Opioid analgesics are the cornerstone of treatment for moderate to severe pain in children as hospital inpatients. At the time of discharge, physicians frequently continue to prescribe opioids for pain management in the outpatient setting. However, the use of opioids at high doses can be associated with potential harm (1). The use of a transitional pain service has been described for discharge management of adult patients on opioids(2). The discharge opioid prescribing practices in the pediatric population have not been well-studied.

**Background**

**Methods**

1) To characterize the dosing and formulation of opioids prescribed at time of discharge across all the services from a single academic pediatric hospital.

2) To compare the characteristics between patients who received high and lower doses of opioid prescriptions.

**Type of Opioid**

<table>
<thead>
<tr>
<th>Type of Opioid</th>
<th>Prescribing Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>86.23% Morphine</td>
<td>Orthopedics (42.9%)</td>
</tr>
<tr>
<td>10.20% Hydromorphone</td>
<td>Plastic Surgery (20.4%)</td>
</tr>
<tr>
<td>3.27% Oxycodeine</td>
<td>Otolaryngology (20.1%)</td>
</tr>
<tr>
<td>0.23% Fentanyl</td>
<td>Other surgical services</td>
</tr>
<tr>
<td>0.08% Tramadol</td>
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</tr>
</tbody>
</table>

**Fraction of Orthopedic Diagnosis**

- In this cross-sectional study, we identified 2,538 patients who received 2,658 discharge opioid prescriptions.
- The average age of this population was 8.6 years (range: 0-24 years) and the percentage of males was 54.9%.
- The most common prescribing services were Orthopedics (42.9%), followed by Plastic Surgery (20.4%) and Otolaryngology (20.1%).
- Within the subgroup of patients given a high dose opioid (> 2 mg/kg/24h PO morphine equivalent) prescription, the top 2 prescribing service were Orthopedics (44.9%) and Plastic Surgery (29.3%) with spinal surgeries and burns as the most common reasons for admission, respectively.

**Objective**

1. To characterize the dosing and formulation of opioids prescribed at time of discharge across all the services from a single academic pediatric hospital.

2. To compare the characteristics between patients who received high and lower doses of opioid prescriptions.

**Results**

**Discussion**

- In this study, we identified specific subgroups including patients undergoing spinal surgery and with burn, who were more likely to be discharged with high dose opioid prescriptions.
- A transitional pain service can be utilized to focus efforts on this high risk group to enable close follow up and effective opioid weaning following inpatient care in the pediatric setting.

**Prescribing Service**


**References**