

The Effect of a Novel Emergency Department-Initiated Buprenorphine Protocol on both ED Length of Stay for Patients with Moderate to Severe Opioid Use Disorder and ED Staff Wellness

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Background: Since 2020, the COVID pandemic produced many healthcare-related disruptions, including 1) a significant exacerbation of the opioid drug crisis in the US and 2) operational challenges that affected Emergency Department (ED) provider wellness. While other studies that evaluated the effect of ED-initiated protocols using Medically Assisted Treatment (MAT) for Opioid Use Disorder (OUD) demonstrated positive benefits for patient participants, they were not dual-site studies with a control group of patients receiving non-MAT management. Even more, no previous literature explored the effect on staff wellness from an ED-initiated MAT protocol's potential to decrease visit length and patient complexity.

Methods: This dual-site, two-arm study explored the impact of an ED-initiated buprenorphine protocol at a suburban, academic-affiliated Level II trauma center relative to a comparable ED that did not have a buprenorphine protocol. One study arm was a retrospective chart analysis that assessed patients who presented to either ED with moderate to severe OUD (n=47) over a 4-month study interval for two primary outcomes: ED length of stay and visit complexity (via medications administered and quantity of security/behavioral documentation). A second study arm was a prospective analysis of the protocol's effect of staff wellness over the same study interval. Eligible ED providers at both sites (n=37) who opted into pre/post-intervention surveys had responses measured in a mixed-assessment approach, using 1) a 3-question assessment of ED staff based on an 10-point Likert scale and 2) a free-form survey response via the protected survey driver REDCap.

Results: Regression analyses of pre-survey responses (n=31) demonstrated no statistically significant difference between Likert responses based on either ED site or license level.

Conclusions: To be determined.