

Abstract:

ORIGINAL VERSION (97 words)

The objective was to determine if the use of “Chronic Pain Patient Plans” subsequently referred to as “pain plans” reduced the utilization of the Emergency Department in patients who frequented the department seeking narcotic analgesics in the form of a parenteral injection or prescription. 60 patients identified as chronic pain patients with frequent ED visits were enrolled in a prospective study and the number of ED visits was measured before and after enrollment in a “Chronic Pain Plan”. The number of visits per patient on average declined from three visits per month to two visits per year.

EDITED VERSION (84 words)

This paper determines whether the use of Chronic Pain Patient Plans (“pain plans”) reduced Emergency Department use in patients who sought narcotic analgesics in the form of a parenteral injection or prescription. Sixty individuals identified as chronic pain patients with frequent ED visits were enrolled in a prospective study. The number of ED visits was measured before and after enrollment in a “Chronic Pain Plan.” On average, the number of visits per patient declined from three visits per month to two visits per year.