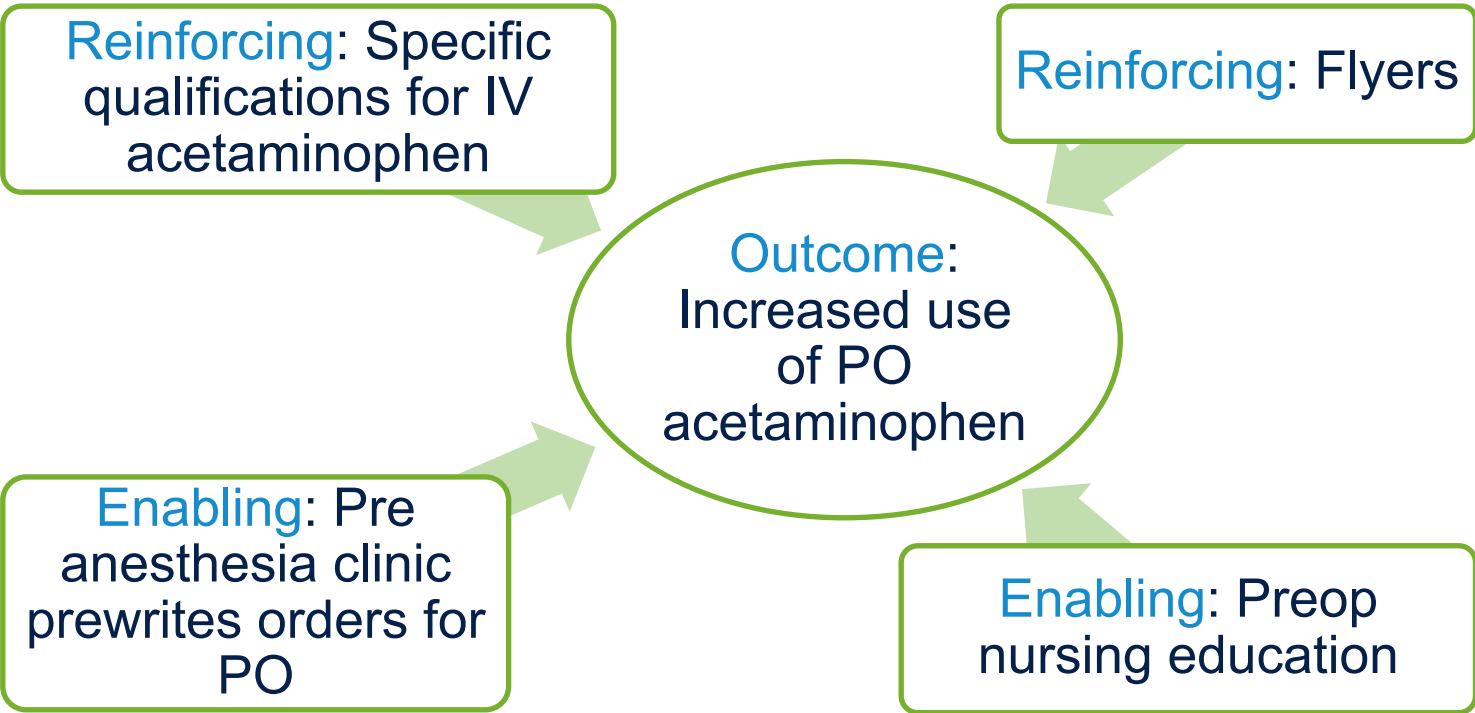


Multimodal Pain Regimen to Decrease Perioperative Costs:
A QI Project to Replace Intravenous Acetaminophen with Enteral Acetaminophen in Pediatric Ambulatory Surgery
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- BACKGROUND**
- Acetaminophen: superior side effect profile, 10-fold diff in cost between PO and IV
 - UCSF 2020: 16% getting PO

- METHODS**
- Prospective chart review, single center
 - Included patients 5-18 years at UCSF Mission Bay Campus 20-21.
 - Interventions:

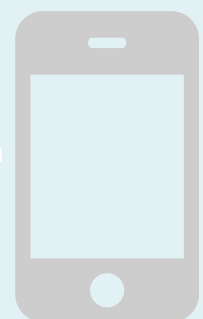
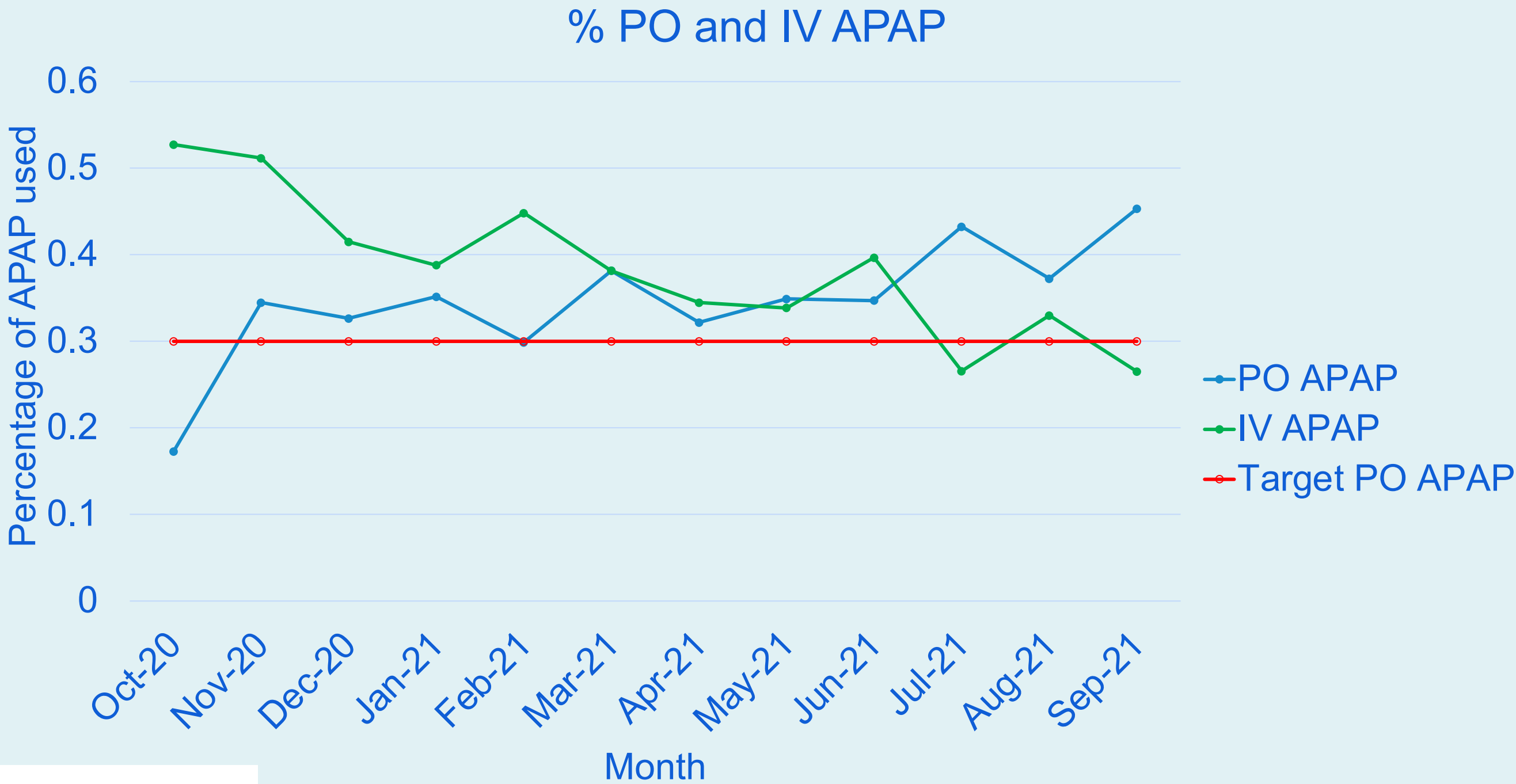


- RESULTS**
- 16%→ 30%
 - Cost savings was estimated at \$14,920 across 11 months.

- DISCUSSION**
- significant cost reductions
 - Unexpected consequences: double dosing
- Limitations:** no true cause and effect, potential for missing data.
- Future Steps:** broadly encouraging the use of PO acetaminophen (55%), patient safety to prevent double dosing



PO and IV forms of acetaminophen have a **10-fold difference in cost**. Encouraging providers to switch to PO acetaminophen can lead to cost reductions of \$14920 per year



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