Electronic Supplementary Material

**eFig. 1** Prescribing an opioid pain medication: hospital poster

**Prescribing an opioid pain medication?**

Here are some tips when discussing opioids as part of pain management with your patients:

**Patient understanding**
Discuss patient’s pain expectation and set goal for tolerable pain and NOT zero pain.

**Alternatives**
Consider combination of acetaminophen, ibuprofen and/or other multimodal analgesia, as well as, non-pharmacological therapies such as heat and/or cold therapy.

**Indications**
Not all pain needs to be treated by opioids and some types of pain might not even respond to an opioid. When possible, choose oral administration instead of intravenous.

**Necessary quantity only**
For acute pain a duration of 3 days or less is often sufficient. If a duration more than 7 days is indicated a follow up pain management assessment should be arranged. Consider part-fill prescriptions with expiry dates.

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*Sinai Health*
eFig. 2  Opioids for pain after surgery: patient handout. Adapted from ISMP Canada
The step selection model was generated with the ordinary least squares regression using the `lm()` package in R statistical software. Each of these variables was allowed to interact with the intervention period. The penalty term was set to $k = 1.074$, which is equivalent to a $P$ value threshold of 0.3 for variable inclusion at each step of the algorithm. Coefficient estimates and Wald-test $P$ values for the final model are reported in this table.

| Effect modifiers for 2019 | Estimate (MME) | 95% CI       | Pr(>|t|) |
|--------------------------|----------------|--------------|---------|
| Multiple gestation: yes  | 7.6            | -3.4 to 18.6 | 0.18    |
| Parity: 2 or more        | 6.7            | -1.4 to 14.7 | 0.10    |
| Cesarean delivery number: 2 or more | -8.1          | -16.5 to 0.3 | 0.06    |
| Incision type: midline or T | 12.2          | -6.1 to 30.6 | 0.19    |
| Incision type: high transverse | 6.5           | -7.1 to 20.1 | 0.35    |
| Opioid use in-hospital: yes | 22.6          | 17.5 to 27.7 | <0.001  |

* refers to discharge opioid prescription in morphine milliequivalents in June 2018 with all categorical variables set to their respective reference categories, and all continuous variables centered and scaled to 0.