Designing User-Centered Decision Support for Chronic Pain and Opioid Prescribing

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Funding: AHRQ R01HS23306, NIDA 1R21DA046085-01
Goals

Overcome the enormous primary care challenge of relieving chronic pain while keeping patients and the public safe from opioid-related risks.
Our design process

Observation, interviews, analysis, translation

19 clinicians 70+ visit interviews

(key decision requirements)

Decision support designs

How do patients and clinicians interact during visits? Where do clinicians struggle when making decisions? What information is missing and needed? When do EHRs help? When do they hurt?
**Goals & Outcomes**

- **Patient Goals:** Patient goals text
  - # Function
  - # Pain
  - # Enjoyment

**Factors to Consider**

- Opioid Aberrancy
- Medication Interaction
- Psychiatric Risks
- Side Effects
- Urine Drug Screen
- Opioid Dosing

**To Do**

- PDMP Report Due Date
- Medication Interaction Action Step
- Urine Drug Screen Order Option
- Medication & Pain Trends
SMART Chronic Pain OneSheet

PEG Score:
- 8 on 12-9-16
- 5 on 3-30-17
- 4 on 6-14-17
- 7 on 8-10-17

Medications:
- OxyContin 20mg, q24h
- OxyContin 10mg, q24h
- Diazepam, 5mg q24h
- Celecoxib, 250mg q24h

Events:
- ED Visit 1-11-17
- Abn UDS

Allergies: Penicillins

DOB: 12/21/1972
Age: 40 years
Sex: Male
MRN: 200365448
FIN: 1005-63251
###SMART Chronic Pain OneSheet

####Demographics
- **Name:** Adams, Charles
- **DOB:** 12/31/1972
- **Weight:** 187 lbs.
- **MRN:** 200365448
- **FIN:** 1005-63251
- **Sex:** Male
- **Allergies:** Penicillin

####Patient Data

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####Recurrent

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####Summary

- **Medications:** 10
- **Orders:** 5
- **Events:** 2
- **Daily MME:** 30.0

####Prescriptions

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