

Risk Factors Checklists – Provider Version

Introduction:

Given the finding that people with a lifetime history of traumatic brain injury (TBI) are 11 times more likely to die of a narcotic overdose, we recommend screening for potential opioid misuse at two levels.

First, screen for non-TBI risk factors. Please see [the next page](#) for an evidence-based standardized screening tool, the 12-item Screener and Opioid Assessment for Patients with Pain (SOAPP-R) (Finkelman MD, 2017).

Second, while research is needed to determine which TBI variables may increase risk, it is suggested that screening be completed for possible TBI factors that might contribute to risk. The following items may represent additional risks that should be considered prior to prescribing an opioid as well as when managing an opioid in a person with lifetime exposure to TBI.

Possible TBI additional risk factors or TBI issues to consider:

1. Has the person had a moderate to severe TBI, a period in their life when they had repeated blows to the head, or a mild TBI in the last two months based on screening with the OSU-TBI-ID. ([Link here](#))
2. Does the person have cognitive (e.g., memory, problem-solving, judgement) impairments associated with their TBI that might interfere with medication use or compliance with prescribing guidelines?
3. Does the person have behavioral (e.g., impulsivity, poor self-regulation of mood, irritability or depression and anxiety) impairments associated with their TBI that might interfere with medication use or compliance with prescribing guidelines?
4. Did the person misuse alcohol prior to the TBI?
5. Did the person use prescription pain medications before the TBI occurred?
6. Did the person use non-prescribed pain medications or illicit drugs before the TBI occurred?
7. Is the patient taking other medications that could interact with opioid medications?
8. Does the patient have a history of overdose recovery with resulting hypoxic encephalopathy and cognitive impairment?

If your patient, has a number of risk factors, please consider:

- Education for the patient and family about TBI as a risk factor for misuse and overdose
- Obtaining further assessment of the cognitive and behavioral effects of the TBI
- Referral for alternative non-opioid pain management
- Referral to a Brain Injury Association of America (<https://www.biausa.org/>) or the United States Brain Injury Alliance (<https://usbia.org/>) support group and information about other TBI resources and supports

Biobibliography:

Butler S, B. S. (2004). Validation of a screener and opioid assessment measure for patients with chronic pain. *Pain*, 112, 65-75.

Finkelman MD, S. N. (2017). Cross-validation of short forms of the Screener and Opioid Assessment for Patients with Pain-Revised (SOAPP-R). *Drug and Alcohol Dependence, 178*, 94-100.

Lawrence R, M. D. (2017). Systematic review to determine which validated measurement tools can be used to assess risk of problematic analgesic use in patients with chronic pain. *British Journal of Anaesthesia, 119*(6), 1092-1109.