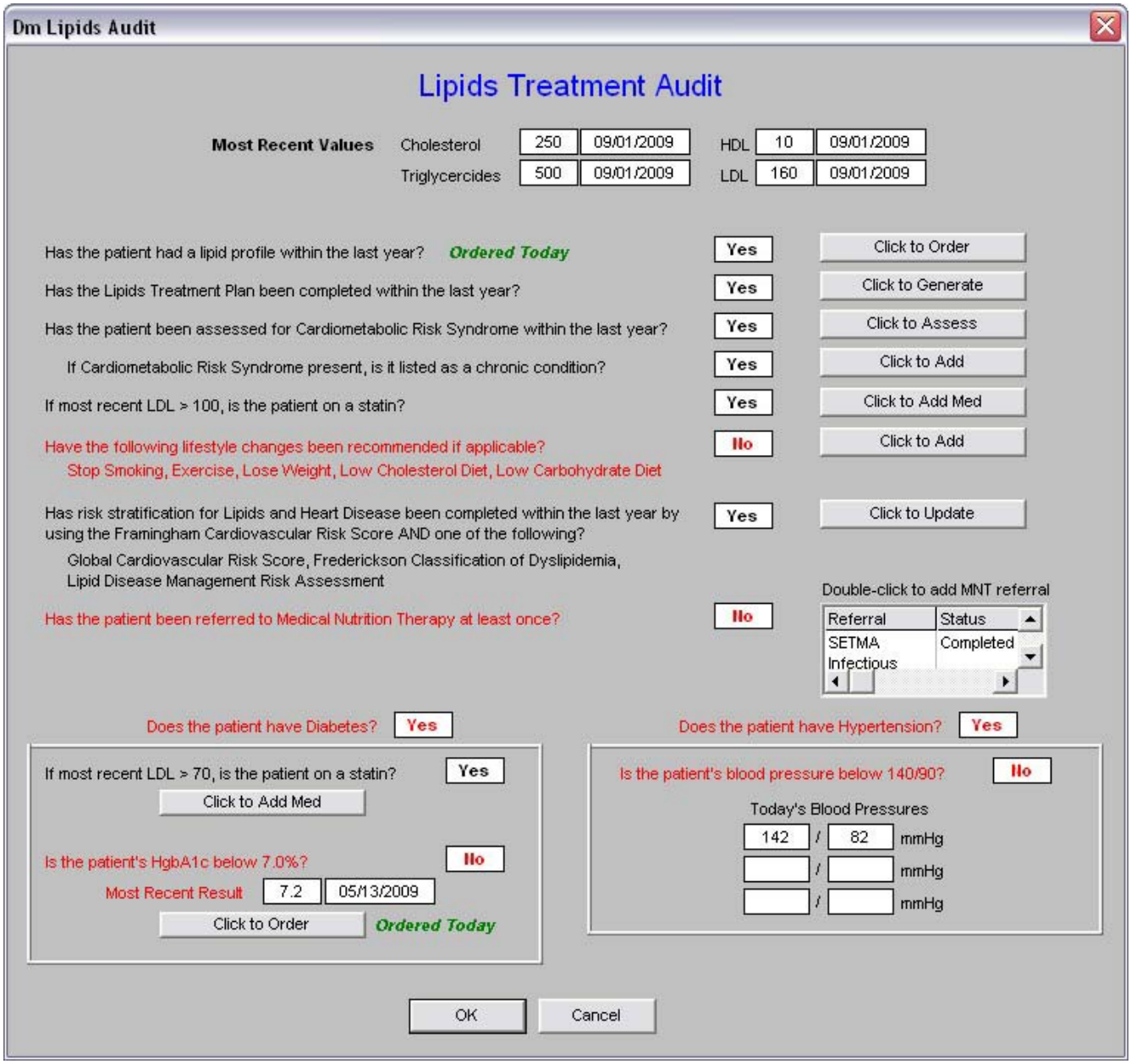
Tutorial for the Use of SETMA's "Lipids Treatment Audit"

The Lipids Treatment Audit can be found by following these steps:

- Go to **AAA Home**
- Click on **Lipids Disease Management Tool**
- Click on **Lipids Plan**
- Clink on the **Treatment Audit** button which is the seventh button in the Navigation list to the right of the **Lipid Plan template**



As can be seen above, at the top of the template the current Lipid Values are displayed for

- Total Cholesterol
- HDL
- LDL
- Triglycerides

There are nine elements to the Lipid Audit

1. Has the patient had a lipid panel within the last year?

The first element in this data set is whether or not a Lipid Panel has been ordered in the current calendar year or in the past twelve months, whichever is longer. To the right of this measure is a button which is entitled “Click to Add.” If the Lipid panel has not been ordered, depressing this button will send the order t the lab, post it to the patient’s charges and place it on the current encounter.

2. Has the Lipids Treatment Plan been completed within the past year?

If not previously completed, this element is completed by the depressing of the “Click to Generate” button shown above. When this button is depressed the **Lipids Treatment Plan** is generated. In part this plan states:

SETMA I - 2929 Calder, Suite 100
SETMA II - 3570 College, Suite 200
SETMA West - 2010 Dowlen
(409) 833-9797
www.setma.com

Lipids Follow-Up Note
Treatment Plan and Plan of Care

Patient	**Jonny1ZTest**
Date of Birth	**08/17/1940**
Age	
Ethnicity	
Sex	**M**

Cholesterol and Triglycerides (Lipid) Evidence-Based Measures

The current standards of care for cholesterol are based on the Third Report of the National Cholesterol Education Program (NCEP) Expert Panel on Detection, Evaluation and Treatment of High Blood Cholesteroal in Adults (Adult Treatmet Panel III Final Report- ATP-III)

ATP-III Classifications

Total Cholesterol

<200	desirable
200-239	borderline high
>240	high

LDL Cholesterol

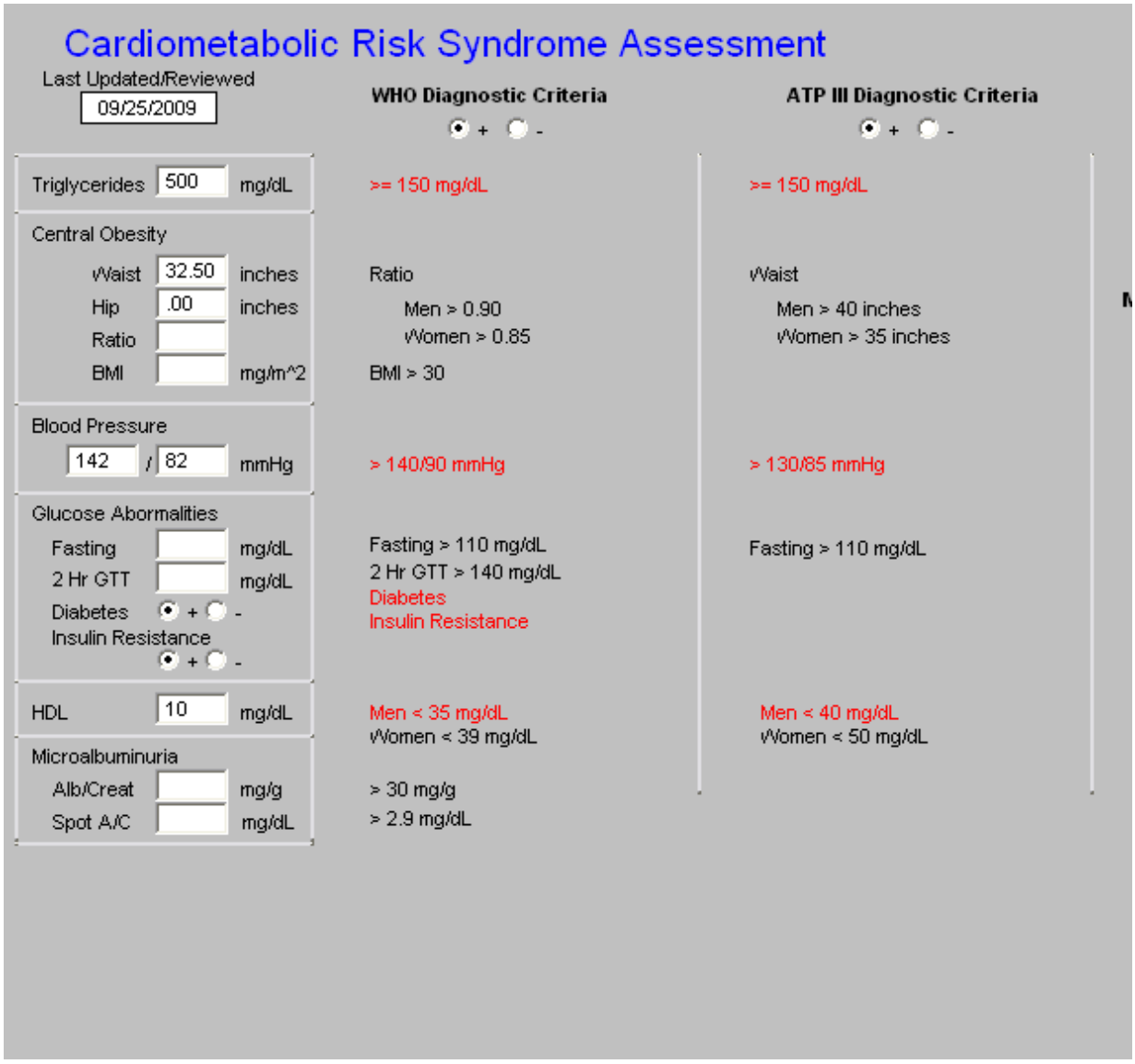
<100	optimal
101-129	near optimal/above optimal
130-135	borderline high
160189	high
>190	very high

Serum Triglycerides

<150	normal
151-199	borderlin high
200-499	high
>500	very high

3. Has the patient been assessed for the Cardio metabolic Risk Syndrome in the past year?

If the Risk Syndrome has not bee assessed in the past year, clicking on the button entitle d ”click to Assess” will launch the following template which will automatically assess the presence or absence of the Syndrome by both the World Health Organization’s definition and the ATP III definition.



4. If the Cardiometabolic Risk Syndrome is presence, is it listed as a Chronic Conditions?

If this fourth element is incomplete, depressing the button entitled n“Click to Add” will allow you to add the Cardiometabolic Risk Syndrome from SETMA’s ICD-9 Code list. You will find it by typing “Met” and the following will be displayed which can then be selected, “Met Cardiometabolic Risk Syndrome. The benefit of listing this syndrome is that this is one of the elements in the risk stratification of the Lipid Treatment plan. Others are noted below.

5. If the most recent LDL is >100 is the patient on a statin?

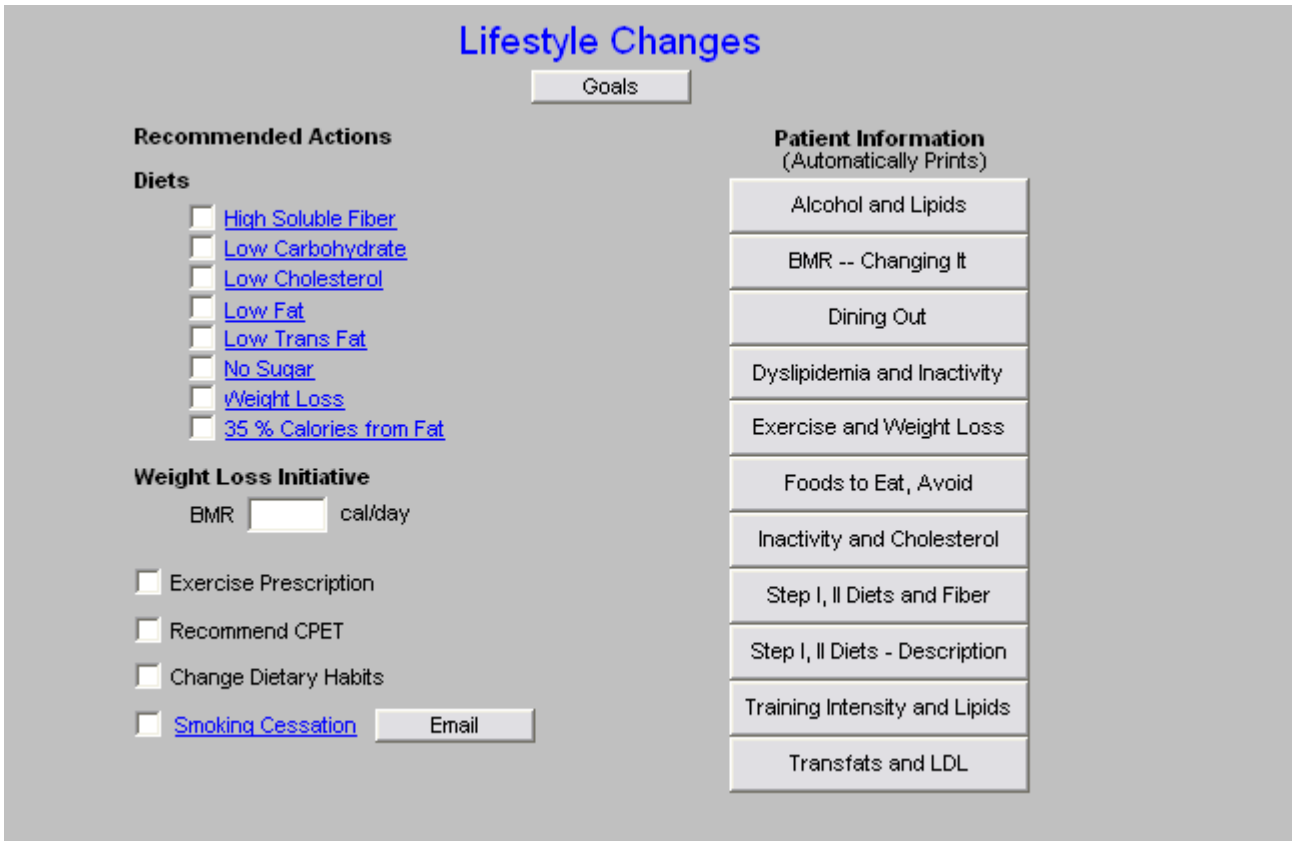
If this fifth element of SETMA’s data set is not complete, depressing the button entitled “Click to Add Med,” will allow you to select a statin for this patient. Once the statin is added to the medication list, a “follow-up call” message can be created by going to the Master GP Plan which will allow our nurse to call the patient about the new medication. If the patient’s pharmacy is known, it can be e-prescribed.

If the patient has diabetes, this element will be greyed out and another standard will be indicated below;

6. Have the following lifestyle changes been recommended if applicable? Stop Smoking, Exercise, Lose Weight, Low Cholesterol Diet, Low Carbohydrate Diet

If the LESS Initiative has been complied on this patient in the past two months (Lose Weight , Exercise, Stop Smoking) the first three elements will have been fulfilled. If the appropriate diet for this patient has been selected on the Lipid Life Style template, then all of these issues will have been completed.

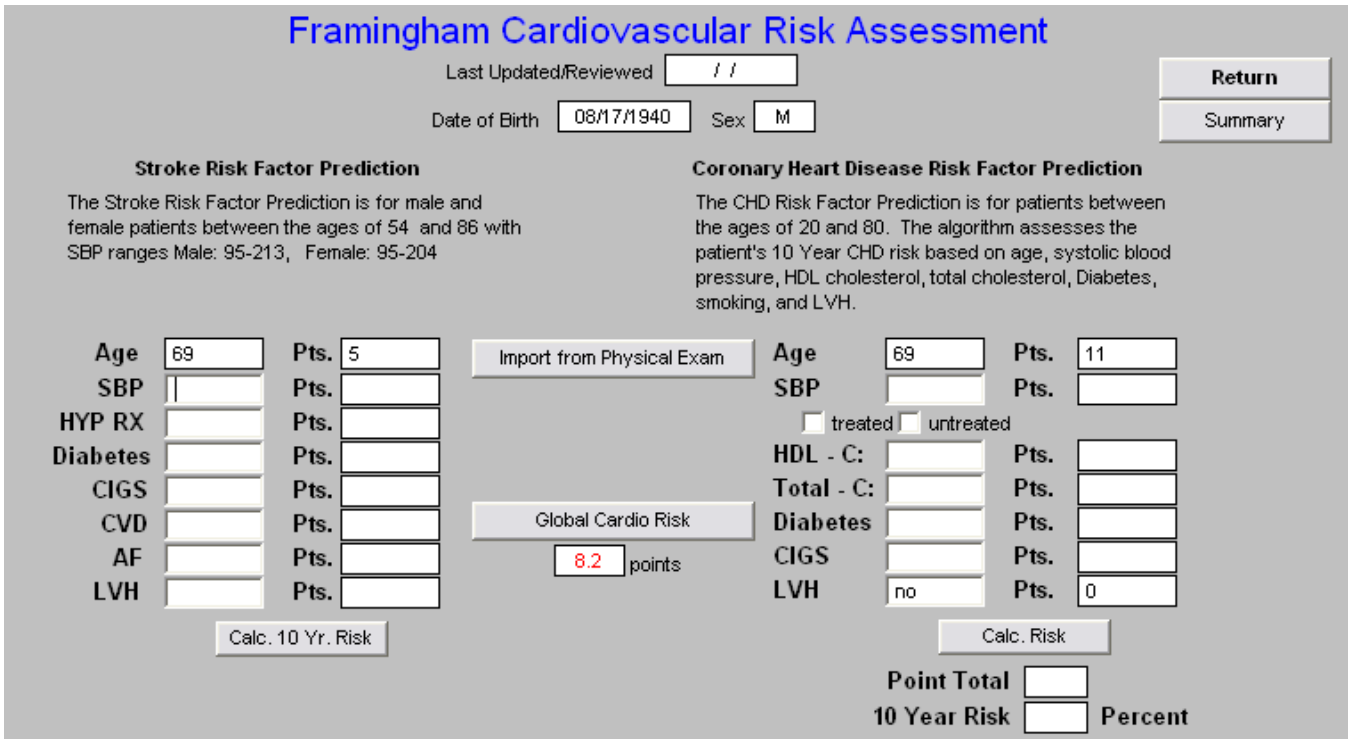
If any of the parts of this element have not been completed, completing the LESS Initiative from AAA Home, or the proper diet from the Lifestyle template will complete this element by depressing the “click to add” button which will launch the following:

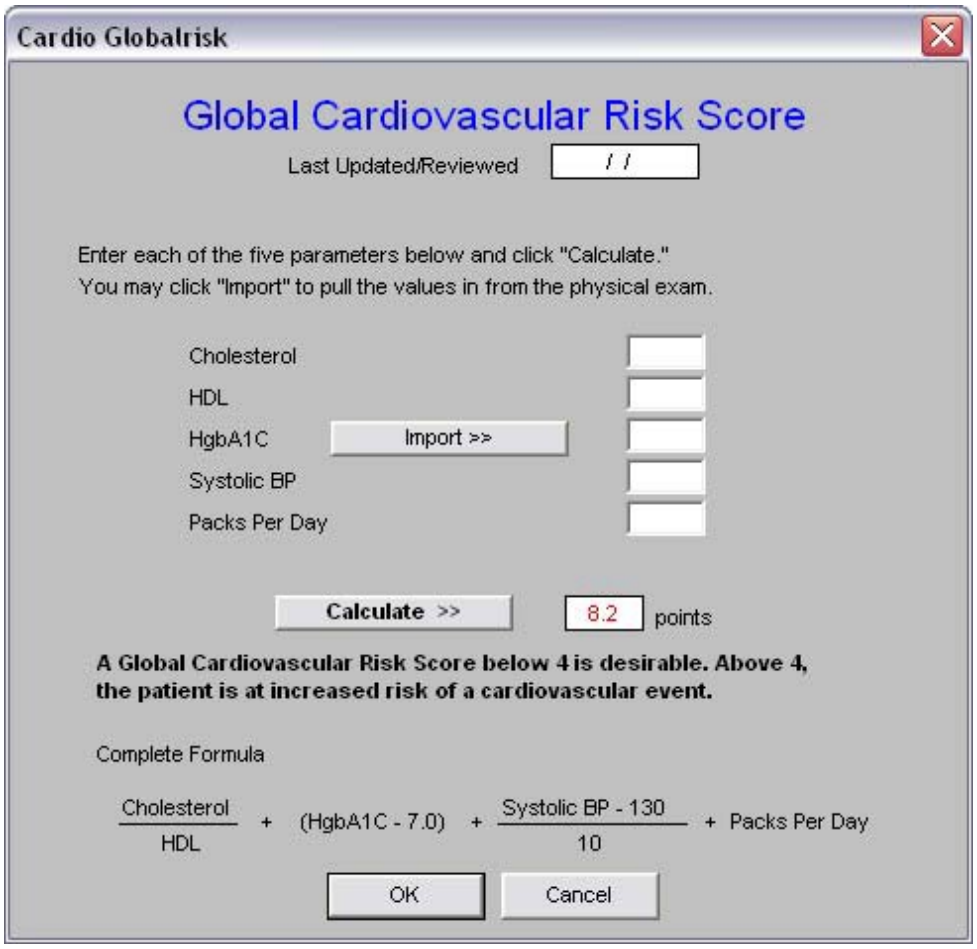


6. Has Risk Stratification for Lipids and Heart Disease been completed in the past year by using the Framingham Cardiovascular Risk Score and one of the following: Global Cardiovascular Risk Score, Fredrickson Classification of Dyslipidemia, or Lipid Disease Management Risk Assessment?

If the Framingham has not been completed, clicking on the button entitled "Click to update" will take you to the below where you can complete either the Framingham, or the Global Cardiovascular Risk score.

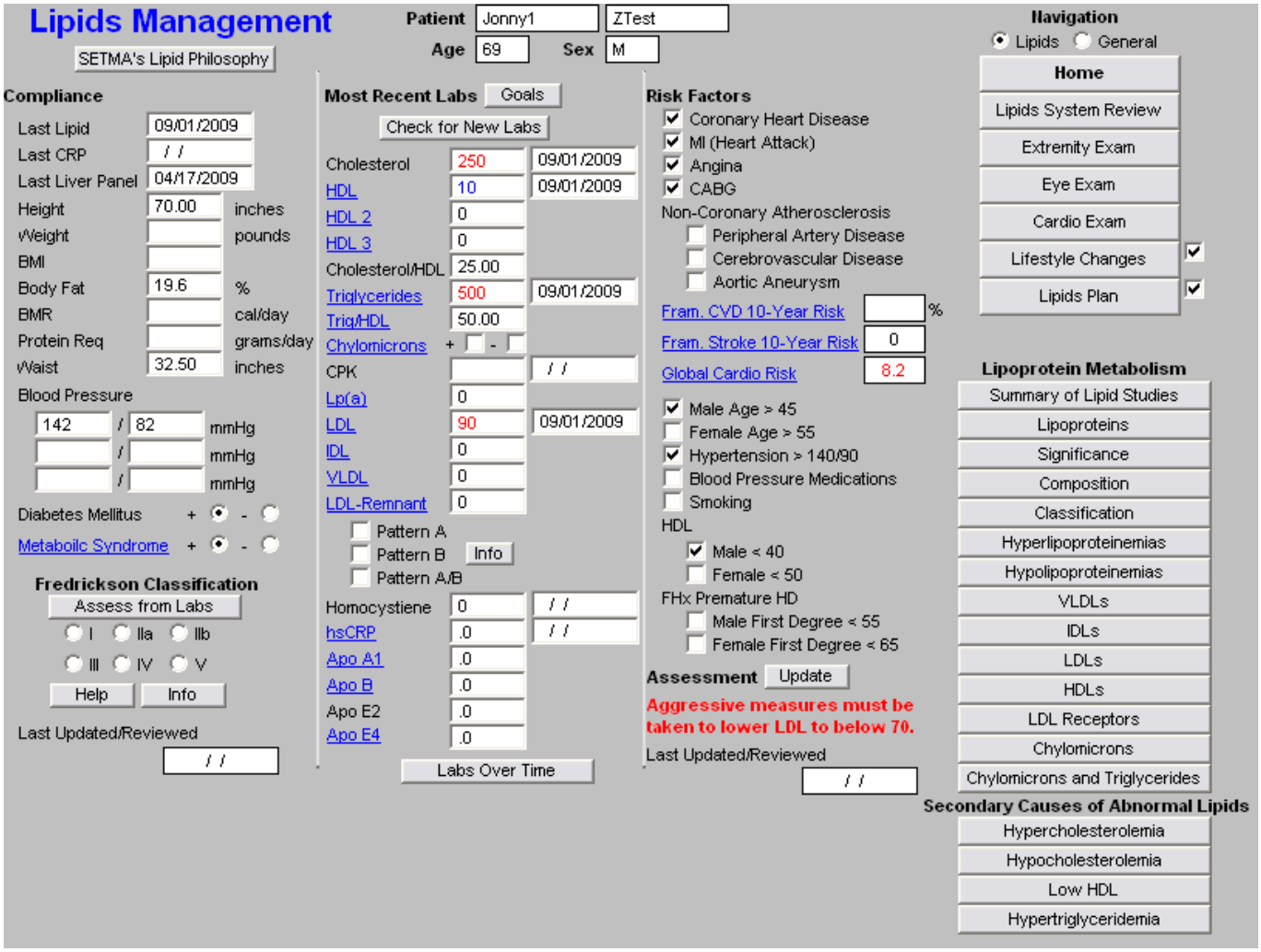
Both of these scores are developed from the Framingham Data, the only difference is the Global Score has eliminated the bias of the age and gender and added the glycohemoglobin rather than the presence or absence of Diabetes and Packs per day rather than the use or not of cigarettes.


Framingham Cardiovascular Risk Assessment
Last Updated/Reviewed / /
Date of Birth 08/17/1940 Sex M
Return
Summary
Stroke Risk Factor Prediction
The Stroke Risk Factor Prediction is for male and female patients between the ages of 54 and 86 with SBP ranges Male: 95-213, Female: 95-204
Coronary Heart Disease Risk Factor Prediction
The CHD Risk Factor Prediction is for patients between the ages of 20 and 80. The algorithm assesses the patient's 10 Year CHD risk based on age, systolic blood pressure, HDL cholesterol, total cholesterol, Diabetes, smoking, and LVH.
Age 69 Pts. 5
SBP Pts.
HYP RX Pts.
Diabetes Pts.
CIGS Pts.
CVD Pts.
AF Pts.
LVH Pts.
Calc. 10 Yr. Risk
Import from Physical Exam
Global Cardio Risk
8.2 points
Age 69 Pts. 11
SBP Pts.
treated untreated
HDL - C: Pts.
Total - C: Pts.
Diabetes Pts.
CIGS Pts.
LVH no Pts. 0
Calc. Risk
Point Total
10 Year Risk Percent


Cardio Globalrisk
Global Cardiovascular Risk Score
Last Updated/Reviewed / /
Enter each of the five parameters below and click "Calculate."
You may click "Import" to pull the values in from the physical exam.
Cholesterol
HDL
HgbA1C
Import >>
Systolic BP
Packs Per Day
Calculate >>
8.2 points
A Global Cardiovascular Risk Score below 4 is desirable. Above 4, the patient is at increased risk of a cardiovascular event.
Complete Formula
Cholesterol / HDL + (HgbA1C - 7.0) + Systolic BP - 130 / 10 + Packs Per Day
OK
Cancel

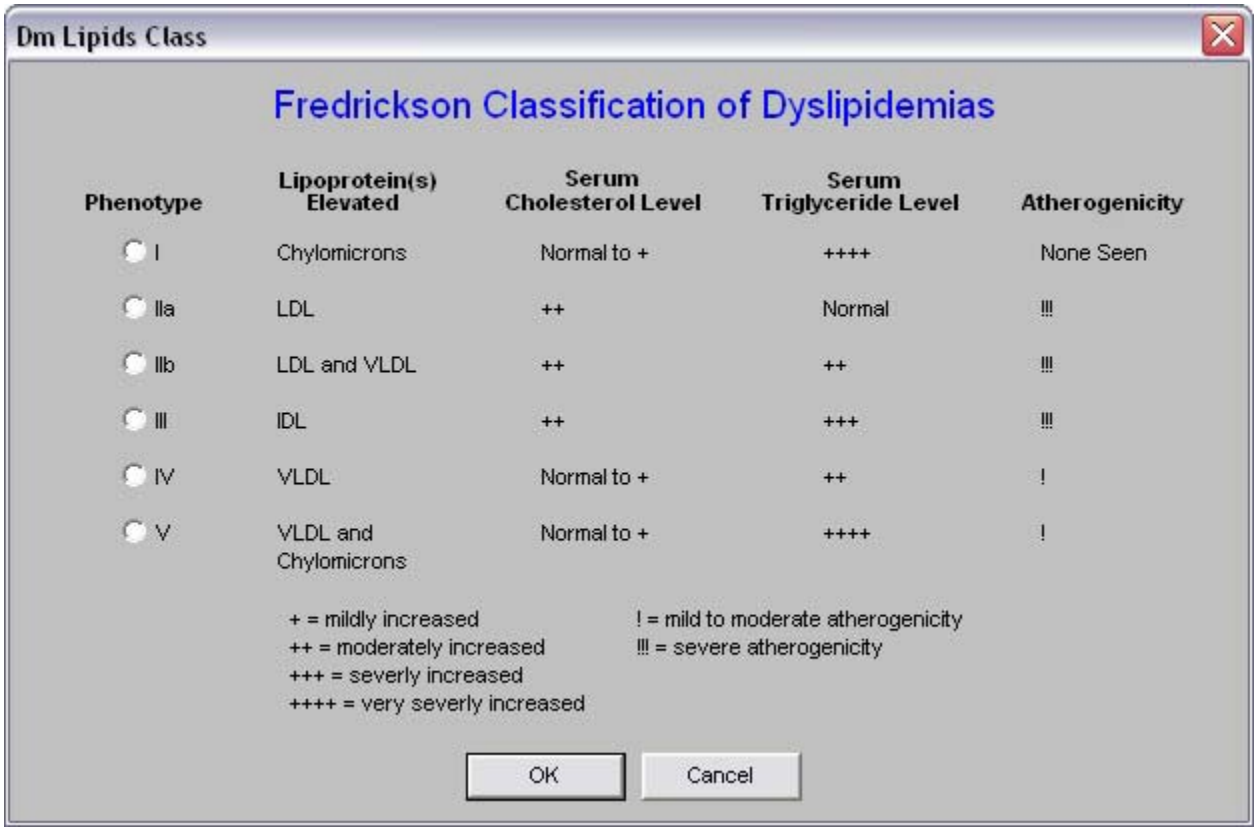
The Fredrickson Classification of Dyslipidemia can be completed by the assessment on the Master Lipid Disease Management Template. The Classification is automatically selected based on the lipid results but if treatment has been instituted may have to be manually selected.

You can locate the Frederickson Classification at the bottom of the first column on the template below. The classification will automatically calculated when you depress the button "Assess from Labs," but can be manually selected after treatment has been started.



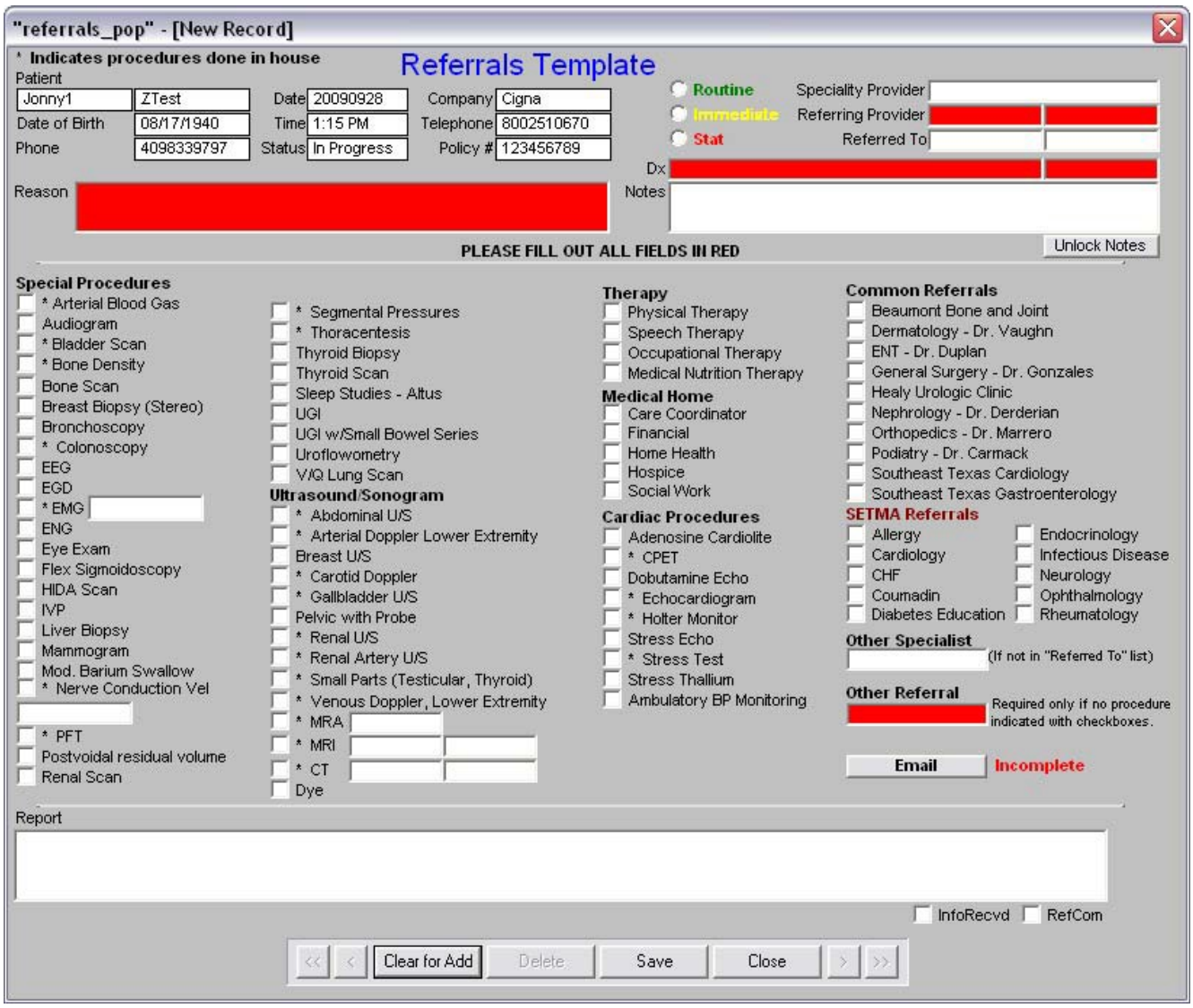
If you wish to review the details of the Classification which applies to the current patient, after select the Classification, depress the "Info" button and a document specific to that Frederickson Classification will be generated.

If you wish to review all of the Classifications and their relative atherogenicity, simple click on the left "help" button under Fredrickson Classification and the following will be displayed.



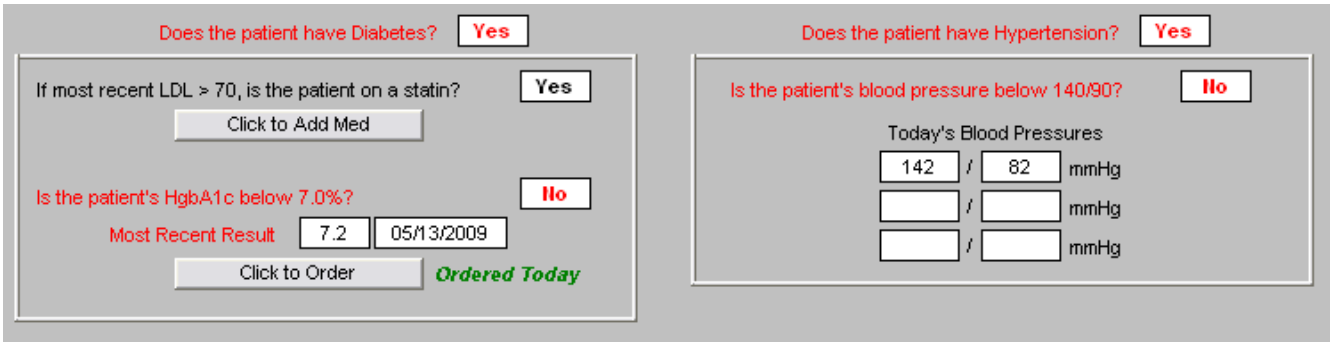
7. Has the patient been referred to Medical Nutrition Therapy at least once?

If the answer is no, it is possible to make a referral to MNT by double click on the referral template function to the right of this element. This displays the referral template as follows:



Medical Nutrition Therapy is found in the third column under “Therapy” and is the fourth item in that column under that heading.

At the bottom third of the Audit template are two options: one addresses whether the patient has diabetes and the other if the patient has hypertension.



8. Does the patient have diabetes?

If the answer is "yes," the following will be activated:

- If the most recent LDL is >70, is the patient on a statin?

  "Click to add Med" – this allows a statin to be ordered.

- Is the patient's most recent HgbA1C below 7.0%?

  "Click to Order" – this allows for a HgbA1C to be ordered

9. Does the patient have hypertension?

If the answer is "yes" the following will be activated

- Is the patient's blood pressure below 140/90?

  Displayed are three trials which will show the blood pressure for the current or most recent visit.