**Multicenter Perioperative Outcomes Group (MPOG)**
**PCRC Meeting Notes – Monday, December 10, 2018**

# Ground Rules for PCRC

1. Each protocol must have specific testable hypothesis with data available in MPOG data structure
2. People requesting specific data elements must also supply that data type to MPOG. If you don't submit that data type currently, then you can't get that type of data type out. However, if you have a co-investigator from another site that does supply that data, then you can ask for that type of data. The reason is so someone on the research team understands the limitations of each data element being requested and used
3. To ensure that there is not a lack of clarity about what the status of the proposal is, each proposal will get the following overall decision at the end of each presentation and discussion
    a. Accept with no changes
    b. Accept with minor changes send revision electronically
    c. Accept with major changes and represent at PCRC
    d. Reject
4. Meeting will be recorded to be shared later with members of MPOG via the MPOG website. There were no objections to this via the members that were on the call.

### Attendance:

| | |
|---|---|
| Dan Biggs (Oklahoma) | Nichole Pescatore (Michigan) |
| Mike Burns (Michigan) | Saager, Leif (Michigan) |
| Ruth Cassidy (Michigan) | Rebecca Schroeder (Duke) |
| Douglas Colquhoun (Michigan) | Zachary Turnbill (Weill Cornell) |
| Peter Coles (Bronson) | Robert Schonberger (Yale) |
| Germaine Cuff (NYU Langone) | Nirav Shah (Michigan) |
| Lucy Everett (MGH) | Amy Shanks (Michigan) |
| Adit Ginde (Colorado) | Allie Thompson (Michigan) |
| Sachin Kheterpal (Michigan) | Kevin Tremper (Michigan) |
| Kai Kuck (Utah) | Shelley Vaughn (Michigan) |
| Tory Lacca (Michigan) | John Vandervest (Michigan) |
| Sean Mackey (Stanford) | Jonathan Wanderer (Vanderbilt) |
| Mike Mathis (Michigan) | Nirav Shah (Michigan) |
| Bhiken Naik (Virginia) | |

**Miscellaneous Announcements:**

- IMPACT proposals were due November 30, 2018
- ASPIRE Update/Plans
    - Monthly ASPIRE Quality Committee meetings
    - 3 newly released measures on the ASPIRE dashboard
        - Transfer of care
        - OME (Opioid Equivalent) Dashboard released a few months ago
        - Sustainability measure related to fresh gas flow
    - 2019 Initiatives
        - Focus on improving data quality across participating sites
        - Continue with limited measure development
        - Further collaboration between ASPIRE and other CQI surgical collaboratives
- EOS Update
    - Continuing with analysis – 10 institutions; ~1 million cases
    - Methods paper is almost ready for submission
- Edwards Collaboration
    - Probable collaboration on a pragmatic trial for hypotensive algorithm
    - Edwards may be contacting sites with existing agreements
    - If interested in participating and actively contributing data to MPOG, please contact MPOG coordinating center
- PROSPER
    - If you are interested in participating, please reach out to MPOG coordinating center.
    - Also, please visit the MPOG.ORG/PROSPER
    - Our existing IRB covers PASSIVE enrollment with an amendment. Separate IRB application is required for ACTIVE enrollment.
- Next Meeting: January 14, 2019.

**PCRC 0077:** Perioperative Opioid Use – Correlating Patterns of Utilization
**PI:** Mike Burns, PhD, MD
**Institution:** University of Michigan

- Q: How do you plan to identify and manage patients on opioids preoperatively? Binary?
    - A: We will use the preoperative medication list. Yes/No for opioid listed preoperatively. Also use specific opioid.
    - A: Divide into low intensity and long-acting opioids. Tiered structure.
    - This will be a major limitation if only place for this information is from the EHR.
- Comment: Surgeon often writes prescription at preoperative visit, so it's listed in the EHR even if they haven't used it prior to surgery.
- Comment: Some sites may have opioid registry data, but not all sites.
- Q: How many institutions do you expect to include?
    - A: ~20 or more
- Comment: Very complex study – should we consider dividing this up into separate PCRC proposals.
- Comment: Lumbar puncture is listed as a Spine case. May want to reconsider.
- Comment: Pairwise comparisons across institutions for that many institutions needs to be further explored and outlined.
    - Need to use a different technique – look to see whether there is an overall pattern to explore.
- Comment: Establish a clinically meaningful threshold.
- Comment: May not capture provider ID across all institutions.
- Comment: Primary analysis will be to compare to median and will further explore the pairwise comparisons.
- Comment: Do we think that the OME algorithm/equivalency is applicable to the intraoperative population when it was developed more for the chronic pain population? Perhaps MPOG focused on developing a separate equivalency for acute pain population.
    - Comment: Many studies in the perioperative area were developed and validated in the acute pain population.
- Comment: Do we need to develop an acute and chronic OME equivalency before we move forward with this project? Or can we do them at the same time and in separate projects?
    - Comment: Poor quality of opioid data outside of the operating room.

**Final Decision: Electronic revisions**

| | Vote |
|---|---|
| Academic Medical Center (AMC) Amsterdam | **N/A** |
| Beaumont | **N/A** |
| Brigham and Women's | **N/A** |
| Bronson | **N/A** |
| Children's Hospital of Orange County (CHOC) | **N/A** |
| Cleveland Clinic | **N/A** |
| Columbia | **N/A** |
| Duke | **N/A** |
| Henry Ford | **N/A** |
| Holland | **N/A** |
| MGH | **Electronic revisions** |
| Memorial Sloan Kettering | **N/A** |
| NY Langone | **Electronic revisions** |
| Oregon Health Science University | **N/A** |
| St. Joseph/Trinity | **N/A** |
| Sparrow | **N/A** |
| Stanford | **Electronic revisions** |
| University Medical Center of Utrecht | **N/A** |
| University of Arkansas | **N/A** |
| University of California Los Angeles | **N/A** |
| University of Colorado | **N/A** |
| University of Michigan | **Abstain** |
| University of Oklahoma | **N/A** |
| University of Pennsylvania | **N/A** |
| University of Tennessee | **N/A** |
| University of Utah | **Represent** |
| University of Vermont | **N/A** |
| University of Virginia | **Electronic revisions** |
| University of Washington | **N/A** |
| Vanderbilt | **Electronic revisions** |
| Wake Forest | **N/A** |
| Washington University, St. Louis | **N/A** |
| Weill-Cornell Medical Center – New York Presbyterian | **N/A** |
| Yale | **Electronic revisions** |