

PIN Workshop Day III Agassiz Clinic Update

Our Vision

“Quality primary care is available to all Manitobans; through networked Primary Care Physicians in collaboration with other providers.”





What is the Physician Integrated Network (PIN) Initiative?

- The Physician Integrated Network (PIN) represents one approach to primary care service delivery.
- PIN focuses on the engagement of autonomous, independently owned fee-for-service physician groups. Interdisciplinary Collaboration will be a key feature as this approach evolves.



Agassiz Medical Clinic

- Focus on Chronic Disease Management
 - Diabetes and Hypertension
- Capture data on CAD patients
- Computer data converted to be able to be smart chart capable May 2007 over one weekend, users off system



Smart fields

- Smart fields pull data from other areas in the chart like lab, notes and prescription writing
- Smart fields enable the physician to have a dynamic "snap shot" of the data that is available from all parts of the system
 - E.g. A flow sheet may display the latest observed:
 - Height
 - Weight
 - Blood pressure
 - Foot examination date
 - Eye examination date
 - Cholesterol levels



Information Management Changes

- Previously data like BP was entered in patient's note and not able to be captured.
- New BP and vitals categories were created July 2007 and staff and physicians instructed to change method of entering data
- Flow sheets and new categories were imported into the chart July 2007



Research process

- Usual Doctor field not consistently used and needed for research process to develop a list of core patients
- Program run August 2007 to update usual doctor field
- Research file produced list per doctor of all Diabetic and Hypertensive patients
- Doctors confirmed correct diagnosis



Training and Implementation

- Training session by Clinicare onsite Sept 24-27
- Flow sheets adapted
- Patients entered in Chronic disease registry and Recall protocol



Chronic Condition Registry [X]

Help

Patient ID: 028278 TEST L NAUSE
Usual Dr:


Condition Name: DIAB Define...
Condition Type: TYPE2 Define...
Diagnostic Code: 250 DIABETES MELLITUS
Start Date: 220ct07 Observation Date: 220ct07
Last User: carol

Remove Condition:
 Remove Patient from Registry for Condition: DIAB
Removal Date: Removal Reason:

Add/Save Delete

Name	Type	Start Date	Observation Date	User	S
DIAB	TYPE2	220ct07	220ct07	carol	

Exit



Add Recall Protocol

The Chronic Condition "DIABETES MELLITUS" is associated to the following Recall Protocols. Please select the appropriate checkbox to Add Patient "028278" to a Recall Protocol.

Recall Protocol
<input checked="" type="checkbox"/> Influenza Vaccine (00003)
<input type="checkbox"/> Diabetes (00006)

Save Cancel

Patient Id: 020132

Empty text area for patient notes or details.

Protocol: Diabetes Add Add Patient to a Protocol

Diabetes - PROTOCOL DETAILS (RECDM) - Active		Status	Due Date
Procedures and Reminders:			
<input type="checkbox"/>	DEYE - Eye check fundoscopic 1 yr Greater than 18 Years of age, Both Male and Female, Repeats, Every Year for the foreseeable future.	OVERDUE	19Oct2007
<input type="checkbox"/>	DFT - Foot exam 1 yr Greater than 18 Years of age, Both Male and Female, Repeats, Every Year for the foreseeable future.	OVERDUE	19Oct2007
<input type="checkbox"/>	DA1C - HGA1C 4 months Greater than 18 Years of age, Both Male and Female, Repeats, Every 4th Month for the foreseeable future.	PENDING	01Dec2007
<input type="checkbox"/>	DFBS - Fasting blood sugar 4 months Greater than 18 Years of age, Both Male and Female, Repeats, Every 4th Month for the foreseeable future.	PENDING	01Dec2007
<input type="checkbox"/>	DACR - Urine albumin/creatinine ratio 1 yr Greater than 18 Years of age, Both Male and Female, Repeats, Every Year for the foreseeable future.	PENDING	03Apr2008
<input type="checkbox"/>	DCRE - Creatinine 1 yr Greater than 18 Years of age, Both Male and Female, Repeats, Every Year for the foreseeable future.	PENDING	03Apr2008

Edit Procedure

Sign off selected Item 030407

Sign Off

Edit Event

Cancel Event

Detailed History



Challenges

- Flow sheets designed based on Manitoba Health's paper versions
- Original flow sheet too slow to refresh
- Too many screens to page down
- Summary flow sheet developed with better acceptance by physicians

Diabetes summary flow sheet

DIABETES SUMMARY		(DIASUM)	October 22, 2007
05 - HOLMES C			
GLUCOSE FASTING			
Result	Collected	Range	
[6.90	] Dt[20070704]	Rng<mmol/L 3.9 - 6.10	> Nrm<h>
HGB A1C			
Result	Collected	Range	
[6.8	] Dt[20070704]	Rng<% 4 - 6	> Nrm<h>
BLOOD PRESSURE			
[122]/[70	] Dt[20070720]		
TARGET BODY MASS INDEX (BMI): 18.5 - 24.9			
Height[161.5	]cm	Weight[72.2	]kg BMI[27.68] Dt[20070720]
FASTING LIPID PROFILE LDL (Target <2.5 mmol/L)			
Result	Collected	Range	
[3.22	] Dt[20070214]	Rng<mmol/L 0.00 - 3.39	> Nrm<N>
FUNDOSCOPIC EYE Exam: []			
Dilated Eye Exam Method[]			
MICROALBUMIN SCREEN (Albumin Creatinine Ratio: <2.0 M, <2.8 F)			
Result	Collected	Range	
[1.4] Dt[20060828]	Rng<mg/mmol - <2.0	> Nrm<N>

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DIABETES SUMMARY

(DIASUM)

October 22, 2007

SERUM CREATININE

Result	Collected	Range	
[53	] Dt[20070214]	Rng<umol/L 53 - 120	> Nrm<N>

FOOT EXAM - ASSESS FOR NEUROPATHY

FILAMENT TEST Performed []
[Y] Dt[20070430]

Neuropathy Present[]
[] Dt[20071022]

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Max Ln: 7182



Flow Sheets

- Easy to see when next procedure due
- Requires manual entry for neurology exam and eye exam
- Initial use requires entering in old data or wait till new data entered

Hypertension summary flow sheet

it Note (HTNSUM)

Settings Edit Print Help

HYPERTENSION SUMMARY (HTNSUM) October 15, 2007

05 - HOLMES C

BLOOD PRESSURE
[110]/[74] Dt[20071015]

LDL

Result	Collected	Range	
[3.28]	Dt[20070607]	Rng<mmol/L 0.00 - 3.39	> Nrm<N>

FBS (normal < 6, impaired 6.1 - 6.9)

Result	Collected	Range	
[5.20]	Dt[20070607]	Rng<mmol/L 3.9 - 6.10	> Nrm<N>

SERUM CREATININE

Result	Collected	Range	
[87]	Dt[20070607]	Rng<umol/L 53 - 120	> Nrm<N>

TARGET BODY MASS INDEX (BMI): 18.5 - 24.9

Height[]cm Weight[]kg BMI[] Dt[YYYYMMDD]

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New providers

- Dietitian hired and started Oct 22
- Will see referral from doctors for any conditions – diabetes, obesity, metabolic syndrome, celiac disease, etc
- Plan to hire nurse who will help with diabetic follow up to do BP and BMI – exact role not yet defined



Change Management

- Nurses adapted well to entering vitals in new fields
- Challenges will be to have physicians use flow sheets – summary sheet helps – all physicians will receive a paper info sheet highlighting the use of different flow sheets
- Plan educational sessions on regular basis with physicians to review use of flow sheets and recall protocols



Change Management

- Challenge to enter BP in separate category instead of note – have emphasized the benefits of smart fields
- Front office staff entering new reason for visit codes that trigger flow sheet being displayed as enter chart. Physicians need to remember to indicate patients are Diabetic or Hypertensive when follow up booked
- Still need to develop a plan for recalling diabetic and hypertensive patients

Diabetes Flow Sheet Longer version

Edit Note (DIA326) [] [] [X]

Settings Edit Print Help

Diabetes 3 To 6 Months Review (DIA326) October 22, 2007

05 - HOLMES C

GLYCEMIC CONTROL

GLUCOSE FASTING Reviewed []

Result	Collected	Range	Norm
[6.90	] Dt[20070704]	Rng<mmol/L 3.9 - 6.10	> Nrm<h>
[7.60	] Dt[20070214]	Rng<mmol/L 3.9 - 6.10	> Nrm<h>
[6.60	] Dt[20060828]	Rng<mmol/L 3.9 - 6.10	> Nrm<h>

A1C (Every 3 Months)

Result	Collected	Range	Norm
[6.8	] Dt[20070704]	Rng<% 4 - 6	> Nrm<h>
[6.7	] Dt[20070214]	Rng<% 4 - 6	> Nrm<h>
[6.8	] Dt[20060828]	Rng<% 4 - 6	> Nrm<h>

REVIEWED DIABETES MEDICATIONS []

[] Dt[YYYYMMDD]

HYPERTENSION

BLOOD PRESSURE

[122]/[70] Dt[20070720]

[]/[] Dt[YYYYMMDD]

[]/[] Dt[YYYYMMDD]

REVIEWED BLOOD PRESSURE MEDS []

[] Dt[YYYYMMDD]

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OTHER

TARGET BODY MASS INDEX (BMI): 18.5 - 24.9

Height[161.5]cm Weight[72.2]kg BMI[27.68] Dt[20070720]

Height[161.5]cm Weight[73.7]kg BMI[28.26] Dt[20060404]

Height[161.5]cm Weight[73.85]kg BMI[28.31] Dt[20050503]

Waist Circumference[]cm

REVIEWED SMOKING, ACTIVITY, DIET, STRESS

Smoking[] Diet[]

Activity[] Stress[]

VASCULAR MEDICATIONS

Reviewed ASA [] Reviewed ACEI / ARB []

[] Dt[YYYYMMDD] [] Dt[YYYYMMDD]

Diabetes Annual Review

(DIAANN)

October 22, 2007

05 - HOLMES C

LIPIDS

FASTING LIPID PROFILE

LDL (Target < 2.5 mmol/L)

Result	Collected	Range	
[3.22]	Dt[20070214]	Rng<mmol/L 0.00 - 3.39	> Nrm<N>
[3.50]	Dt[20060424]	Rng<mmol/L 0.00 - 3.39	> Nrm<h>
[2.84]	Dt[20050518]	Rng<mmol/L 0.00 - 3.39	> Nrm<N>

HDL

Result	Collected	Range	
[1.28]	Dt[20070214]	Rng<mmol/L 0.90 - 2.60	> Nrm<N>
[1.31]	Dt[20060424]	Rng<mmol/L 0.90 - 2.60	> Nrm<N>
[1.23]	Dt[20050518]	Rng<mmol/L 0.90 - 2.60	> Nrm<N>

Triglycerides (Target < 1.5 mmol)

Result	Collected	Range	
[2.12]	Dt[20070214]	Rng<mmol/L 0.55 - 1.70	> Nrm<h>
[1.70]	Dt[20060424]	Rng<mmol/L 0.55 - 1.70	> Nrm<N>
[3.00]	Dt[20050518]	Rng<mmol/L 0.55 - 1.70	> Nrm<h>

Total chol/HDL (Target < 4.0)

Result	Collected	Range	
[4.27]	Dt[20070214]	Rng<0.00 - 5.00	> Nrm<N>
[4.26]	Dt[20060424]	Rng<0.00 - 5.00	> Nrm<N>

Diabetes Annual Review (DIAANN) October 22, 2007

[4.41] Dt[20050518] Rng<0.00 - 5.00 > Nrm<N>

Lipid Risk []

Review Lipid Lowering Meds[]

[] Dt[YYYYMMDD]

FASTING GLUCOSE METER/LAB COMPARISON Completed[]

[] Dt[YYYYMMDD]

FUNDOSCOPIC EYE Exam:[]

Dilated Eye Exam Method[]

RENAL (Screen for Neuropathy)

MICROALBUMIN SCREEN (Albumin Creatinine Ratio: <2.0 M, <2.8 F)

Result	Collected	Range	
[1.4	] Dt[20060828]	Rng<mg/nmol - <2.0	> Nrm<N>
[0.9	] Dt[20060424]	Rng<mg/nmol - <3.0	> Nrm<N>
[0.6	] Dt[20050414]	Rng<mg/nmol - <3.0	> Nrm<N>

Serum Creatinine

Result	Collected	Range	
[53] Dt[20070214]	Rng<umol/L 53 - 120	> Nrm<N>
[55] Dt[20060424]	Rng<umol/L 53 - 120	> Nrm<N>
[67] Dt[20050414]	Rng<umol/L 53 - 120	> Nrm<N>

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Max Ln: 7182

NEUROPATHY

FILAMENT TEST Performed[]

[Y] Dt[20070430]

Neuropathy Present[]

[] Dt[20071022]

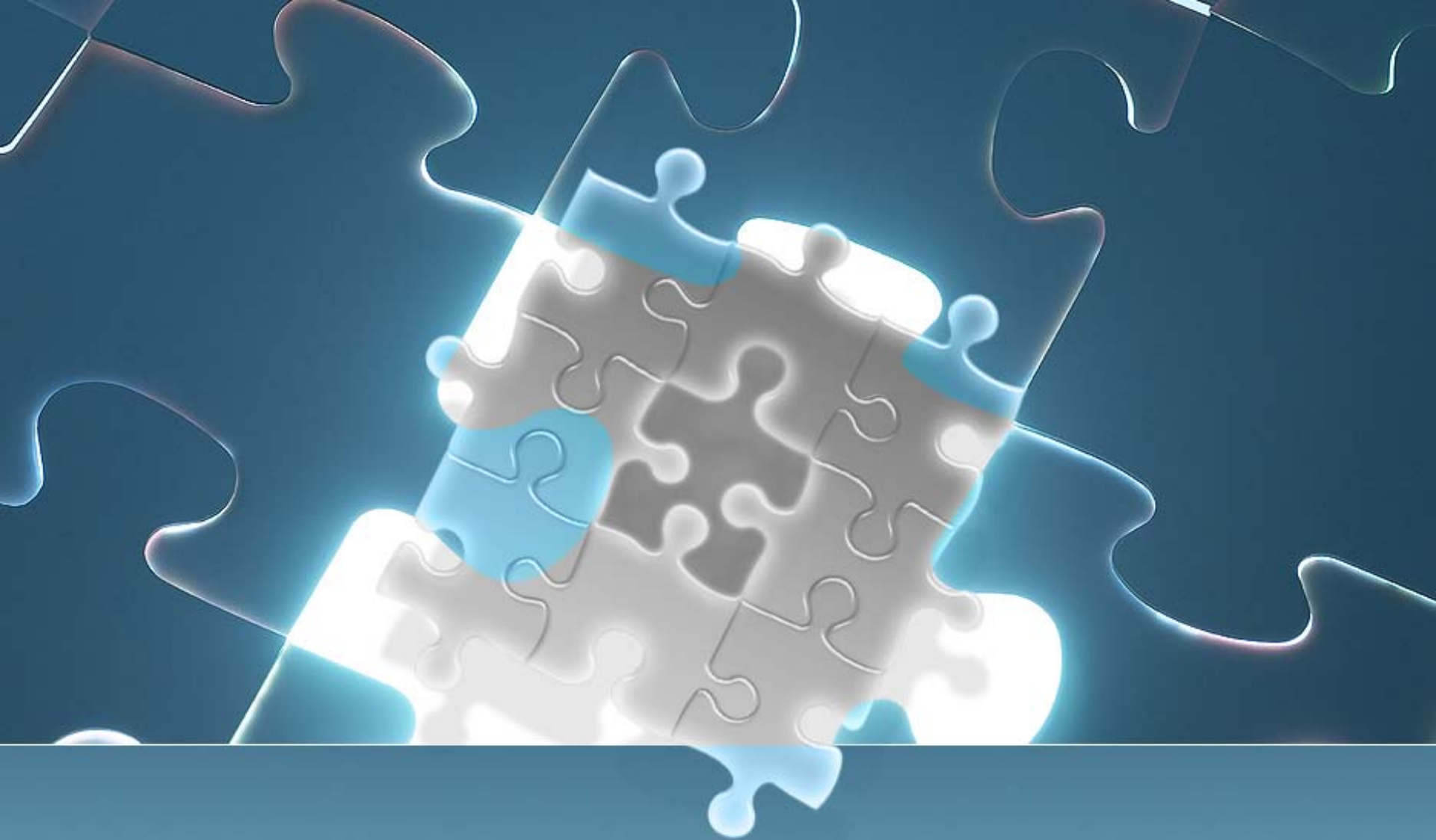
SELF MANAGEMENT

Assess and Discuss self-management goals[]

[] Dt[YYYYMMDD]

Last Influenza Vaccine Date[] Dt[YYYYMMDD]

Date of last pneumococcal vaccine [] Dt[20071022]



The End