

Responsible Opioid De-Prescribing: Planning for an Opioid Taper

A continuation, modification, or discontinuation of chronic opioid therapy should be contingent on the evaluation of the patient's progress toward treatment goals, risk of adverse events (including overdose or diversion), response to treatment, and quality of life. Whether or not opioids are continued, safe and effective non-opioid or non-pharmacologic treatments should be used in a patient's pain management plan based on an [individualized assessment](#) considering the diagnosis, access to treatments, and unique needs of the patient.

According to recent HHS recommendations, patients should be involved in the decision making and treatment planning process and opioids should not be tapered rapidly or discontinued suddenly due to risk of significant opioid withdrawal. An individual care plan can be created with the patient to reduce risk related to acute withdrawal, worsening of the pain syndrome, anxiety, depression, suicidal ideation, self-harm, weakened trust with the health system, and patients seeking opioids from illicit sources.

Visit the IHS [opioids](#) and [pain management](#) websites for information.

Interdisciplinary Pain Committees & Resources:

The IHS supports using interdisciplinary processes and team-based approaches to care to enhance patient relationships and improve chronic pain management outcomes. Chronic Pain Teams can assist the health system in creating and implementing facility-wide opioid stewardship plans, incorporating evidence-based strategies into practice, augmenting professional practice development plans, and improving the overall patient care experience. Interdisciplinary Chronic Pain Teams can also assist with providing recommendations surrounding patient transitions of care and chronic pain treatment plans when team meetings are structured as case-based reviews. Chronic Pain Teams are useful to monitor opioid prescribing trends, naloxone co-prescribing initiatives, and inform practice-based interventions.

Documenting a Pain Encounter:

The IHS [Chronic Non-Cancer Pain Management Policy](#) requires prescribers to document patient pain assessments prior to initiating chronic opioid therapy and to review patient treatment plans at reasonable intervals. Recent audit findings have indicated that there are opportunities for the IHS to improve the integrity of the patient health-record through the use of promising practices related to clinical documentation. Several promising practices include:

- Document PDMP findings **or** UDT results using a discreet data element: allows you to create a local reminder to trigger a reminder when the PDMP query is due again
- Documenting functional status assessment using a CPT II Code: allows you to create a reminder when the functional status assessment may be due
- Use Treatment Regimen Planning in EHR to document progress toward chronic pain treatment goals
- Using patient registries such as iCare: use of discreet data elements when documenting pain encounters creates an opportunity for population health practices
- For [technical assistance resources](#) and more information on promising practices, please visit HOPE Committee's [Technical Assistance webpage](#)

Integrative Pain Management:

Non-pharmacologic treatment approaches to both acute and chronic pain management have been shown to be effective. Sites can be working locally to expand access to various treatment options.

Read more about [best & promising practices!](#)

Patient Assessment & Urine Drug Testing:

[Urine Drug Testing](#) (UDT) should be used as a therapeutic tool and screens can be useful for monitoring the progress towards a patient's treatment goals. A review of the test results and a prompt, meaningful response to findings are necessary to fully integrate UDT into managing chronic pain. More information regarding [UDT](#) is available on the IHS HOPE Committee's newly updated [pain management](#) website.

For additional resources regarding opioid use disorder, visit the IHS HOPE Committee's [opioids](#) website.