



Frequency of Urine Drug Screening For Opioid Monitoring



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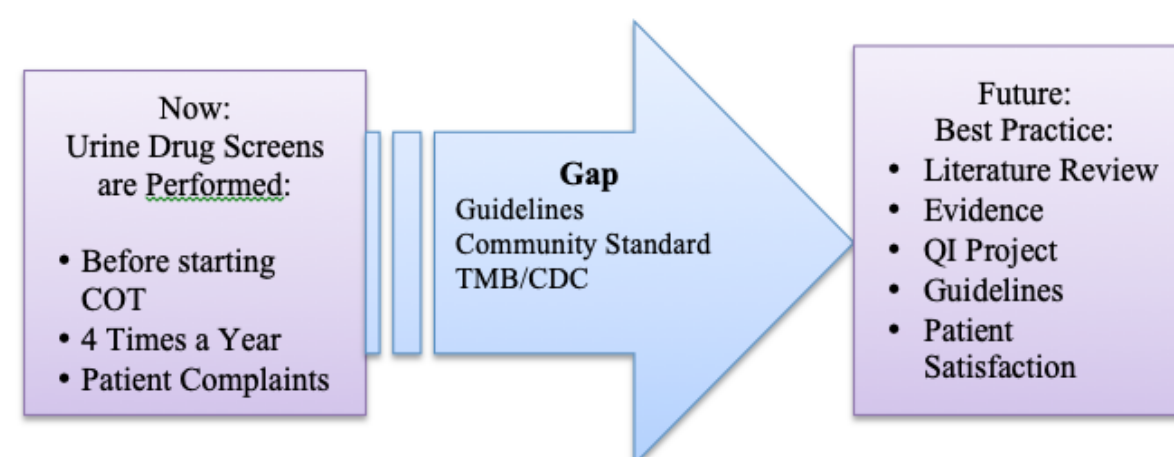
Background

Opioid Medication has the potential to provide relief for patients with chronic pain when all other modalities have failed.

There is significant risk of abuse and misuse of opioid therapy for treatment of chronic pain.

Urine Drug Screening (UDS) is one method used to monitor for misuse or diversion. There is little evidence regarding testing frequency.

Gap Analysis



Literature Review

Evidence support UDS monitoring, however there is a lack of research regarding the frequency of testing (McEachern et al., 2019) resulting in confusion as to the best practice and the standard of care (Owen et al., 2012).

PICO(T) Objectives

In adult patients prescribed a scheduled II opioid medication for chronic pain (P) how does the rate of aberrancy in urine drug screens performed four times a year (I) compare to the rate in patients having less than four urine drugs screens a year (C) affect patient compliance monitoring (O)?

Framework

Johns Hopkins Nursing EBP Model



Methods

- Quality Improvement Method
- Retrospective EHR Chart Review
- 24 month - 311 record review

Results

Chi-Square Analysis

Group	Positive Drug Screen	p-value
1 per year	9 (22.5%)	0.002
2 per year	17 (22.1%)	
3 per year	31 (24.2%)	
4 per year	31 (47.0%)	

There is a statistically significant difference between UDS 4 times a year then 3 or less.

Participants with 4 UDS were 3.05 times more likely (95% CI 1.26-7.40) to have a positive UDS than once a year.

Discussion

- No statistical risk identified by demographic variables
- Cost is a concern as treatment may cause a financial burden
- Healthcare providers need education on reading UDS to avoid misinterpretation
- Adherence to clinic protocols is essential for patient safety

Practice Implications

- Continue with 4 UDS per year to monitor compliance
- Need for modified randomized/testing schedule
- Education for test interpretation

Conclusion

The QI project supports the clinic's policy of testing 4 times a year

Nurses can bridge gap and improve policy compliance by overseeing the monitoring process

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Reference list available upon request