ENHANCED RECOVERY AFTER SURGERY
How CRNAs are reducing opioid use, improving outcomes, and lowering costs

THE ISSUE
Persistent opioid use after surgery affects millions of Americans.
- More than 2 million people may transition to persistent opioid use following elective, ambulatory surgery each year.¹
- Overprescribing of postsurgical opioids results in billions of unused pills.²
- In 2015, 2.1 million people misused prescription opioids for the first time.³
- Nearly half of all U.S. opioid overdose deaths involve a prescription opioid.⁴

A SOLUTION
Certified Registered Nurse Anesthetists (CRNAs) are pain management experts who are uniquely qualified to help solve this problem. CRNAs offer patients holistic pain management services that reduce or eliminate the need for opioids post-surgery.

ENHANCED RECOVERY AFTER SURGERY
Enhanced Recovery after Surgery (ERAS®) is a patient-centered, evidence-based, pain management strategy employed by CRNAs to reduce the need for opioids, improve patient outcomes and reduce costs.

ERAS uses robust patient communication and opioid-sparing techniques such as regional anesthesia, peripheral nerve blocks, non-pharmacologic approaches and non-opioid medications.

TRADITIONAL PAIN MANAGEMENT PATHWAY
- Patient assessment
- Opioid/non-opioid prescribing and discharge

ERAS PAIN MANAGEMENT PATHWAY
- Preadmission – patient/family education; recovery and pain management planning
- Preoperative – minimize fasting to reduce anxiety and pain perception and improve diet recovery
- Intraoperative – administer analgesics and nerve blocks for pain and nausea/vomiting management
- Postoperative – patient assessment, plan modification, and multimodal medication prescribing
- Post-Discharge – education on anesthesia recovery, surgical procedure and pain management
- Continued Quality Improvement – analysis of compliance and outcomes to improve care
ERAS AND THE OPIOID CRISIS

ERAS supports collaborative pain care between the patient, the CRNA and the entire care team. It also encourages patients to play an active role by expressing their own needs and concerns to help establish realistic goals for improved well-being and quality of life without dependence on opioids.

This thorough assessment and treatment of pain not only reduces the need for opioids during and after surgery, but also decreases the risk of acute pain transitioning to chronic pain and the development of opioid dependency and abuse.

ERAS: IMPROVED OUTCOMES AND REDUCED COSTS

- ERAS provides an average savings of $880 to $5,560 per patient. 5,6
- ERAS reduces patient length of stay by 3-4 days on average. 7-12
- ERAS reduces 30-day patient readmission rates and costs. 13,14
- ERAS helps patients return to normal activities more quickly. 6

REFERENCES

3. 2015 National Survey on Drug Use and Health (SAMHSA)

To learn more about CRNAs and their expertise in providing holistic, patient-centered, cost-effective pain management care, visit www.Future-of-Anesthesia-Care-Today.com.