

Prevention into Practice

PIP

Provider Practice Preventative Initiative 2008



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Prevention into Practice.....PIP

- Provider buy in
- Have a PIP team & PIP Champions
 - Determine office flow
- Set Goals to measure success by
 - Phase Role out for multi sites
 - Educate staff on expectation
 - Include the patient
- Assess and redesign where needed
 - Incentivize staff for successes
- Market it to your patients "Ask me about PIP!"
 - Measure and Share results



Women: Join us in *saving your life!*

Discuss with your provider:

- Breast cancer screening yearly beginning at age 40
- Cervical cancer screening after age 21
- Colon cancer screening every 10 years starting at age 50 (age 40 if you're at high risk)

This is a guideline and not all patients may fit the guideline as written. Patient care is individualized and a patient's condition may require a change in patient care provided.

Men: Join us in *saving your life!*

Discuss with your provider:

- Prostate cancer screenings yearly starting at age 50 (40 if you're at high risk)
- Colon cancer screening every 10 years starting at age 50 (age 40 if you're at high risk)

This message brought to you by Gifford Medical Center
Randolph, Vermont — (802) 728-7000

M T W Th F

____ / ____

If you are unable to keep this appointment, please give 24 hours notice.

Join us in *saving your life.*

Screen for:

- Prostate cancer screenings yearly beginning at age 50
- Breast cancer yearly beginning at age 40
- Cervical cancer after age 21
- Colon cancer every 10 years starting at age 50

Please remember to bring all of your Medication information along with your Insurance Card and Co-payment to your visit.

Given out at check in by receptionist/medical secretary

Multipurpose form

Given to patients to complete while waiting, to turn in when roomed.

Bonus...our pts actually circled their prevention needs!!

This section helped improve office flow & decrease phone calls for appointments

Top 2 Items that you would like to discuss with your Provider today:

1 _____

2 _____

Preventative Care Standards:

- **Prostate Check:** Age 50 or higher.
- **Mammogram:** Annually starting at age 40.
- **Pap Test:** After age 21
- **Colonoscopy:** Every 10 years starting at 50.
- **Pneumococcal vaccine:** Age 65 and older
- **Flu Shots:** Annually
- **Diabetes Care:** A1C testing every 3 Months, Microalbumin, LDL and Creatinine, Eye, Podiatry, Dental, Diabetes Clinic & Endocrinology annually.

Patient Name: _____

DOB: ____/____/____ MRN: _____

Or affix patient label here

Next Appointment - F/U

_____ Days Wks Month

Phy./ WCC PAP Only No PAP

Other: _____

15 20 30 45 60 minutes

Consult w/ _____


Dx: _____

Referral: Diabetic Clinic Nutritionist

Anticoagulation Clinic PT Podiatry

Ophthalmology Cardiac Rehab

Dental



PSA/DRE

- Normal risk men: Begin age 50
- High risk men: Begin age 40

Mammogram/ CBE

- Annually age 40-70
- Discretionary p/ age 70

Pap test

- Initiate age 21 or 3 years p/ 1st sex activity
- Annually until age 30
- 0-3 years if (1) x3
- D/C s/p hysterectomy for benign disease
- Discretionary p/ age 65

Colonoscopy

- Every 10 years age 50
- If 1st relative w/ colon CA, initiate p 40 or 10 years 4- than relative

Pneumococcal vaccine

- Age 65 + older
- Age 2 + older
- Chronic health condition

Flu shot

- Annually

Diabetes care

- Annual: Microalbumin, LDL, Creatinine
- Referrals: eye, podiatry, dental, Diabetes Clinic, endocrinologist
- A1C Q3m

Patient name: _____ Reason for visit: _____

DOB: _____

MR #: _____

Or affix patient label here

Health screenings reviewed with patient Nurse initials: _____

Ordered under protocol: PSA and DRE Mammogram Pap test Colonoscopy Pneumococcal vaccine

Flu shot LDL A1C Microalbumin Creatinine Referral: _____

BP: _____ / _____ T: _____ P: _____ R: _____

O2 Sat: _____ WT: _____ HT: _____ Other: _____

Notes: _____

Provider initials: _____ Dictated

Patient name: _____ Reason for visit: _____

DOB: _____

MR #: _____

Or affix patient label here

Health screenings reviewed with patient Nurse initials: _____

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Flu shot LDL A1C Microalbumin Creatinine Referral: _____

BP: _____ / _____ T: _____ P: _____ R: _____

O2 Sat: _____ WT: _____ HT: _____ Other: _____

Notes: _____

Provider initials: _____ Dictated



Medical staff had approved standing orders so the nurses could order any test that was needed prior to the provider entering the room.

Healthfirst, Inc version for 2013



COLLABORATIVE HEALTH SYSTEMS

Patient Name: _____ Date of Birth: _____ Gender: _____

Quality Measures Checklist for Documentation in 2013

Patient is NOT qualified for measure reporting if any of these conditions apply:

- Deceased in 2013
- Hospice care in 2013
- Moved out of the country during 2013
- Belonged to an HMO during 2013

12: Med Rec: For each 2013 inpt d/c:

- 1. Exact date of d/c
- 2. Proof of office visit w/in 30 days of inpt d/c
- 3. Med rec w/in 30 days of d/c
- Must include full med list with dosages
- Must state:
 - MD is "aware of d/c meds" OR "reviewed d/c meds"
 - Keep meds OR change meds

1-3 are required for each d/c date in 2013.
Transfers from inpt to inpt are d/c that require med rec

13: Fall Risk: In 2013 for pt age 65+:

- Any variation of "patient has been screened for falls"
- Pt is not at risk for falls OR
- Pt is at risk for falls
- Record of patient fall(s) in 2013

14: Flu Shot: In 2013:

- Noted record between 10/01/2012 and 03/31/2013 that patient received an influenza immunization

15: Pnuemo Shot: For pt age 65+:

- Noted record that shows patient has ever had a pneumonia vaccination

16: BMI: In the last 6 months of 2013 (or last visit for pt in 2013):

- Calculated BMI
- If outside parameters, I/u plan r/t to BMI
 - Age 65 + BMI ≥ 23 and < 30
 - Age 18 – 64 years BMI ≥ 18.5 and < 25

F/u plan must state connectivity to BMI: For example: "Patient given nutritional education r/t ↑ BMI."

17: Tobacco Screen: In 2012 or 2013:

- Screened for tobacco use
- If tobacco user, provided cessation counseling

18: Depression Screen: In 2013:

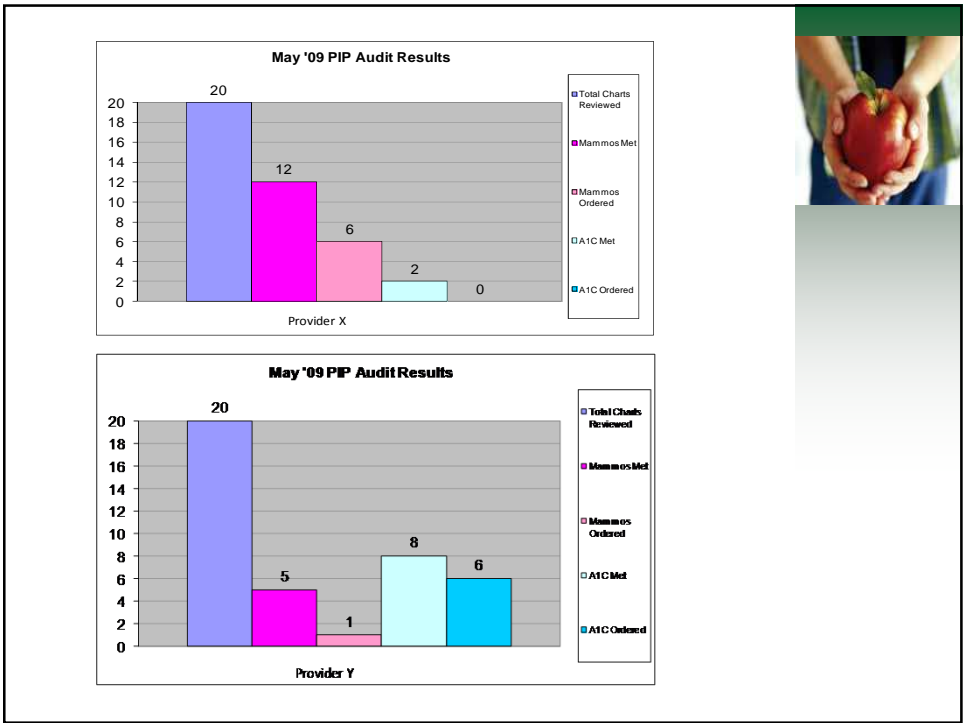
- Screened for clinical depression using an age appropriate standardized screening tool
- If +, f/u documented on same date
- Must include 1 or more of the following:
 - Additional evaluation
 - Suicide risk assessment
 - Referral to a practitioner who is qualified to dx and treat depression
 - Pharmacological interventions
 - Other interventions or follow-up

19: Colorectal Cancer Screen: Noted in 2013 record for pt age 50-75:

- Performance of FOBT in 2013



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Questions

