



Use Case: Opioid-Related Event Alerts

Overview

Clinicians, including prescribers of opioids, are often unaware when their patients experience an opioid-related event. The lack of a feedback loop inhibits a clinician's ability to adapt his or her practice patterns and it limits a clinician's ability to intervene in his or her patient's situation, whether that be near the time of the event or during the patient's next visit to the practice.

CRISP has the ability to leverage the clinical information received by hospital participants and potentially other participant data sources to deliver this information to the clinician according to the clinician's preferred method of delivery. Displaying non-fatal opioid-related event information in a clear manner will provide the clinician with an opportunity to integrate the information into his or her clinical decision making. Delivering fatal opioid-related event information to clinicians who opt to receive it can also be very helpful to programs following the patient, especially for purposes that may have contributed to the fatal opioid event.

Permitted Purpose Category

For Treatment Purpose (Permitted Purpose #1) and Care Coordination Purpose (Permitted Purpose #3).

Technical Design

CRISP is receiving data from several participant sources, including, but not limited to, Syndromic Surveillance feeds and Admission, Discharge, Transfer (ADT) feeds. These feeds can be carrying Chief Complaints, Admit Reasons, Clinical Impressions, Admitting Diagnoses, and Discharge Diagnoses. For non-fatal opioid-related events, each of these fields will be analyzed for text-based and diagnosis-based indicators of opioid-related events. Any events that match the criteria will be flagged and made available through the Encounter Notification Service (ENS) as an event type that can be opted into by ENS subscribers, in-context alerting for integration into EMRs, and displayed within the CRISP portals.

For fatal opioid-related events, the Office of the Chief Medical Examiner will provide the list of patients on a regular basis. Upon receipt, CRISP can use that to trigger an ENS alert as an event type that can be opted into by ENS subscribers.

Use Case Description

As the source information is received (i.e. Syndromic Surveillance, ADT feeds, etc.), each of the free-text and diagnosis carrying fields will be analyzed for opioid-related event information. When identified, the feed will be flagged and routed to the appropriate CRISP services for display (ENS alerts, in-context alerting, CRISP portals). This information will be disseminated in several ways:

- A clinical user or care coordination program that are registered with CRISP as an ENS subscriber can opt to receive ENS alerts on their patient panel for fatal and non-fatal opioid-related events. As ENS subscribers, notifications will be sent for any patient on their list that meets the criteria for an opioid-related event based on their ENS preferences to receive this alert type. Note:



- Non-fatal opioid-related events via ENS: subscribing to the non-fatal opioid-related event alert type will only change the display of the notifications. ENS delivers the admit reason for hospital encounters today (where available), so the subscriber may receive the same information, however, it will only be seen as standard alert design based on type of visit (i.e. Emergency Department visit) with the admission reason embedded within the notification.
- Fatal opioid-related events via ENS: these alerts originate from a new data source and will only be seen if the ENS subscriber opts to receive these alerts.
- A clinical user registered to view clinical information with the CRISP portals will see the information displayed at the time of looking up their patient with whom they have a treatment relationship.
- Organizations that are designed to receive in-context alerts will see the opioid-related event flag and related information at the time of accessing the CRISP in-context data.

Information to be displayed in the alert may include, but is not limited to: 1) source of alert (i.e. hospital name), 2) date of encounter, 3) the language of what triggered the alert (i.e. chief complaint, admit reason, discharge diagnosis, etc.).

Opt Out Applicability

Opt out will apply to all opioid-related events.

Eligible Participants

Any CRISP user with access to CRISP participant data will have access to this information.

Approval:

This Use Case Policy has been approved by the Clinical Advisory Board.

Chairperson

10/12/17

Dated