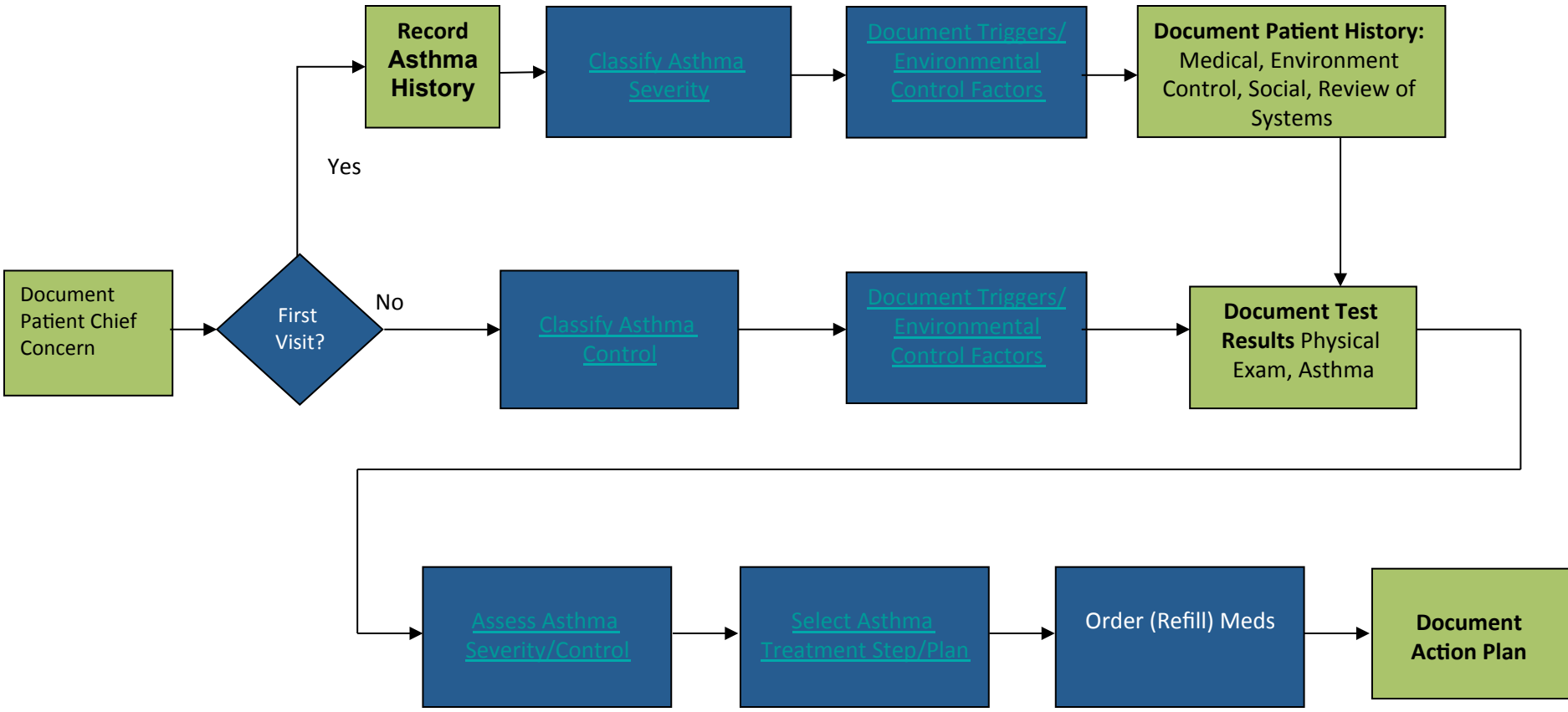


Yale - Asthma NHLBI EPR3 Work Flow



Document Patient Chief Concern

PEDSPEC CC: GARY5-11 ZGLIDES

Accompanied by:

Referred By: Refer MD City

Other Providers (cc:):

Chief Complaint

New Patient Respiratory History Questionnaire reviewed with patient/family

already received the flu vaccine.

CC	MedHx	ROS
EnvironHx	SocFamHx	PhysExam
Test	AsthmaClass	

Prev Form (Ctrl+PgUp) Next Form (Ctrl+PgDn) Close

Document Asthma History

PEDSPEC Asthma Medical HX: GARY5-11 ZGLIDES

Pulm Hx | Trigger/Sports | Meds | Hsp/Tests | PMH | PMH Continued

Pulmonary History
At what age did Breathing problems start? months years

Symptoms

Type of difficulty	<input type="checkbox"/> dry cough <input type="checkbox"/> wet cough <input type="checkbox"/> croupy cough <input type="checkbox"/> wheeze <input type="checkbox"/> tightness and/or pain in chest <input type="checkbox"/> shortness of breath <input type="checkbox"/> sputum production <input type="checkbox"/> heard by doctor	In which seasons does your child have these symptoms? <input type="checkbox"/> spring <input type="checkbox"/> summer <input type="checkbox"/> fall <input type="checkbox"/> winter
Onset:	<input type="radio"/> sudden <input type="radio"/> gradual	Symptoms occur: <input type="checkbox"/> at Home <input type="checkbox"/> at School
Duration	<input type="text"/>	
Nighttime	<input type="radio"/> 1-2 times/year <input type="radio"/> 1-2 times/month <input type="radio"/> more than twice a month <input type="radio"/> more than once a week <input type="radio"/> more than twice a week <input type="radio"/> nightly	Daytime <input type="radio"/> 1-2 times/year <input type="radio"/> 1-2 times/month <input type="radio"/> more than twice a month <input type="radio"/> more than once a week <input type="radio"/> more than twice a week <input type="radio"/> daily <input type="checkbox"/> with exercise
Other:	<input type="text"/>	Other: <input type="text"/>

Have symptoms progressed with age? No Yes

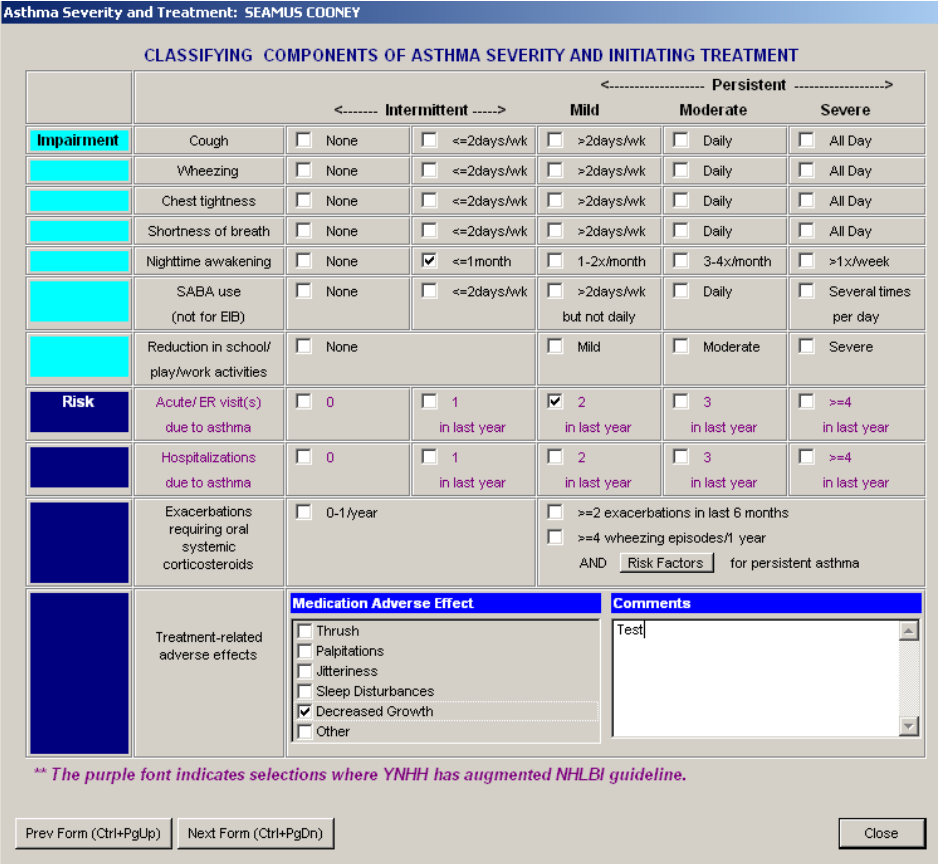
Number of days missed this year None

Last year None

CC | **MedHx** | **ROS**
EnvironHx | **SocFamHx** | **PhysExam**
Test | **AsthmaClass**

Classify Asthma Severity

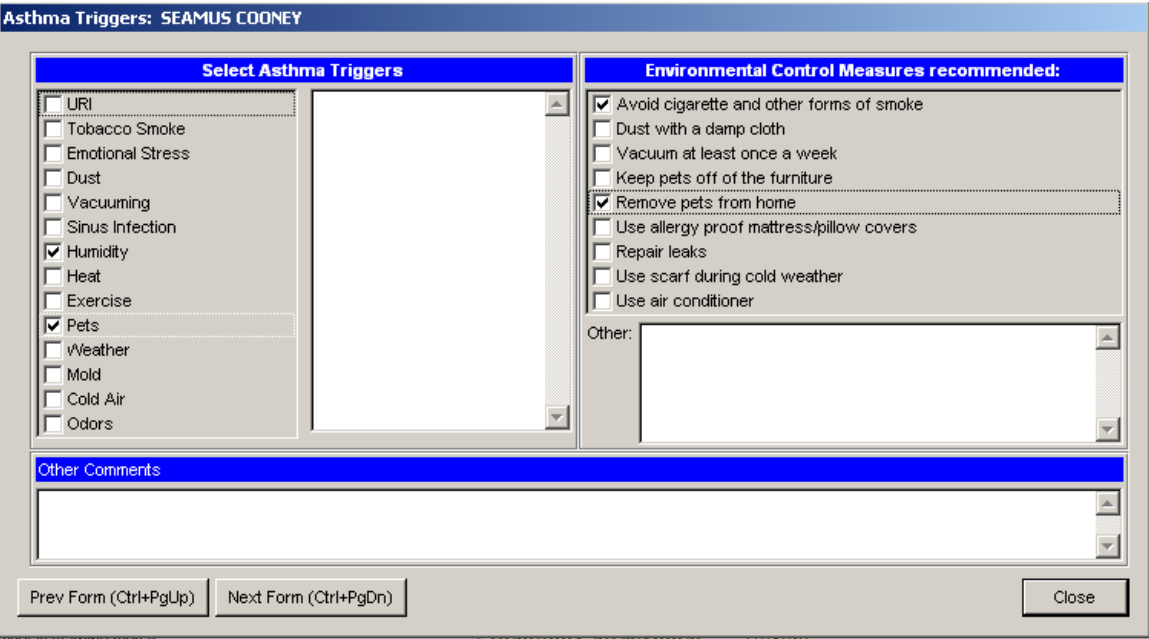
Intervention Specification:						
Desired Action:	Record asthma symptom frequency and other information to enable the CDS system to determine Asthma severity, based on a combination of impairment and risk.					
Workflow Context:	This intervention will be performed and recorded for a patient's first visit to the pediatric specialty clinic. Subsequent visits will capture and revise similar data to determine the patient's level of Asthma control.	Workflow Step:			Classify Asthma Severity	
		Specific CDS Intervention/ CIS Application:			Logician - Asthma Severity and Control Screens	
Specific Clinical Goal(s):	Improve patient education and empowerment	Improve patient satisfaction with care	Optimize decision making	Prevent errors of omission/ commission	Optimize treatment of chronic conditions	Improve documentation of care and communication
			X	X	X	X
Baseline Performance:			TBD	TBD	TBD	TBD
Target Performance:			TBD	TBD	TBD	TBD
Approach:	Documentation using prompts, radio buttons, check boxes and free text for impairment and risk factors. Information will be captured for: cough, wheezing, chest tightness, shortness of breath, nighttime awakenings, SABA use, reduction in school/play/work activities, acute/ER visits, hospitalizations, exacerbations requiring systemic corticosteroids and medication adverse effects. Information will vary slightly for ages 0 thru 4, 5 thru 11 and greater than 12 years of age and determination of asthma severity will operate in accordance with the NHLBI EPR3 Asthma guideline.					
Clinical Background:	Yale's Pediatric specialty decision support for asthma patients is being updated to incorporate NHLBI EPR3 guidelines for Asthma. Guideline recommendations for determining asthma severity, level of control, treatment step options and treatment plan details are being integrated into current workflows.					
Variations From Guideline:	GLIDES clarified specific gradations of number of acute ER visits and hospitalizations due to Asthma and their linkage to Asthma severity determination. GLIDES links these factors specifically to the severity assessment, and highlights adaptations of the NHLBI guideline in purple font on all screens.					
Selection Criteria:	All new patients with Asthma presenting to the Pediatric specialty clinic.			Target Population For Intervention:		Pediatric specialty clinic clinicians
User interface:	Tabular layout, with panels and check-boxes modeled after the NHLBI EPR3 guideline summary and presentations.					Severity – Ages 0-4
						Severity – Ages 5-11
						Severity – Ages >12
Monitoring and Evaluation:	LINK TO EVALUATION PLAN					
Jobs Expected To Be Affected:	All users of Centricity/Logician at the Pediatric specialty clinic.					
Possible Adverse Consequences Of Implementation:	Risk of inaccurate classification, limitation of data collection, and clinician "tunnel vision" through inappropriate dependence on computers for decision support.					
Primary Stakeholder(s)	All clinicians practicing at the Pediatric specialty clinic.			Clinical Champion(s):		Dr. Alia Bazy-Asaad Tina Tolomeo
Required Delivery Date	Implementation is required for October 2008, to ensure experience and feedback can be reported to AHRQ for November 2008.					

Developer Specification:	Classify Asthma Severity – Ages 0 thru 4				
CIS Application Affected:	Centricity	Intervention Type:	Data Entry smart form	Presentation Type:	Radio buttons, checkbox data entry, free text and hyperlinks.
Workflow Step:	Classify Asthma Severity		Specifically Triggered By:	New patient visit to pediatric specialty clinic.	
What (information presented):					Rules/Logic:
Who (user):	Yale SPC clinicians	Action Items:	Radio buttons allow users to select symptom characteristics that drive severity classification. Check-boxes and free text enable additional symptom information to be documented.		

Developer Specification:	Classify Asthma Severity – Ages 5 thru 11				
CIS Application Affected:	Centricity	Intervention Type:	Data Entry smart form	Presentation Type:	Radio buttons, checkbox data entry, free text and hyperlinks.
Workflow Step:	Classify Asthma Severity		Specifically Triggered By:	New patient visit to pediatric specialty clinic.	
What (information presented):				Rules/Logic:	
Who (user):	Yale SPC clinicians	Action Items:	Radio buttons allow users to select symptom characteristics that drive severity classification. Check-boxes and free text enable additional symptom information to be documented.		

Developer Specification:	Classify Asthma Severity – Ages 12 Or Greater				
CIS Application Affected:	Centricity	Intervention Type:	Data Entry smart form	Presentation Type:	Radio buttons, checkbox data entry, free text and hyperlinks.
Workflow Step:	Classify Asthma Severity		Specifically Triggered By:	New patient visit to pediatric specialty clinic.	
What (information presented):				Rules/Logic:	
Who (user):	Yale SPC clinicians	Action Items:	Radio buttons allow users to select symptom characteristics that drive severity classification. Check-boxes and free text enable additional symptom information to be documented.		

Intervention:	Record Triggers and Environmental Control Factors					
Desired Action:	Record additional asthma triggers and environmental control factors.					
Associated Interventions:	This intervention will be performed and recorded for a patient’s subsequent visits to the specialty clinic, to capture and revise information to determine the patient’s level of Asthma control.			Workflow Step:		Asthma Triggers and Environmental Control
				Specific CDS Intervention/ CIS Application:		Logician - Asthma Severity and Control Screens
Specific Clinical Goal(s):	Improve patient education and empowerment	Improve patient satisfaction with care	Optimize decision making	Prevent errors of omission/ commission	Optimize treatment of chronic conditions	Improve documentation of care and communication
				X		X
Baseline Performance:				TBD		TBD
Desired Outcome:				TBD		TBD
Approach:	Data Capture using prompting and check boxes for asthma triggers and environmental control factors. Trigger information will be captured for UR1, tobacco, emotional stress, dust, vacuuming, humidity, heat, exercise, pets, weather, mold and cold air. Environmental control information will be captured for smoke, dust, vacuuming, pets, drafts, weather, etc.					
Clinical Background:	Yale’s Pediatric specialty clinic workflows for asthma patients are being updated to incorporate NHLBI EPR3 guidelines for Asthma, as part of the GLIDES project. Guideline recommendations for determining asthma severity, level of control, treatment step options and treatment plan details are being integrated into current workflows.					
Variations From Guideline:	No variations from guidelines.					
Selection Criteria:	All new patients with Asthma presenting to the Pediatric specialty clinic.	Target Population For Intervention:			Pediatric specialty clinic clinicians	
Target Population for Intervention:	All visitors presenting to the Pediatric specialty clinic with Asthma symptoms.					
User interface:	Tabular layout, with panels and check-boxes modeled after the NHLBI EPR3 guideline summary and presentations.				Record Triggers/Controls	
Monitoring and Evaluation:	LINK TO EVALUATION PLAN					
Jobs Expected To Be Affected:	All users of Centricity/Logician at the Pediatric specialty clinic.					
Possible Adverse Consequences Of Implementation:	Risk of inaccurate classification, limitation of data collection, and clinician “tunnel vision” through inappropriate dependence on computers for decision support.					
Primary Stakeholder(s)	All clinicians practicing at the Pediatric specialty clinic.	Clinical Champion(s):			Dr. Alia Bazzy-Asaad Tina Tolomeo	

Developer Specification:	Record Triggers and Environmental Control Factors				
CIS Application Affected:	Centricity	Intervention Type:	Data Entry smart form	Presentation Type:	Checkbox data entry and free text
Workflow Step:	Record Triggers and Environmental Control Factors		Specifically Triggered By:	All patient visits to pediatric specialty clinic.	
What (information presented):					Rules/Logic:
Who (user):	Yale SPC clinicians	Action Items:	Check boxes allow users to select triggers and controls that enable additional information to be documented.		

Review of Systems

Review of Systems [Set All To Normal Limits](#) [Clear All](#)

General:	<input type="text"/>	Normal
Eyes:	<input type="text"/>	Normal
Ears/Nose/Throat:	<input type="text"/>	Normal
Cardiovascular:	<input type="text"/>	Normal
Respiratory:	<input type="text"/>	Normal
Gastrointestinal:	<input type="text"/>	Normal
Genitourinary:	<input type="text"/>	Normal
Musculoskeletal:	<input type="text"/>	Normal
Skin:	<input type="text"/>	Normal
Neurologic:	<input type="text"/>	Normal
Psychiatric:	<input type="text"/>	Normal
Endocrine:	<input type="text"/>	Normal
Heme/Lymphatic:	<input type="text"/>	Normal
Allergic/Immunologic:	<input type="text"/>	Normal

Additional Areas of Relevance/emphasis:

[Click to Add ROS to Letter:](#)

CC	MedHx	ROS
EnvironHx	SocFamHx	PhysExam
Test	AsthmaClass	

[Prev Form \(Ctrl+PgUp\)](#) [Next Form \(Ctrl+PgDn\)](#) [Close](#)

Environmental Control

Home | Home continued

Dwelling info

Changes to Dwelling Info? No Yes

How many occupants live in the home?

Age of home: yrs Location:

Type: single family home multi-family home apartment trailer

Other Type: owned rented

[Click to edit dwelling info:](#)

Changes to Environment? No Yes Comments:

Heating source: oil gas electric wood coal

Other:

Type of heating: forced air radiator-baseboard

Uses hepa filter/electrostatic air cleaner

Cooking: gas electric

Are there carpets in the home? No Yes

[Set all to No](#)

Kerosene stove: No Yes

Wood burning stove: No Yes

Fireplace: No Yes

Room AC: No Yes

Central AC: No Yes

Dehumidifier: No Yes

Humidifier/vaporizer: No Yes

Air cleaner/filter: No Yes

Cockroaches?: No Yes


Mold or mildew?: No Yes

[CC](#) [MedHx](#) [ROS](#) [EnvironHx](#)

[SocFamHx](#) [PhysExam](#) [Test](#) [AsthmaClass](#)

Prev Form (Ctrl+PgUp) Next Form (Ctrl+PgDn) [Close](#)

Social History

Social Hx | Family Hx | 

Social History

Mother
Mother's Name: Ethnic background:

Father
Father's Name: Ethnic background:

Occupants in household:

Occupants of household Occupations

mother
 father
 sister(s)
 brother(s)
 guardian(s)

Does your child attend daycare or school? No Yes

What are your child's favorite hobbies?

What sports/activities does your child participate in?

Click to add to Social History

CC	MedHx	ROS
EnvironHx	SocFamHx	PhysExam
Test	AsthmaClass	

Prev Form (Ctrl+PgUp) Next Form (Ctrl+PgDn) Close

Family History

PEDSPEC Asthma Family HX: GARY5-11 ZGLIDES

Social Hx **Family Hx**

Family History

Denies All

Problem(s)

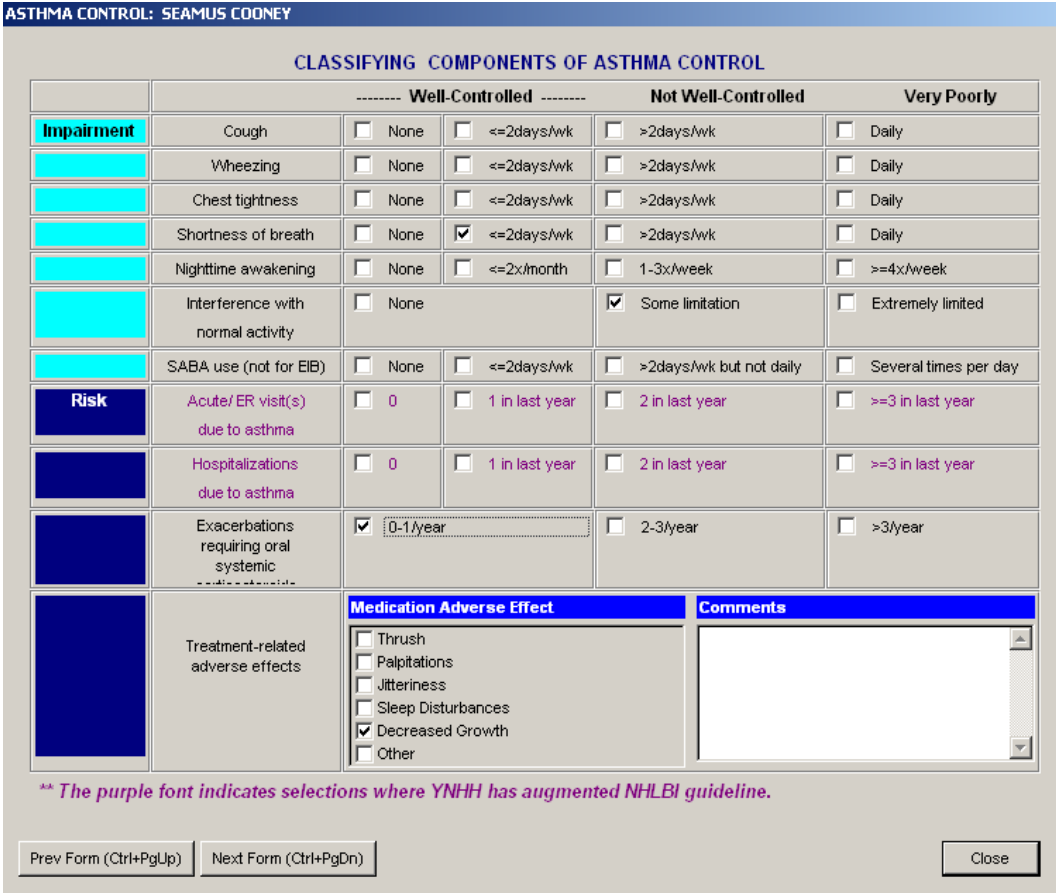
- asthma
- bronchitis
- allergies
- hay fever
- cystic fibrosis
- sinusitis
- other lung disease
- eczema
- breathing problems
- infertility

Click to add to Note

CC	MedHx	ROS
EnvironHx	SocFamHx	PhysExam
Test	AsthmaClass	

Prev Form (Ctrl+PgUp) Next Form (Ctrl+PgDn) Close

Classify Asthma Control						
Intervention:						
Desired Action:	Update asthma symptom frequency and other information to enable the CDS system to determine the level of Asthma control, based on a combination of impairment and risk.					
Workflow Context:	This intervention will be performed and recorded for a patient's follow-up visits to the pediatric specialty clinic. On their first visit, the patient's Asthma severity will have been assessed and recorded using a similar data capture and algorithm approach.			Workflow Step:		Classify Asthma Control
				Specific CDS Intervention/ CIS Application:		Logician - Asthma Severity and Control Screens
Specific Clinical Goal(s):	Improve patient education and empowerment	Improve patient satisfaction with care	Optimize decision making	Prevent errors of omission/ commission	Optimize treatment of chronic conditions	Improve documentation of care and communication
			X	X	X	X
Baseline Performance:			TBD	TBD	TBD	TBD
Desired Outcome:			TBD	TBD	TBD	TBD
Approach:	Data Capture using prompting and check boxes for impairment and risk factors. Information will be captured for: cough, wheezing, chest tightness, shortness of breath, nighttime awakenings, SABA use, reduction in school/play/work activities, acute/ER visits, hospitalizations, exacerbations requiring systemic corticosteroids and medication adverse effects. Information will vary slightly for ages 0 thru 4, 5 thru 11 and greater than 12 years of age and determination of asthma severity will operate in accordance with the NHLBI EPR3 Asthma guideline.					
Clinical Background:	Yale's Pediatric specialty decision support for asthma patients is being updated to incorporate NHLBI EPR3 guidelines for Asthma. Guideline recommendations for determining asthma severity, level of control, treatment step options and treatment plan details are being integrated into current workflows.					
Variations From Guideline:	GLIDES clarified specific gradations of number of acute ER visits and hospitalizations due to Asthma and their linkage to Asthma control determination. GLIDES links these factors specifically to the severity assessment, and highlights changes to the NHLBI guideline in purple font on all screens.					
Selection Criteria:	All follow-up patients with Asthma presenting to the Pediatric specialty clinic.		Target Population For Intervention:		Pediatric specialty clinic clinicians	
User interface:	Tabular layout, with panels and check-boxes modeled after the NHLBI EPR3 guideline summary and presentations.			Control – Ages 0-4		
				Control – Ages 5-11		
				Control – Ages >12		
Monitoring and Evaluation:	LINK TO EVALUATION PLAN					
Jobs Expected To Be Affected:	All users of Centricity/Logician at the Pediatric specialty clinic.					
Possible Adverse Consequences Of Implementation:	Risk of inaccurate classification, limitation of data collection, and clinician "tunnel vision" through inappropriate dependence on computers for decision support.					
Primary Stakeholder(s)	All clinicians practicing at the Pediatric specialty clinic.		Clinical Champion(s):		Dr. Alia Bazy-Asaad Tina Tolomeo	
Required Delivery Date	Implementation is required for October 2008, to ensure experience and feedback can be reported to AHRQ for November 2008					

Developer Specification:	Classify Asthma Control – Ages 0 thru 4			
CIS Application Affected:	Centricity	Intervention Type:	Data Entry smart form	Presentation Type: Radio buttons, checkbox data entry, free text and hyperlinks.
Workflow Step:	Classify Asthma Control		Specifically Triggered By:	Patient follow-up visit to pediatric specialty clinic.
What (information presented):				Rules/Logic:
Who (user):	Yale SPC clinicians	Action Items:	Radio buttons allow users to select symptom characteristics that drive control classification. Check-boxes and free text enable additional symptom information to be documented.	

Classify Asthma Control – Ages 5 thru 11

Developer Specification:	
CIS Application Affected:	Centricity
Workflow Step:	Classify Asthma Control
What (information presented):	

Intervention Type:	Data Entry smart form
Specifically Triggered By:	Patient follow-up visit to pediatric specialty clinic.

ASTHMA CONTROLS: RICHARD TEST

CLASSIFYING COMPONENTS OF ASTHMA CONTROL

	----- Well-Controlled -----	Not Well-Controlled	Very Poorly								
Impairment	Cough <input type="checkbox"/> None <input type="checkbox"/> ≤2days/wk <input type="checkbox"/> >2days/wk <input type="checkbox"/> Daily										
	Wheezing <input type="checkbox"/> None <input type="checkbox"/> ≤2days/wk <input type="checkbox"/> >2days/wk <input type="checkbox"/> Daily										
	Chest tightness <input type="checkbox"/> None <input type="checkbox"/> ≤2days/wk <input type="checkbox"/> >2days/wk <input type="checkbox"/> Daily										
	Shortness of breath <input type="checkbox"/> None <input type="checkbox"/> ≤2days/wk <input type="checkbox"/> >2days/wk <input type="checkbox"/> Daily										
	Nighttime awakening <input type="checkbox"/> None <input type="checkbox"/> ≤2x/month <input type="checkbox"/> 1-3x/week <input type="checkbox"/> ≥4x/week										
	Interference with normal activity <input type="checkbox"/> None <input type="checkbox"/> Some limitation <input type="checkbox"/> Extremely limited										
	SABA use (not for EIB) <input type="checkbox"/> None <input type="checkbox"/> ≤2days/wk <input type="checkbox"/> >2days/wk but not daily <input type="checkbox"/> Several times per day										
	FEV or peak flow <input type="checkbox"/> >80% predict: <input checked="" type="checkbox"/> 60-80% predicted <input type="checkbox"/> <60% predicted										
	FEV/FVC <input type="checkbox"/> >80% <input type="checkbox"/> 75-80% <input type="checkbox"/> <75%										
Risk	Acute/ ER visit(s) due to asthma <input type="checkbox"/> 0 <input type="checkbox"/> 1 in last year <input type="checkbox"/> 2 in last year <input type="checkbox"/> ≥3 in last year										
	Hospitalizations due to asthma <input type="checkbox"/> 0 <input checked="" type="checkbox"/> 1 in last year <input type="checkbox"/> 2 in last year <input type="checkbox"/> ≥3 in last year										
	Exacerbations requiring oral systemic corticosteroids <input type="checkbox"/> 0-1/year <input type="checkbox"/> ≥2/year										
	Treatment-related adverse effects	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="background-color: #4F81BD; color: white;">Medication Adverse Effect</th> <th style="background-color: #4F81BD; color: white;">Comments</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> Thrush</td> <td rowspan="6" style="vertical-align: top;"> <div style="border: 1px solid gray; height: 100px;"></div> </td> </tr> <tr> <td><input type="checkbox"/> Palpitations</td> </tr> <tr> <td><input type="checkbox"/> Jitteriness</td> </tr> <tr> <td><input type="checkbox"/> Sleep Disturbances</td> </tr> <tr> <td><input type="checkbox"/> Decreased Growth</td> </tr> <tr> <td><input type="checkbox"/> Other</td> </tr> </tbody> </table>	Medication Adverse Effect	Comments	<input type="checkbox"/> Thrush	<div style="border: 1px solid gray; height: 100px;"></div>	<input type="checkbox"/> Palpitations	<input type="checkbox"/> Jitteriness	<input type="checkbox"/> Sleep Disturbances	<input type="checkbox"/> Decreased Growth	<input type="checkbox"/> Other
Medication Adverse Effect	Comments										
<input type="checkbox"/> Thrush	<div style="border: 1px solid gray; height: 100px;"></div>										
<input type="checkbox"/> Palpitations											
<input type="checkbox"/> Jitteriness											
<input type="checkbox"/> Sleep Disturbances											
<input type="checkbox"/> Decreased Growth											
<input type="checkbox"/> Other											

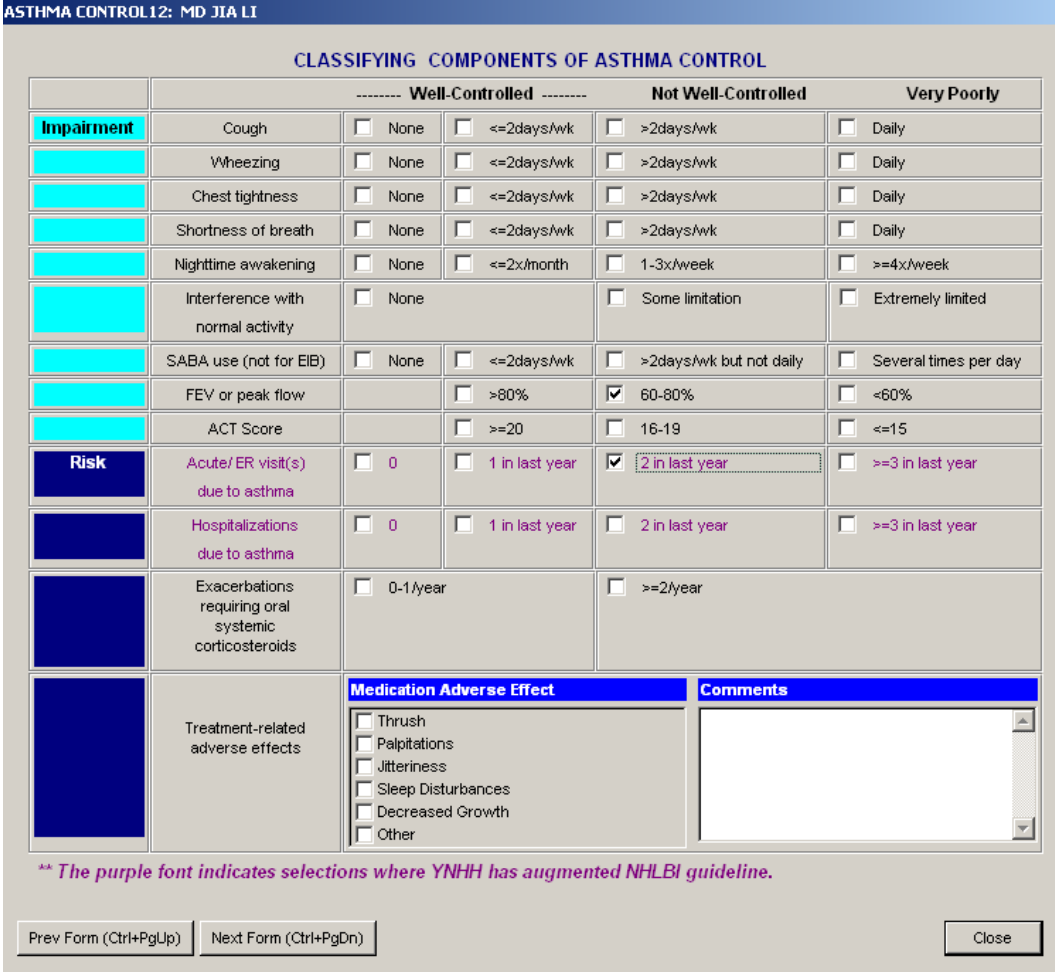
** The purple font indicates selections where YNH has augmented NHLBI guideline.

Presentation Type:	Radio buttons, checkbox data entry, free text and hyperlinks.
Rules/Logic:	

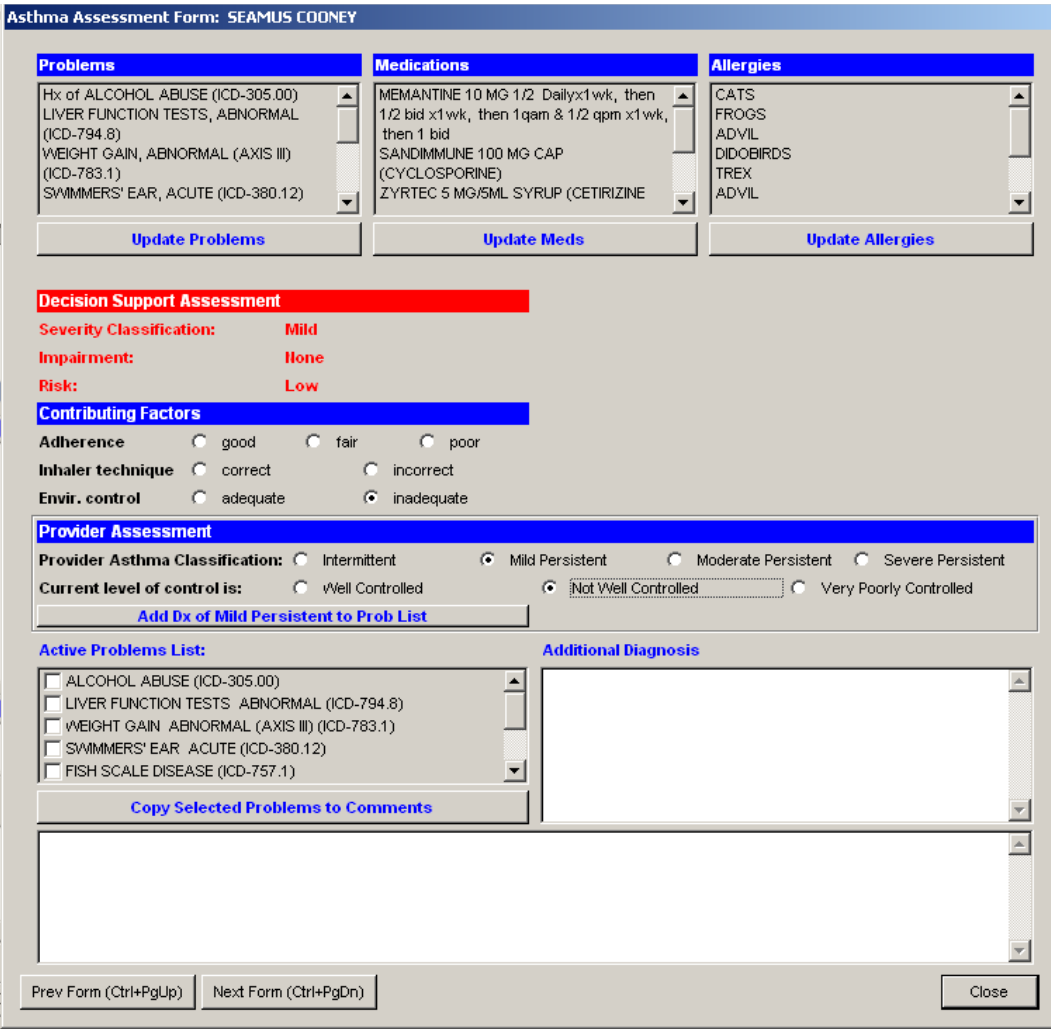
Who (user):	Yale SPC clinicians
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Action Items:	
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Radio buttons allow users to select symptom characteristics that drive control classification. Check-boxes and free text enable additional symptom information to be documented.

Developer Specification:	Classify Asthma Control – Ages 12 or Greater			
CIS Application Affected:	Centricity	Intervention Type:	Data Entry smart form	Presentation Type: Radio buttons, checkbox data entry, free text and hyperlinks.
Workflow Step:	Classify Asthma Control		Specifically Triggered By:	Patient follow-up visit to pediatric specialty clinic.
What (information presented):				Rules/Logic:
Who (user):	Yale SPC clinicians	Action Items:	Radio buttons allow users to select symptom characteristics that drive control classification. Check-boxes and free text enable additional symptom information to be documented.	

Intervention:							Assess Asthma Severity and Control													
Desired Action:							Review the decision support logic's determination of asthma severity and control, which is based on the results of prior data capture and the NHLBI guidelines. Enable the clinician to either select this recommendation or record an alternative assessment of severity and control, reflecting additional contributing factors													
Workflow Context:							This intervention will be performed and recorded for all patient's visits to the pediatric specialty clinic. Slight variations to processing logic for first-time and follow-up visits.							Workflow Step:			Assess Asthma Severity/Control			
														Specific CDS Intervention/ CIS Application:			Logician - Asthma Severity and Control Screens			
Specific Clinical Goal(s):		Improve patient education and empowerment		Improve patient satisfaction with care		Optimize decision making		Prevent errors of omission/ commission		Optimize treatment of chronic conditions		Improve documentation of care and communication								
						X		X		X		X								
Baseline Performance:						TBD		TBD		TBD		TBD								
Desired Outcome:						TBD		TBD		TBD		TBD								
Approach:							Data Capture using radio buttons for severity and control assessment factors and free text for comments and explanations of variance. Information will vary slightly for ages 0 thru 4, 5 thru 11 and greater than 12 years of age and determination of asthma severity will operate in accordance with the NHLBI EPR3 Asthma guideline.													
Clinical Background:							Yale's Pediatric specialty decision support for asthma patients is being updated to incorporate NHLBI EPR3 guidelines for Asthma. Guideline recommendations for determining asthma severity, level of control, treatment step options and treatment plan details are being integrated into current workflows.													
Variations From Guideline:							The NHLBI logic for determining asthma severity and control levels will be used to present the systems assessment to the clinician. However, the system will also enable the clinician to override this assessment in cases where there are clear variations between the guideline's determination and the patient's actual level of asthma severity and control.													
Selection Criteria:				All patients with Asthma presenting to the Pediatric specialty clinic.			Target Population For Intervention:			Pediatric specialty clinic clinicians										
User interface:							Tables, radio buttons and comment capture windows, an enhancement to existing Logician Asthma screens.			Assessment/First Visit Assessment/Follow-Up Visit										
Monitoring and Evaluation:							LINK TO EVALUATION PLAN													
Jobs Expected To Be Affected:							All users of Centricity/Logician at the Pediatric specialty clinic.													
Possible Adverse Consequences Of Implementation:							Risk of inaccurate classification, limitation of data collection, and clinician "tunnel vision" through inappropriate dependence on computers for decision support.													
Primary Stakeholder(s)				All clinicians practicing at the Pediatric specialty clinic.			Clinical Champion(s):			Dr. Alia Bazzy-Asaad Tina Tolomeo										
Required Delivery Date							Implementation is required for October 2008, to ensure experience and feedback can be reported to AHRQ for November 2008													

Developer Specification:	<h2 style="margin: 0;">Assess Asthma Severity/Control – All Ages/Initial Visit</h2>				
CIS Application Affected:	Centricity	Intervention Type:	Data Entry smart form	Presentation Type:	Radio buttons and free text
Workflow Step:	Assess Asthma Control		Specifically Triggered By:	Patient first-time visit to pediatric specialty clinic.	
What (information presented):					Rules/Logic:
Who (user):	Yale SPC clinicians	Action Items:	Radio buttons allow users to accept or override the CDS determination of severity and control classification, and also to capture comments		

Assess Asthma Severity/Control – All Ages/Follow-Up Visit					
Developer Specification:					
CIS Application Affected:	Centricity	Intervention Type:	Data Entry smart form	Presentation Type:	Radio buttons and free text
Workflow Step:	Assess Asthma Control		Specifically Triggered By:	Patient follow-up visit to pediatric specialty clinic.	
What (information presented):	<p>Asthma Assessment Form: SEAMUS COONEY</p> <p>Problems Hx of ALCOHOL ABUSE (ICD-305.00) LIVER FUNCTION TESTS, ABNORMAL (ICD-794.8) WEIGHT GAIN, ABNORMAL (AXIS III) (ICD-783.1) SWIMMERS' EAR, ACUTE (ICD-380.12)</p> <p>Medications MEMANTINE 10 MG 1/2 Dailyx1wk, then 1/2 bid x1wk, then 1qam & 1/2 qpm x1wk, then 1 bid SANDIMMUNE 100 MG CAP (CYCLOSPORINE) ZYRTEC 5 MG/5ML SYRUP (CETIRIZINE)</p> <p>Allergies CATS FROGS ADVIL DIDOBIRDS TREX ADVIL</p> <p>Decision Support Assessment Control Classification: Hot Well Controlled Impairment: Moderate Risk: Low</p> <p>Severity Classification Severity Classification Impairment: Risk:</p> <p>Control Classification Control Classification: Impairment: Risk:</p> <p>Contributing Factors Adherence <input type="radio"/> good <input type="radio"/> fair <input type="radio"/> poor Inhaler technique <input type="radio"/> correct <input type="radio"/> incorrect Envir. control <input type="radio"/> adequate <input type="radio"/> inadequate</p> <p>Provider Assessment Provider Asthma Classification: <input type="radio"/> Intermittent <input checked="" type="radio"/> Mild Persistent <input type="radio"/> Moderate Persistent <input type="radio"/> Severe Persistent Current level of control is: <input type="radio"/> Well Controlled <input type="radio"/> Not Well Controlled <input type="radio"/> Very Poorly Controlled Add Dx of Mild Persistent to Prob List</p> <p>Active Problems List: <input type="checkbox"/> ALCOHOL ABUSE (ICD-305.00) <input type="checkbox"/> LIVER FUNCTION TESTS ABNORMAL (ICD-794.8) <input type="checkbox"/> WEIGHT GAIN ABNORMAL (AXIS III) (ICD-783.1) <input type="checkbox"/> SWIMMERS' EAR ACUTE (ICD-380.12) <input type="checkbox"/> FISH SCALE DISEASE (ICD-757.1)</p> <p>Additional Diagnosis</p> <p>Copy Selected Problems to Comments</p> <p>Prev Form (Ctrl+PgUp) Next Form (Ctrl+PgDn) Close</p>				Rules/Logic:
Who (user):	Yale SPC clinicians	Action Items:	Radio buttons allow users to accept or override the CDS determination of severity and control classification, and also to capture comments		

Physical Exam

Physical Exam

Normal Gen, Eyes, Neck, CV, Abd, Extr, Neuro, Lymph

System

- Vital Signs
- General
- Head
- Eyes
- Ears
- Nose
- Throat
- Neck
- Chest
- Lungs
- CV
- Abd
- Extrem.
- Neuro
- Skin
- Lymph
- Tanner Stg

Findings:

Test Results

Test Results

Test Date Results Set all not entered to 'none'

PFT

FVC FEV1 FEV1/FVC FEF25-75 FEF Max

TLC RV RV/TLC

Post % change FVC FEV1 FEV1/FVC FEF25-75 FEF Max

DLCO MIP MEP

Respiratory therapist reviewed

Chest X-ray

Sputum:

staph
 H flu
 NI Flora
 Aspergillus

Psuedomonas nonmucoid
 Psuedomonas mucoid
 Psuedomonas MDR
 B cepacia
 Strentrophomonas maltophilia

Other

Other

CC	MedHx	ROS
EnvironHx	SocFamHx	PhysExam
Test	AsthmaClass	

Prev Form (Ctrl+PgUp) Next Form (Ctrl+PgDn) Close

Select Asthma Treatment Step/Plan					
Intervention:					
Desired Action:	Present appropriate steps for treatment of Asthma, based on previously determined severity and control information, and enable clinicians to select and initiate a treatment plan, or to adjust a prior treatment step/plan.				
Associated Interventions:	This intervention will be performed and recorded for a patient's first visit to the pediatric specialty clinic as well as subsequent visits.			Workflow Step:	Select Asthma Treatment Step
				Specific CDS Intervention/ CIS Application:	Logician - Asthma Severity and Control Screens
Specific Clinical Goal(s):	Improve patient education and empowerment	Improve patient satisfaction with care	Optimize decision making	Prevent errors of omission/ commission	Optimize treatment of chronic conditions
			X		X
Baseline Performance:			TBD		TBD
Desired Outcome:			TBD		TBD
Approach:	Decision support using presentation of Asthma treatment step options and selection by the clinician of an appropriate plan. Treatment step information will vary slightly for ages 0-4, 5-11 and greater than 12 years of age.				
Clinical Background:	Yale's Pediatric specialty clinic workflows for asthma patients are being updated to incorporate NHLBI EPR3 guidelines for Asthma, as part of the GLIDES project. Guideline recommendations for determining asthma severity, level of control, treatment step options and treatment plan details are being integrated into current workflows.				
Variations From Guideline:	Clinicians will be informed through an exception message if their selected treatment step differs from the NHLBI EPR3 Asthma guideline recommendations. Clinicians will be asked to document their reasons for variance.				
Selection Criteria:	All patients with Asthma presenting to the Pediatric specialty clinic.		Target Population For Intervention:	Pediatric specialty clinic clinicians	
User interface:	Charts and radio buttons, modeled after the NHLBI EPR3 Asthma guideline treatment plan, with comment boxes to enable variance selections to be documented.			Steps – Ages 0-4	
				Steps – Ages 5-11	
				Steps – Ages >12	
Monitoring and Evaluation:	LINK TO EVALUATION PLAN				
Jobs Expected To Be Affected:	All users of Centricity/Logician at the Pediatric specialty clinic.				
Possible Adverse Consequences Of Implementation:	Risk of inaccurate classification, limitation of data collection, and clinician "tunnel vision" through inappropriate dependence on computers for decision support.				
Primary Stakeholder(s)	All clinicians practicing at the Pediatric specialty clinic.		Clinical Champion(s):	Dr. Alia Bazyz-Asaad Tina Tolomeo	
Required Delivery Date	Implementation is required for October 2008, to ensure experience and feedback can be reported to AHRQ for November 2008				

Developer Specification:	Recommended Step For Asthma Management – Ages 0-4																																														
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