**Current Opioid Prescription Patterns for Patients Undergoing Microdirect Laryngoscopy**

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1) My practice is:

|  |  |  |  |
| --- | --- | --- | --- |
| € Laryngology only | € Mostly laryngology | € General  | € I prefer not to answer |

2) On average, what number of microlaryngoscopies do you perform per month? \_\_\_\_\_\_\_

3) What year did you complete or do you plan to complete residency training? \_\_\_\_\_\_\_\_

4) Did you complete a fellowship? €Yes €No If yes, which one:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5) In what state do you practice? \_\_\_\_\_\_\_

6) On average, what percent of your patients receive opioid-containing pain medication?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| € None | € 1-33% | € 34-66% | € 67-99% | € 100% | € I don’t know |

7) Anecdotally, what percent of your patients end up taking opioid-containing pain medication?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| € None | € 1-33% | € 34-66% | € 67-99% | € 100% | € I don’t know |

8) Which opioid do you most commonly prescribe for post-operative analgesia? (e.g. Percocet, T#3, etc.)

|  |
| --- |
|  |

9) What is the **AVERAGE** number of opioid tablets you prescribe after microdirect laryngoscopy?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| € None | € 1-5 | € 6-10 | € 11-25 | € >26 | € I don’t know |

10) What is the **MAXIMUM** number of opioid tablets you prescribe after microdirect laryngoscopy?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| € None | € 1-5 | € 6-10 | € 11-25 | € >26 | € I don’t know |

11) Which of the following influences your decision? Please mark all that apply:

|  |  |
| --- | --- |
| € Patient preference | € Removal of tissue (e.g. biopsy)  |
| € Age | € Dilation |
| € Gender, if so € male € female | € Use of laser |
| € Length of suspension | € Inpatient stay |
| € Difficulty of exposure | € Anti-tussive Effects |
| € Patient’s diagnosis | € History of chronic opioid use |
| € Known or suspected cancer diagnosis | € Other:  |

12) Have any of your patients had adverse events due to opioid use?

* Yes, severe morbidity or mortality related to post-operative opioid use
* Yes, minor morbidity related to post-operative opioid use
* No

**Please turn over to complete other side**

* I don’t know/prefer not to answer

13) Do you prescribe any of the following non-opioid analgesics regularly after microdirect laryngoscopy? Please mark all that apply.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| € Celebrex | € Gabapentin | € NSAIDs | € Tylenol | € I don’t know/ prefer not to answer |

14) Which of the following reasons have influenced how your prescribe opioids for post-operative analgesia? Please check the column that best fits each statement

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Statement | Strongly Influenced | Partially Influenced | Did not affect | I don’t know |
| I have concerns about misuse or abuse of the opioids I prescribe. |  |  |  |  |
| I want to mitigate the physician role, my role, in the opioid crisis. |  |  |  |  |
| I have witnessed illicit substance abuse in friends, family, or acquaintances.  |  |  |  |  |
| My patients have had complications related to routine opioid use.  |  |  |  |  |
| My patients have had complications related to illicit opioid use. |  |  |  |  |
| State or federal regulations have made it burdensome to provide opioids. |  |  |  |  |
| State or federal regulations have limited the amount of opioids I can prescribe. |  |  |  |  |
| My practice or hospital system has limited the amount of opioids I can prescribe. |  |  |  |  |
| Published literature regarding how much pain with minimally invasive procedures. |  |  |  |  |
| Published literature about the effectiveness of non-opioid analgesia regimens.  |  |  |  |  |
| My residents, trainees or advanced practice providers do most of the post-operative orders and their opinions influence my opioid use. |  |  |  |  |
| My patients’ pain may not be controlled. |  |  |  |  |
| I’m concerned about low patient satisfaction or Press Ganey scores. |  |  |  |  |
| Burden of providing paper opioid prescriptions, if patient is discharge with insufficient analgesia. |  |  |  |  |

Comments:

**Please return to box at registration marked: “Opioid Survey”.**