

Abstract:**Background:**

Prescription opioid medications account for a large number of fatal and non-fatal overdoses. Many opioid prescription medications after surgery go unused, with the potential for diversion and misuse. As surgeons become increasingly aware of their role in opioid misuse, better tools are needed to guide behavior.

Data Sources:

There has recently been a plethora of research into opioid prescribing after surgery. A review of this literature was performed using a search for manuscripts written in the English language. Our goal was to develop an easily recalled approach to postoperative opioid prescribing.

Results:

Based on an extensive review of recent literature, we developed the acronym RIGHTT: **R**isk for adverse event, **I**nsight into pain, **G**oing over pain plan, **H**alting opioids, **T**ossing unused opioids and **T**rouble identification

It is important that surgeons recognize the potential for opioid misuse in their patients. Strategies have been developed to decrease the risk of prescribing opioids. RIGHTT provides a simple acronym for surgeons to integrate best-practice strategies into their management of post-surgical opioids.

Key Words: opioid education; opioid prescribing; postoperative pain; opioid misuse; non-opioid pain adjuncts

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