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Non-pharmacological Options in postoperative Hospital-based And Rehabilitation pain Management (NOHARM) pragmatic clinical trial **Project Number Former Number**

1UG3AT010669-01

Contact PI/Project Leader CHEVILLE, ANDREA LYNNEOther Pls

Awardee Organization MAYO CLINIC ROCHESTER

Description

1UG3AG067593-01

Abstract Text

ABSTRACT Prescriptions for narcotic pain relief after surgery result in unintended prolonged opioid use for hundreds of thousands of Americans. That trend fuels an excess supply of opioids that can lead to dependence, addiction, diversion, and overdoses on a national scale. Non- pharmacological pain care is effective and recommended by guidelines for perioperative pain while offering a more favorable risk benefit ratio. However, nonpharmacological pain care is rarely used as first or second-line therapy after surgery. Patient and clinician decision support interventions are effective in encouraging patient centered and guideline-concordant care, but these strategies have not been tested pragmatically as a bundle in every day postoperative pain care. The NOHARM trial will first confirmed the feasibility of patient-facing as well as clinician- facing decision support components of an EHR-imbedded evidence-based bundle (Aim 1). Then we will test our bundle in a stepwedge, cluster randomized trial at 18 sites in 4 Health Systems (Aim 2) affiliated with one national healthcare organization that uses a common EHR platform. We will test a sustainable system strategy that could change the paradigm of perioperative pain management toward nonpharmacological options in a manner that preserves patient function, honors patient values and maintains availability of opioids as a last resort. This could serve as a model for healthcare organizations nationally and could be disseminated through our institution's ongoing partnership with the largest national EHR vendor. To ensure our approach is sustainable, we will also study what worked and what did not at all study sites (Aim 3), focusing on high-risk patients within a parent organization that has expressed a high-level commitment to addressing the opioid crisis.

Public Health Relevance Statement

PROJECT NARRATIVE The NOHARM trial will test an EHR-imbedded evidence-based bundled intervention at 18 sites in 4 Health Systems affiliated with one national healthcare organization designed to change the paradigm of perioperative pain management in a manner that could help curb the opioid epidemic. That strategy will encourage less harmful nonpharmacological pain care while minimizing symptom burden, preserving patient function, honoring patient values and maintaining availability of opioids as a last resort. This could serve as a model for healthcare organizations nationally and could be disseminated through our institution's ongoing partnership with the largest national EHR vendor.

NIH Spending Category

Clinical Research Chronic Pain Clinical Trials and Supportive Activities Complementary and Integrative Health Opioid Misuse and Addiction Patient Safety Health Services Pain Research Neurosciences **Opioids Substance Abuse** Rehabilitation

Project Terms Bundling Clinical Adoption **Amputation** Caring **Cesarean section** Chronic American Address **Colorectal Surgery Conduction Anesthesia** Consumption **Data Collection Cluster randomized trial** Complex Dependence Discipline **Education Evaluation Data Element** Disease **Ensure Exercise** Goals Guidelines **Gynecologic Surgical Procedures Health system Healthcare Systems** Hospitals Institution **Joints Lower Extremity Modality** Modeling Monitor Intervention Lead Methods **Narcotics Operative Surgical Procedures Opioid user** Overdose **Parents** Opioid Outcome Pain Pain management Perioperative **Perioperative Care Postoperative Pain Patient Preferences Policies Population Patients Pragmatic clinical trial Procedures Public Health Quality of life Postoperative Period Replacement Arthroplasty** Read More

Details

Contact PI/ Project Leader Name CHEVILLE, ANDREA LYNNE

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Program Official Other Pls Name TILBURT, JON C SALIVE, MARCEL Contact View Email

Organization

View Email

Department Type State Code Name **MAYO CLINIC ROCHESTER** Unavailable MN **Organization Type** City **Congressional District Other Domestic Non-Profits ROCHESTER** Country **UNITED STATES (US)**

Other Information

Administering Institutes or Centers FOA **Project Start Date** 30-September-RFA-AT-19-004 NATIONAL INSTITUTE ON AGING 2019 **Study Section** CFDA Code Project End Date 31-August-2020 Special Emphasis Panel[ZAT1 JM (02)] 866 **Budget Start Date** 30-September-Fiscal Year Award Notice Date **DUNS Number** UEI 2019 25-September-2019 2019 006471700 Y2K4F9RPRRG7 31-August-2020 **Budget End Date**

Project Funding Information for 2019

Total Funding Direct Costs Indirect Costs \$458,896 \$270,749 \$729,645

Year	Funding IC	FY Total Cost by IC
2019	NATIONAL INSTITUTE OF NEUROLOGICAL DISORDERS AND STROKE	\$729,645

Click here for more information on NIH Categorical Spending NIH Categorical Spending Funding IC FY Total Cost by IC NIH Spending Category Chronic Pain; Clinical Research; Clinical Trials and NATIONAL INSTITUTE OF NEUROLOGICAL DISORDERS AND STROKE \$729,645 Supportive Activities; Complementary and Integrative Health; Health Services; Neurosciences; Opioid Misuse and Addiction; Opioids; Pain Research; Patient

Safety; Rehabilitation; Substance Abuse;

Sub Projects

No Sub Projects information available for 1UG3AG067593-01

Publications

> Disclaimer

No Publications available for 1UG3AG067593-01

Patents

No Patents information available for 1UG3AG067593-01

Outcomes

The Project Outcomes shown here are displayed verbatim as submitted by the Principal Investigator (PI) for this award. Any opinions, findings, and conclusions or

recommendations expressed are those of the PI and do not necessarily reflect the views of the National Institutes of Health. NIH has not endorsed the content below.

No Outcomes available for 1UG3AG067593-01

Clinical Studies

No Clinical Studies information available for 1UG3AG067593-01

News and More

Related News Releases

No news release information available for 1UG3AG067593-01

History

No Historical information available for 1UG3AG067593-01

Similar Projects

No Similar Projects information available for 1UG3AG067593-01