

## Health Advisory

### Emergency Department Reporting Requirement – Drug-Related Visits July 6, 2020

In 2019, 1,150 people died from drug overdoses in Philadelphia. Opioids were involved in over 80% of these deaths. In addition, over 7,000 visits related to drug use occurred in the city's emergency departments, placing significant burden on emergency response and health care services. At the same time, these visits represent critical opportunities to engage people with substance use disorders and connect them with treatment and follow-up care.

Emergency Departments in Philadelphia have taken many steps to improve the care provided to patients in their facilities, including the provision of buprenorphine and utilizing Certified Recovery Specialists (CRS) to connect patients to treatment and needed social services. While these efforts have been successful anecdotally, measuring and reporting the number of patients seen for drug-related conditions has been inconsistent across the city.

#### SUMMARY POINTS

- Acute care hospitals are now required to submit to the Health Department aggregate data on the number of patients seen in their EDs for drug-related conditions (overdose and withdrawal symptoms).
- Data should be reported on a quarterly basis via a secure online form.

**Beginning April 13, 2020, City law and regulations promulgated by the Philadelphia Board of Health require emergency departments to report aggregate data quarterly to the Philadelphia Department of Public Health related to all encounters for drug-related conditions (overdose or with withdrawal symptoms).** The data to be collected and reported include:

- Number of patients seen in the ED for an **overdose**
- Number of patients seen in the ED for **withdrawal symptoms**
- Number of patients seen in the ED who were **referred to any substance use treatment**
- Number of patients seen in the ED who were **provided buprenorphine**
- Number of patients seen in the ED who were **referred to inpatient rehab**
- Number of patients seen in the ED who were **referred to intensive outpatient (IOP) or outpatient (OP) treatment**
- Number of patients seen in the ED who were **referred to inpatient drug detox**
- Number of patients seen in the ED who were **referred to medication assisted treatment**
- Number of patients seen in the ED who were **referred to an abstinence-oriented program (e.g. a 12-step program)**
- Number of patients seen in the ED who were **admitted to the hospital or placed on observation status for treatment**
- Number of patients seen in the ED who were **provided naloxone on discharge**

Each report shall also include a description of the patient educational materials and care coordination resources that your facility routinely provides to persons treated for drug overdose or for symptoms of withdrawal.

Reporting should occur on a quarterly basis and include all patients seen since the last reporting period. The reporting schedule is as follows:

- **Q3** (July 1 - September 30) is due **October 15**
- **Q4** (October 1 - December 31) is due **January 15**
- **Q1** (January 1 - March 31) is due **April 15**
- **Q2** (April 1 - June 30) is due **July 15**

Aggregate information related to the treatment and discharge of any patients fitting the criteria listed above should be reported to the Philadelphia Department of Public Health using this secure online reporting form:

<https://redcap.phila.gov/surveys/?s=XWW8FRJ3ET>

Questions related to this reporting requirement can be emailed to [dph.opioid@phila.gov](mailto:dph.opioid@phila.gov).