# 2021 GME Stakeholders Congress on Preparing Residents and Fellows to Manage Pain and Substance Use Disorder

The GME Stakeholders Congress on Preparing Residents and Fellows to Manage Pain and Substance Use Disorder, held March 30-31, 2021, convened over 130 physicians representing 10 specialties that play a role in treating SUD and ACGME leadership. The Congress goal was to identify strategies to effectively prepare physicians to confront the challenges of the opioid epidemic and to effectively manage pain and recognize and treat SUD, including OUD. A full summary of the Congress proceedings can be found on the ACGME SUD Resources Page.

# Recommendations for Curriculum and Educational Experiences for All Residents and Fellows in Pain and SUD

#### Pain Management

- •Multi-modal approaches to pain
- •Non-opioid and non-pharmacologic treatment of acute and chronic pain
- •Pharmacology of both opioid and non-opioid pain medications
- •Safe opioid prescribing and management of opioid analgesics, including opioid selection, dosage and duration, and tapering
- Proper assessment of pain

#### Communication

- •Value of interprofessional and interdisciplinary approaches to pain management
- •Communicating effectively with team members and how to manage handoffs
- Communicating with patients about use of opioids, potential risks and realistic benefits of opioids and non-opioid or non-pharmacologic treatment methods for pain, setting reasonable goals for pain, function, and quality of life, and communicating with the patient's care team
- •How to listen and talk to patients about pain and pain management
- Motivational interviewing
- •Identifying and eliminating stigma, stereotypes, and bias that foster discrimination against and interfere with appropriate treatment for those with SUDs
- •Identifying and eliminating use of stigmatized language regarding pain and SUD

#### Substance Use Disorder

- Use of medication to treat OUD
- •Assessment of individual patient risk for developing a SUD or substance use-related harms
- •Understanding of SUDs as brain disorders and not moral failings
- •Recognition of SUD and where to refer patients for treatment
- Exposure to patients undergoing successful treatment for SUD

# **Considerations for Specialty-Specific Curricular Elements and Educational Experiences**

## Anesthesiology

- Identification of risk factors during the preoperative assessment for specific patients at the commencement of pain therapy and conveying that risk to the surgeons
- Assessment of pain and a patient's pain history
- Fundamentals of palliative care
- The process, symptoms, and psychology of SUD
- Management of SUD (from faculty in pain management and psychiatry), including managing SUD in obstetric patients
- Referral pathways for treatment of chronic pain or SUD
- The laws and regulations regarding opioid prescribing
- Social determinants of health as they relate to chronic pain

# Emergency Medicine

- Provision of anticipatory guidance for safe opioid use
- Initiation of MOUD treatment when appropriate
- Collecting a family and personal history of opioid use and SUD
- Making handoffs to community-based providers, including primary care and other officebased physicians, for specialized treatment

## Family Medicine

- The pharmacology of opioids, physiology of acute pain, physiology of chronic pain, treatment of acute pain, and modalities beyond pharmacotherapy
- How to treat or refer patients for treatment of OUD
- How to integrate behavioral health therapies
- Avenues for communicating with surgeons following pre-op workup and assessment
- Trauma-informed, culturally literate care

### Internal Medicine

- Management of chronic pain and SUD
- Approaches to help patients respond to and deal with despair, given that opioid overdose is a death of despair
- Instruction in stigma and bias
- Functional measures of pain that go beyond the simple 1 to 10 pain scale

# **Obstetrics and Gynecology**

- Pain management in pregnant women
- Assessment of risk of a pregnant woman developing an OUD
- Family-oriented approach to treating SUD in pregnant women
- Recognition and management of acute withdrawal in pregnant women
- Medication for pregnant women with OUD
- Understanding the legal consequences associated with opioid use by pregnant women

## **Orthopaedics**

- Education in basic pharmacokinetics, OUD, and opioids
- Education in the distinction between OUD and physical dependence, and related treatment options
- Management of pain for patients with pre-existing opioid tolerance or physical dependence
- Preoperative counseling to address patient expectations and concerns
- Faculty development

# **Pediatrics**

- Treatment of patients with chronic illness that involve pain
- How to work with families in which there is an OUD or SUD
- Anticipatory guidance for common situations where opioids are prescribed
- Handoffs between urgent care and primary care or inpatient and outpatient settings
- Longitudinal curriculum on acute and chronic pediatric pain, adapted from existing curriculum pertaining to adult patients

# Physiatry

- Systems-based competencies regarding communication with other care-team members, patient care, and professionalism
- Epidemiology of pain
- Overdose and rescue therapy
- Interventional pain therapies
- Opioid conversion

# Psychiatry

- Education on the neurological, psychological, and social aspects to pain
- Cognitive behavioral therapy for managing pain
- Understanding why chronic pain is often comorbid with psychiatric disorders
- Communicating with patients about treatment options and why management of mental health is important for pain management
- How to access and refer patients to non-medical support systems within the local community such as support groups
- Relationship between pain and the social determinants of health, particularly in the resident's community
- For those trainees who want to become trained in addiction psychiatry:
  - Conducting a general pain assessment
  - Recommending treatment options to the pain care team
  - Conduct risk-benefit profile regarding SUD
- Clinical practice in treating SUD in a variety of settings for acute and chronic pain

# Surgery

- Use of alternatives to opioids for safer and more effective peri- and post-operative pain management, such as the use of regional pain approaches, preemptive nerve blocks, infusion pumps, and other approaches to treat or manage pain
- Peri- and post-operative pain protocols
- Pre-operative screening for substance use or risk factors for substance use
- Awareness about resources to utilize for consultations or referrals for patients who require treatment or support for SUD or co-occurring conditions such as a mental health condition
- Understanding when to refer to primary care, psychiatry, and/or social work
- Communicating a pain plan to the patient and the patient's caregivers
- Documenting and communicating a pain plan to the patient's primary care physician
- Understanding when to refer to osteopathic manipulation, chiropractic, massage, or acupuncture therapy for muscle pain

**Abbreviations**: SUD, substance use disorder; MOUD, medications for opioid use disorder; OUD, opioid use disorder. Videos and resources for the Congress will remain available at no cost on the ACGME's learning platform "Learn at ACGME" for anyone who registers for an account.