

# MINIMIZE DIVERSION RISK IN ANESTHESIA SETTINGS

**ANESTHESIOLOGISTS HAVE AN ABOVE AVERAGE RATE OF ADDICTION TO OPIOID DRUGS THAN PHYSICIANS IN OTHER SPECIALTIES AND PRIMARILY OBTAIN THESE DRUGS THROUGH DIVERSION<sup>1</sup>**

**5x** more likely to abuse opioids than the general public<sup>2</sup>

**3x** more represented in addiction treatment programs than any other type of physician in the US<sup>3</sup>

## HOW?

PROXIMITY to large quantities of highly addictive drugs

RELATIVE EASE of diverting particularly small quantities of these controlled substances for personal use

HIGH STRESS ENVIRONMENT in which anesthesiologists work

EXPOSURE in the workplace that sensitizes the reward pathways in the brain and thus promotes substance abuse<sup>4</sup>

## TOP DRUGS OF CHOICE FOR ANESTHESIOLOGISTS<sup>4</sup>



### OPIOIDS

### KETAMINE

FENTANYL

SODIUM THIOPENTAL

SUFENTANIL

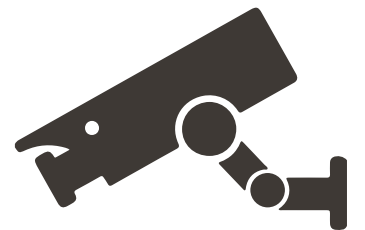
LIDOCAINE

PROPOFOL

NITROUS OXIDE

## RECOMMENDED PRACTICES FOR SURVEILLANCE AND PREVENTION<sup>5,6</sup>

- Provide controlled substances in ready-to-use concentrations
- Have pharmacy reconcile for all anesthesia controlled substances
- Regularly review atypical data like escalating activity and excessive waste
- Conduct monthly counts of automated dispensing cabinets to verify perpetual inventory
- Conduct inventory checks at each shift change when outside of the cabinet
- Have nursing management conduct random patient interviews
- Routinely reconcile health record dose administration with prescribed, dispensed, and returned quantities
- Hold pharmacist responsible for all controlled substances dispensed and distributed in high-risk anesthesia and operating room areas



## PROFESSIONAL RISKS<sup>1</sup>



Felony conviction and civil malpractice suit



Loss of professional licenses



Prosecution for fraudulent charting and billing fraud

<sup>1</sup>Berge, Keith H., et al. "Diversion of Drugs Within Health Care Facilities, a Multiple-Victim Crime." Mayo Clinic Proceedings, Mayo Foundation, July 2012, www.ncbi.nlm.nih.gov/pmc/articles/PMC3538481/.

<sup>2</sup> "Substance Use Disorder (SUD)." AANA - American Association of Nurse Anesthetists, www.aana.com/practice/clinical-practice-resources/opioid-crisis-resources/substance-use-disorder.

<sup>3</sup>Perlin, Daniel I. "Addiction in the Anesthesia Provider." American Academy of Anesthesiologist Assistants, aaaa.memberclicks.net/assets/rotated%20addiction%20perlin.pdf.

<sup>4</sup>"Home - PMC - NCBI." National Center for Biotechnology Information, U.S. National Library of Medicine, www.ncbi.nlm.nih.gov/pmc/.

<sup>5</sup>Golembiewski, Julie. "What's Going on in Anesthesia: Practice Updates." Illinois Council of Health-System Pharmacists, www.ichpnet.org/events/annual\_meeting/2017/Handouts/075\_-\_Golembiewski\_-\_Anesthesia\_Update.pdf.

<sup>6</sup>Norman, Christy. "Best Practices in Controlled Substance Management." Georgia Society of Health-System Pharmacists, www.gshp.org/myJSSImages/file/2016%20fall%20meeting/norman%20handout.pdf.