**Opioid Prescribing Audit**

The aim of this opioid prescribing audit is to review the information included on discharge letters for **newly initiated weak and strong opioids**. This includes codeine, dihydrocodeine, tramadol, co-codamol, co-dydramol, morphine, fentanyl, buprenorphine, oxycodone, pethidine, tapentadol and hydromorphone. Please complete one table for each patient on the ward(s) being audited who were newly started on a weak or strong opioid according to their last discharge letter. This audit should be completed retrospectively over a period of 2-4 weeks. Standard: 100% of discharge letters with newly initiated opioids should include indication and duration of medication or information on when to review/reduce dose.

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| --- | --- |
| **Patients age** |  |
| **Was the patient taking opioid medication prior to this hospital admission (weak or strong)?** | Yes NoIf yes, this person is not eligible for inclusion in this audit. |
| **What is the indication for starting the opioid medication?****i.e. location of pain/type of surgery etc.**  |  |
| **Which opioid medication(s) have been initiated?** |  |
| **Is the opioid PRN, regular or both?** | PRN Regular Both  |
| **Are the opioid(s) included on the discharge letter under medications?** | Yes No |
| **Has the prescriber added a duration for the opioid(s) or when it/they should be reviewed/stopped?** | Yes No |
| **Has the prescriber added any information regarding the future plan for the opioid? i.e. when or how to reduce the dose?** | Yes No |

**Date:**

**Ward:**

**Name of person completing this audit form:**