Gynecologic Surgeons Trinity Health System

SURGICAL PATIENT EDUCATION PROGRAM Prepare for the Best Recovery

Safe and Effective Pain Control After Surgery Program

facs.org/safepaincontrol

Give your patients and caregivers the tools to safely manage pain after surgery

The only collaborative multiassociation surgical patient education program to guide informed choice on postoperative pain control

The opioid epidemic—and the knowledge that surgical patients were misusing, diverting, or becoming dependent on opioids beyond the surgical recovery period—initiated the American College of Surgeons to lead and collaborate with a team of surgical professionals to develop patient, caregiver, and professional resources to implement an opioid-sparing pain control program.

Quality reviewed and evaluated patient programs that decrease opioid use and safely manage pain using:

- A simple question-and-answer format at a 7th grade reading level
- Images to guide patient expectations on postoperative pain control
- A functional pain scale to guide pain control options
- A medication guide with purposes and side effects of the most common pain control options (Joint Commission and FDA requirements)
- Safety guidelines on opioid screening, storage, and disposal
- **Emergency alerts** on opioid overdose and addiction, as well as a substance abuse counseling hotline (*Joint Commission requirement*)
- Evaluation to support quality initiatives and collaborative research

Three programs available for these important audiences:

Adult
 Pediatrics
 Women (surgical gynecology)

Each program includes:

- Brochure
 Patient evaluation
 Tabletop sign for patient display
- Medication guide
 Online pain plan and access to materials

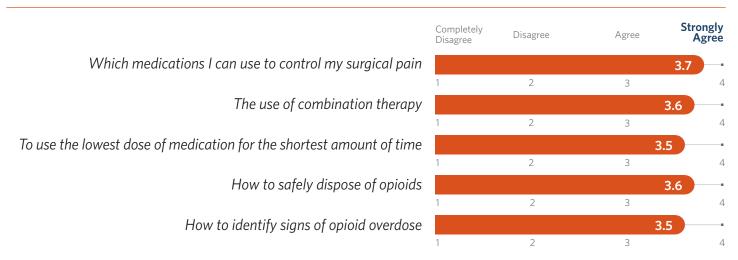


Patient Evaluations

Patients rated the content as effective to very effective in helping them understand how to control their pain, once at home. When patients received the brochure prior to their operation, they felt more confident in controlling their postoperative pain.

Healthy adults **strongly agreed** that the *Safe and Effective Pain Control Brochure* helped them understand how to implement opioid sparing pain control once they were at home. (Heneghan K, et al.)*

STATEMENT: I understand...

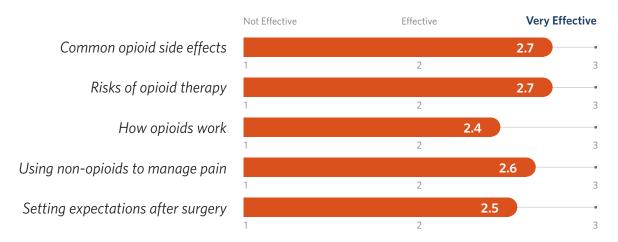


Professional Evaluations

Only 20% of surgeons surveyed (2017–2018, n=87) had access to patient print materials on pain control.

Surgeons rated the Safe and Effective Pain Control Brochure as very effective in teaching patients about opioid-sparing pain control and safe opioid use. They strongly agreed that an office sign together with the brochure would increase patient confidence that their surgeons were implementing a safe pain control plan.

STATEMENT: Effectiveness of brochure to increase patient knowledge regarding...



^{*} Heneghan K, et al. Improving Outcomes for Surgical Cancer Patients through Education on Safe and Effective Opioid Sparing Pain Control. Published in 2019 International Cancer Education Conference Program and Abstracts with EACE 2019 Annual Meeting Abstracts Appended. *J Cancer Educ.* Sept. 2019;34(S1):13-14.

Best Practices and Better Outcomes

Can Be Achieved When:

- **Expectations are set** at the pre-op visit regarding the opioid-sparing pain control plan and the plan is discussed
- Patients are guided through the functional scale as well as the use of both medication and nonmedication therapies
- Patients read and ask questions about their pain management plan
- Evaluation data is returned

Setting expectations with patients around pain control and opioid alternatives has been shown to **decrease opioid use by 50%**. (Hasak JM, et al. *JACS*. 2018;226(3):235-240.)

Quality Improvement Initiatives

Professional and Patient Evaluation Data Is Collected in a Secured (REDCap) System:

- **Demographics:** Age, gender, ethnicity, level of education, English as a first language, health literacy level, and time in hospital
- **Evaluation:** Home management plan, ability to function, the need for additional medication, and therapies and services used (readmission, calls to health care providers, unscheduled visits)
- **Skill performance:** Choosing the right medications for patients' level of pain and function, as well as safe use, storage, and disposal of opioids
- Professional evaluations: Measure current surgical pain control practices

ACCESS PATIENT AND PROFESSIONAL RESOURCES ONLINE

Professional training, current information about postoperative pain, and additional patient materials are available online

FACS MEMBER—FRFF

Just pay shipping—\$10 Packs of 25 (each pack includes office sign)

NON-MEMBERS—\$30

Includes shipping
Packs of 25
(each pack includes office sign)

VIA INDUSTRY PARTNERS—FREE

25 per pack Brochure packs can also be delivered to your office by a Pacira representative

All content for patients is accessible online on the ACS website at no charge

Professional Resources

CME E-learning Courses:

- ERAS Protocols Improve Patient Outcomes and Reduce Opioid Use Course (0.5 CME credits)
- Perioperative Pain Management in Opioid-Tolerant Patients (0.75 CME credits)
- Improving Surgical Patient Outcomes and Minimizing Risks with Opioid-Sparing Pain Control (2.75 CME credits)

Focus Is on the Delivery of Peripheral Nerve Blocks and Patient Safety in 7 Modules:

- Module 1: Introduction to the Opioid Crisis and the Surgical Team's Role
- Module 2: An Overview of General and Local Anesthetics
- Module 3: Best Practices for Regional Anesthesia
- Module 4: Case Study—Trauma Protocols and Patient Transitions
- Module 5: Case Study—The Hernia Patient: Pre-, Intra-, and Postoperative Medications and Techniques to Minimize Opioid Use
- **Module 6:** Case Study—The Breast Cancer Patient: Pre-, Intra-, and Postoperative Medications and Techniques to Minimize Opioid Use
- Module 7: Transversus Abdominis Plane (TAP) Block

Professional Skills Course

Safe Pain Control and Regional Anesthesia for the Practicing General Surgeon

This Credentialed Course Includes:

- Pre-workshop opioid sparing content (i.e., a free, prerequisite, online CME course for 2.75 CME credits)
- Skills training and local anesthetic use (abdominal wall and pectoral blocks)
- Patient communication and discharge guides and safe naloxone administration
- Post-course testing (skills and written)
- Post-workshop materials and online networking to support implementation and quality improvement initiatives

FOR MORE INFORMATION, GO TO:

facs.org/safepaincontrol

A limited number of educational grants are available for quality improvement programs if professionals are interested in bringing the credentialed course to their institution.

Please contact tbarot@facs.org for an application or questions.