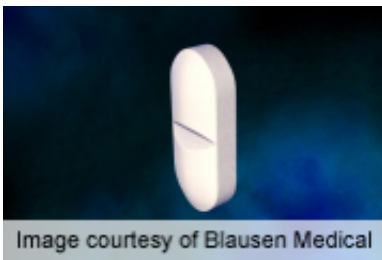


ASA issues top five 'Choosing wisely' recommendations

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(HealthDay)—The top five anesthesiology-related pain medicine issues that physicians and patients should question have been released by the American Society of Anesthesiologists (ASA) as part of the *Choosing Wisely* campaign.

The ASA Committee on Pain Medicine submitted potential recommendations and voted on which issues should be included in the top five. Supporting evidence was identified from literature searches.

The top five recommendations include: (1) opioid analgesics should not be prescribed as first-line therapy for treatment of non-cancer pain; (2) [opioid analgesics](#) should not be prescribed as long-term treatment for chronic non-cancer pain treatment until the risks have been considered and discussed with the patient; (3) imaging studies such as [magnetic resonance imaging](#), computed tomography, or X-ray should be avoided

for acute [low back pain](#) without specific indications; (4) intravenous sedation should not be used as a default practice for diagnostic and therapeutic nerve blocks or joint injections; and (5) irreversible interventions for non-cancer pain that carry considerable costs and/or risks should be avoided.

"As leaders in patient safety, physician anesthesiologists want the most effective tests and treatments for our patients and we want them to be used appropriately," Jane C.K. Fitch, M.D., president of the ASA, said in a statement. "ASA has taken the lead in improving patient safety related to anesthesiology and [pain medicine](#)."

More information: [More Information](#)

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