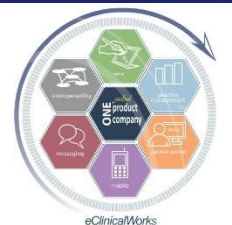


# Tips & Tricks for Primary Care Physicians

■ Bradley M. Block, M.D.

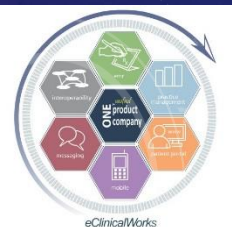


**eClinicalWorks**

**Bradley M. Block, M.D.**

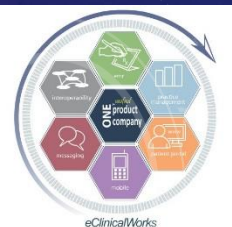
# Who Am I & Why Was I Asked to Speak?

- Family Physician in independently owned, four physician Family Medicine group in Oviedo, FL
- eCW User for 9 years
- “eClini-Geek” on the eCW Web User’s Forum for assisting users w/ eCW advice
- Beta test new modules & versions for eCW
- Attested for EHR MU in 2011 & for 2012



# Goals & Topics

- Provide Tips to More Efficiently Document Visits, Create Orders & Track ACO Patients
- Review Benefits of P2P



# Keep DX & CPT Coding Correct for Special Needs- Immunizations, Nurse Visits, etc.

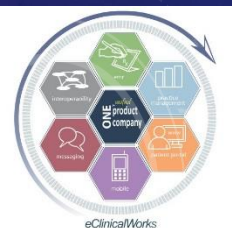
**Template List**

Templates

Facility

Category

Name	Access
Adacel/Boostrix Admin	Public
Flu 2012 for MEDICARE	Public
Flu 2012 PEDS 4&UP-B&N supply	Public
Flu 2012: ADULT, OUR SUPPLY	Public
FLU MIST 2012-HD ONLY, 2&up	Public
Flu Shot 2012 HD-3&up	Public
Flu SHOT 2012-HD: 6-36mos Lot	Public
Gardasil (<19yo) 1st or 2nd dose	Public
Gardasil (<19yo) 3rd dose	Public
Menactra vaccine	Public
Pneumovax - Medicare	Public
Pneumovax -non-medicare	Public
Zostavax - Medicare	Public
Zostavax Admin - non-medicare	Public
[xx]Flu 2012 for MEDICARE	Public





# Create Templates that can Mix & Match with others

**Copy And Merge Templates**

Template For  
Patient: Demo, Patient M Encounter Date: Wednesday, January 25, 2012

**Choose Template**

☒ Generic Category: My Favorites  
☐ Patient Specific Demo, Patient M Sel Relation

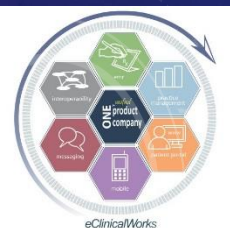
Find: [ ] Contains [Go]  
Facility: All [ ]

Pr	Template	Access
	Block - Influenza Screen with URI DX	Public
	Block - Intertriginous Dermatitis	Public
	Block - Labs -Abnml TSH	Public
	Block - Labs -Anemia W/u	Public
	Block - Labs -Elevated PSA	Public
	Block - Labs -high LFT f/u	Public
	Block - Labs -High MCV on RBC's	Public
	Block - Lateral Epicondylitis w/ Celestone Injxn	Public
	Block - LBP	Public
	Block - Male PE 18 - 39 yr	Public
	Block - Male PE over 40 yr	Public

☐ All Options

- ☐ CC
- ☒ HPI
- ☐ CurrentMedication
- ☐ MedicalHistory
- ☐ Allergies
- ☐ SurgicalHistory
- ☐ Hospitalization
- ☐ FamilyHistory
- ☐ SocialHistory
- ☒ RDS
- ☐ Vitals
- ☒ Examination
- ☒ PhysicalExam
- ☒ Assessment
- ☒ Treatment
- ☒ Procedures
- ☐ Ob History
- ☒ XRay
- ☒ Visit Code
- ☒ Labs
- ☒ PreventiveMedicine
- ☐ ...

Add As Favorite Merge Template Close



# Merge Info & Notes from Relatives

- Same Acute Illness
- Sibling Fam HX or Social HX

**Copy And Merge Templates**

**Template For**  
Patient: DEMO\*\*\*\*, PATIENT\*\*\*\*\* M      Encounter Date: Thursday, May 20, 2010

**Choose Template**

☐ Generic      Category: My Favorites

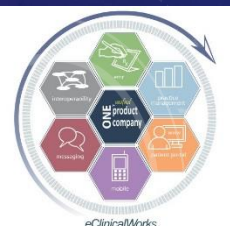
☒ Patient Specific      DEMO\*\*\*\*, PATIENT\*\*\*\*\* M      Sel: **Relation**

Find:      Facility: All

Pr	Date	Visit	Reason
	03/25/2010	O.V.	F/U ON MEDS
	01/13/2010	O.V.	
	11/27/2009	LONG O.V.	LAB F/U
	09/18/2009	W/I	test
	07/24/2009	PE	Pre OP PE
	07/15/2009	O.V.	Asthma

☐ All Options

- ☐ CC
- ☒ HPI
- ☐ CurrentMedication
- ☐ MedicalHistory
- ☐ Allergies
- ☐ SurgicalHistory
- ☐ Hospitalization
- ☐ FamilyHistory
- ☐ SocialHistory
- ☒ ROS
- ☐ Vitals
- ☒ Examination
- ☒ PhysicalExam
- ☒ Assessment
- ☒ Treatment



# Templates for Lab Orders w/ Specific DX

**Template List**

Templates:

Facility:

Category:

Name
Block - Labs -Abnml TSH
Block - Labs -Anemia W/u
Block - Labs -Annual DM,HTN,IGT,Lipids
Block - Labs -Coagulopathy W/U
Block - Labs -Diarrhea Stool Testing & TX plan
Block - Labs -Elevated PSA
Block - Labs -high Calcium
Block - Labs -high cortisol level
Block - Labs -high LFT f/u
Block - Labs -High MCV on RBC's
Block - Labs -low WBC/neutros f/u

## Assessment:

### Assessment: ▼

- Coagulopathy NOS - 286.9 (Primary)

## Plan:

### Treatment:

#### Coagulopathy NOS

Lab:-FACTOR V (LEIDEN) MUTATION ANALYSIS

Lab:-Prothrombin (Factor II) 20210G mutation

Lab:-PROTEIN S ACTIVITY (frozen)

Lab:-PROTEIN C ACTIVITY

Lab:-LUPUS ANTICOAGULANT EVALUATION WITH REFLEX

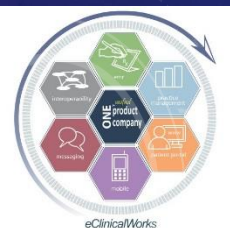
Lab:-Activated Protein C Resistance (APC) Screen

Lab:-Homocyst(e)ine, CARDIOVASCULAR SERUM

Lab:-ANTIPHOSPHOLIPID ANTIBODY PANEL (anticardiolipin AB's)

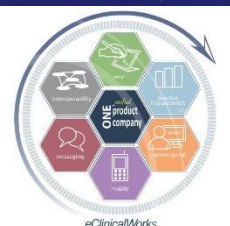
Lab:-Factor 8 activity

Lab:-AntiThrombin III Activity



# Use Order Sets for Orders Linked to Multiple Common DX's

Labs			Order	Browse
<input checked="" type="checkbox"/>	Description	Date	Status	
<input checked="" type="checkbox"/>	-CMP (comprehensive metabolic panel) w/GFR	05/25/2011	Ordered	
<input checked="" type="checkbox"/>	-HEMOGLOBIN A1C	05/25/2011	Ordered	
<input checked="" type="checkbox"/>	-CBC w Diff h/h,rbc,indc,wbc, w/ PLT	05/25/2011	Ordered	
<input checked="" type="checkbox"/>	-urine Random microalb/creat ratio	05/25/2011	Ordered	
<input checked="" type="checkbox"/>	U/A DIPSTICK (IN OFFICE)	05/25/2011	Ordered	
<input type="checkbox"/>	-urinalysis-microscopic on positives	11/17/2010	Other Actions	
<input checked="" type="checkbox"/>	-TSH (Thyroid Stimulating Hormone)	05/25/2011	Ordered	
<input checked="" type="checkbox"/>	-Uric acid	05/25/2011	Ordered	
<input checked="" type="checkbox"/>	-Lipid Panel (TChol,Trig,HDL,LDL)	05/25/2011	Ordered	
<input type="checkbox"/>	-NMR LipoProfile (labcorp only)	07/15/2009	Other Actions	





# Speed Up Treatment Plans for Less Common DX's with eCliniSense

**eCliniSense**

Patient Specific: ☐ Last Date: 2006-07-13 10:50:51.0

Assessment: Hypertension, Benign 401.1 Provider: Block, Bradley M

Rx ☒ Show Recent Rx ☐ Show Unique Rx ☐ Show All Rx

	Name	Strength	Formulation	Take	Route	Frequenc	Duration	Dispense	Re
<input checked="" type="checkbox"/>	Altace	5 mg		1 cap(s)	orally	Q am	90 days	90	3
<input checked="" type="checkbox"/>	Maxzide	50 mg-75		1 tab(s)	orally	Q am	90 day(s)	90	0
<input checked="" type="checkbox"/>	Lotensin	40 mg		1 tab(s)	orally	Q am	90 days	90	0
<input checked="" type="checkbox"/>	Lotensin HCT	20 mg-25		1 tab(s)	orally	Q am	90 day(s)	90	0
<input checked="" type="checkbox"/>	Zebeta	10 mg		1 tab(s)	orally	Q day	90 day(s)	90	1
<input checked="" type="checkbox"/>	Ziac	5 mg-6.2!		1 tab(s)	orally	Q am for	90 days	90	1
<input checked="" type="checkbox"/>	atenolol	50 mg		1 tab(s)	orally	q h.s. for	30 day(s)	x Has Sup	
<input checked="" type="checkbox"/>	Lotensin	10 mg		1 tab(s)	orally	Q am for	30 day(s)	30	0
<input checked="" type="checkbox"/>	Zebeta	5 mg		1 tab(s)	orally	Q HS for	30 day(s)	30	0
<input checked="" type="checkbox"/>	Ziac	5 mg-6.2!		1 tab(s)	orally	Q am for	90 days	90	0

**Labs**

- ☐ -Magnesium
- ☐ -CBC w Diff h/h,rb,c,indc,wbc, w/ PLT
- ☐ -urine Random microalb/creat ratio
- ☐ -CBC w/o Diff w/ PLT
- ☐ -Lipid Panel (TChol,Trig,HDL,LDL)
- ☐ U/A DIPSTICK (IN OFFICE)
- ☐ U/A DIPSTICK (IN OFFICE)
- ☐ -CMP (comprehensive metabolic panel) w/GFF

**Diagnostic Imaging**

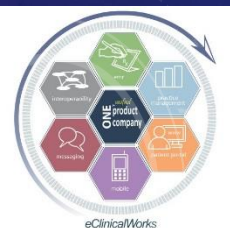
- ☐ Exercise Stress Test
- ☐ Adenosine Dual Nuclear Stress Test
- ☐ Adenosine Stress Test
- ☐ Echocardiogram
- ☐ Cardiac: Holter Monitor-24hr.(shower prior-no bath for 24
- ☐ Cardiac: Echocardiogram
- ☐ U/S : Abdomen
- ☐ Exercise Stress Thallium Test ( Dual Nuclear)

**Notes**

**Treatment Notes**

- ☐ Check BP regularly & call if BP's run high or if sx's or signs of high BP; weight loss; avoid caffeine, sodium, & EtOH; exercise as tolerated. , BP log , .Counseling done on risks/benefits/ advantages of patient's therapies & treatment options.
- ☐ .continue current therapy , .Counseling done on risks/benefits/ advantages of patient's therapies & treatment options. , Check BP regularly & call if BP's run high or if sx's or signs of high BP; weight lo avoid caffeine. sodium. & EtOH: exercise as tolerated.

Generate Hx By ☐ Id ☒ Code ☐ Group



# Use Demographics “Additional Info” Structured Data Screen to Track Special Info on Patients

- ACO Opt-In or Opt-Out
- Special Consents or Services
- Other Data

Patient Information( Demo, Patient M )

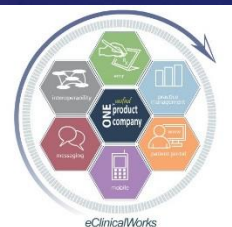
Demo, Patient M ☐ Don't Send Statements ☐ Inactive

General Information **Structured**

Misc Info Clear All

Name	Value		Notes
<input type="checkbox"/> Research HIPAA- Pt Consent	Yes	X	X
<input type="checkbox"/> Medicare ACO: Share Health	Yes	X	X
<input type="checkbox"/> Date Notified of ACO Particip	4/15/2013	X	X

Custom



# P2P - Transmit & Share Secure Patient Medical Information between Providers

- Real life example – Need to Send Info as 4 sets of faxes or Single P2P Transmission

**Referral (Outgoing)**

**Attachments**

☒ Attach Medical Summary ☒ Attach CCR/CCD (available only when sending via eCW P2P)

**Progress Notes**

Date	Reason
2012-10-09	Injection

**Lab Reports**

Name	Reason	Result
-Prolactin	Received -CPL (Cognoscenti)-Clinical Pat	Normal
-TSH (Thyroid Stimulating Hormone)	Received -CPL (Cognoscenti)-Clinical Pat	Normal
-T-3 UPTAKE (Triiodothyronine)	Received -CPL (Cognoscenti)-Clinical Pat	borderline high

**X-Rays**

Name	Reason	Result
------	--------	--------

**Patient Documents**

Document Name	Document Description
MRI BRAIN & Pituitary Gland 10/2012 CD1, Nor	
US THYROID 10/2012 Multiple Small Cysts & Hel	looks like we only have the thyroid u/s and not the pelvic. If she

**Diagnosis**

Code	Name
245.9	Thyroiditis NOS
611.6	GALACTORRHEA-NONOBSTET

**Procedures**

Code	Name
------	------

**How would you like to send the referral?**

☐ Print

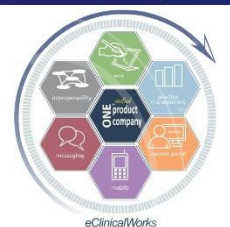
☐ Print with Attachments (25)

☐ Fax

☐ Fax with Attachments (25)

☒ Send instantly to ENDO- CF, Rickson, Neha via eCW P2P

OK Cancel Send Referral



# Need an Urgent Specialist Appt – P2P to the Rescue

## ■ P2P Referral – Scheduling Option

Received Date: 10/13/2012 Status: **Addressed**

Priority: Stat

**Diagnosis / Reason** Visit Details Notes Structured Data

**Reason** Add Browse Remove

Sl. No	Description
1	Need an Endoscopy (EGD) ASAP because of recent Melena and Hematemesis and care for chronic Gastritis

**Diagnosis** Previous Dx Add Remove

Code	Name
530.81	GERD - Gastroesophageal Reflux, No Esoph
578.0	Hematemesis
535.50	Gastritis, Unspecified, w/o Hemorrhage
530.12	Esophagitis, acute
578.1	Melena

**Procedures** Add Remove

Code	Name
------	------

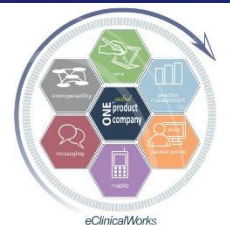
Scan Attachments (3) Logs OK Cancel Send Referral

**Send instantly to Shultz, Robert via eCW P2P**

☒ Schedule an appointment with Dr.Shultz, Robert and send the referral.

**Schedule & Send Referral**

☐ No thanks. Just send the referral now.





# P2P – Specialists Can Import CCR Data Directly & Accurately Into Chart

Medical Summary | CDSS | Alerts | Labs | DI | Procedures | Growth Chart | Immunization | Encounters | Patient Docs | Flowsheets | Notes

SF [dropdown] [dropdown] Bulleted [dropdown] Enc << V 05/31/2011 BMB test >>

**CCR**

**Current Medication:**

- lisinopril 20 mg tablet 1 tablet once a day
- Metformin 1000 mg tablet, extended release 1 tablet once a day
- Simvastatin 40 mg tablet 1 tablet each evening
- Aspirin Low Dose 81 mg enteric coated tablet 1 tablet once a day
- Multivitamin tablet 1 tablet once a day
- Citracal Caplets Plus D 315 mg-200 intl units or roughly equivalent amounts tablet 2 caplets twice daily with food
- Mucinex DM 30 mg-600 mg tablet, extended release 1 tab twice daily as needed for cough/congestion

**Medical History:**

- Diabetes since age 55
- Hyperlipidemia
- HTN
- Obesity

**Allergies/Intolerance:**

- aspirin

**Gyn History:**

**OB History:**

**Surgical History:**

- appendectomy 1972
- lap/choly 1998

**Hospitalization:**

**Family History:**

**Social History:**

Occupation: publisher.

**Problem List**

- 250.00 Diabetes Type II
- 401.9 HTN - Hypertension
- 272.4 Hyperlipidemia
- 259.9 Obesity

**Allergies**

- aspirin

**Medication**

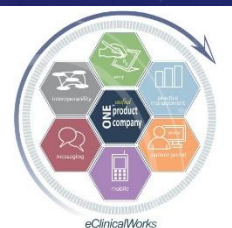
**Active Medications(Medications with...)**

- lisinopril 20 mg 1 tablet orally once a day
- metformin 1000 mg 1 tablet orally once a day
- simvastatin 40 mg 1 tablet orally each evening
- Aspirin Low Dose 81 mg 1 tablet orally once a day
- Multivitamin 1 tablet orally once a day
- Citracal Caplets Plus D 315 mg-200 intl units or roughly equivalent amounts 2 caplets orally twice daily with food
- Mucinex DM 30 mg-600 mg 1 tab orally twice daily as needed for cough/congestion

**InActive Medications**

**Documents**

- Referral
- Referral
- Referral
- Referral
- Referral
- Patient R





# Real Life Patient Case – Complex Med List – IDENTICAL

Restoril 30 mg capsule 1 caps at bedtime PRN sleep  
 Albuterol 0.083% solution solution 1 vial in nebulizer Q 4 hours PRN asthma  
 Elavil 150 mg tablet 1 tab(s) q hs for sleep & pain & ha's & anxiety once a day  
 Ipratropium 0.02% solution 1 vial mixed w/ albuterol or xopenex 4 times a day PRN asthma exacerbation  
 Combivent 90 mcg-18 mcg/inh aerosol with adapter 2 puff(s) QID PRN wheezing  
 OxyContin 30 mg from Neurologist tablet, extended release 1 tab(s) every 12 hours  
 Fioricet 325 mg-50 mg-40 mg from Neuro tablet 1 tab(s) Q4Hours PRN Headaches  
 Pepcid AC 10 mg tablet, chewable 1 tab(s) BID  
 Mag-Ox 400 400 mg tablet 1 tab(s) once a day OTC  
 Seroquel XR start up regimen tablet, extended release 50 mg 2 nights, then 100 mg 2-6 nights, then 150 mg each night (if boost is needed for anxiety) once a day (in the evening) 12 hours before wake up time (at least 3-4 hours before bedtime)  
 fluoxetine 40 mg capsule 1 cap(s) once a day  
 Inderal LA 120 mg capsule, extended release 1 cap(s) for bp & ha prevention & tremor once a day  
 Losartan 100 mg tablet 1 tab(s) for bp once a day  
 Metformin 500 mg tablet, extended release 2 tabs for blood sugar once a day  
 Crestor 10 mg tablet 1 tab for cholesterol once a day  
 Fiber Choice OTC Fiber tablet 1 to 3 tabs once a day to 2 times a day  
 Prilosec OTC 20 mg tablet, extended release 1 tab(s) BID  
 Xopenex 1.25 mg/3 ml solution 1 vial Q 4 hours PRN wheezing  
 Vitamin C 500 mg OTC 1 tab daily

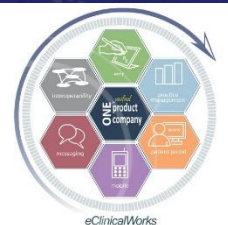
OxyContin tablet, extended release 30 mg from Neurologist 1 tab(s) every 12 hours  
 Combivent aerosol with adapter 90 mcg-18 mcg/inh 2 puff(s) QID PRN wheezing  
 Fluoxetine capsule 40 mg 1 cap(s) once a day  
 Inderal LA capsule, extended release 120 mg 1 cap(s) for bp & ha prevention & tremor once a day  
 Prilosec OTC tablet, extended release 20 mg 1 tab(s) BID  
 Fioricet tablet 325 mg-50 mg-40 mg from Neuro 1 tab(s) Q4Hours PRN Headaches  
 Mag-Ox 400 tablet 400 mg 1 tab(s) once a day OTC  
 Pepcid AC tablet, chewable 10 mg 1 tab(s) BID  
 Robaxin tablet 500 mg 1 tab(s) TID PRN muscle spasms  
 Advair Diskus powder 250 mcg-50 mcg 1 puff(s) as needed  
 Advil tablet 200 mg 2 to 3 tab(s) Qid PRN  
 Vitamin C 500 mg OTC 1 tab daily  
 elavil tablet 150 mg 1 tab(s) q hs for sleep & pain & ha's & anxiety once a day  
 Albuterol solution 0.083% solution 1 vial in nebulizer Q 4 hours PRN asthma  
 Crestor tablet 10 mg 1 tab for cholesterol once a day  
 Seroquel XR tablet, extended release 150 mg 1 tab(s) once a day (in the evening) 12 hours before wake up time (at least 3-4 hours before bedtime)  
 Restoril capsule 30 mg 1 caps at bedtime PRN sleep  
 Aspirin enteric coated tablet 650 mg 1 tab(s) as needed



# Real Life Patient Case – Complex Med HX – IDENTICAL – P2P should be called Peer = Peer

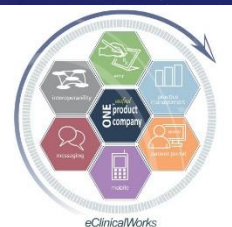
Smoker  
hypertension w/ ECHO +borderline LVH 11/08-WPMH  
Fibromyalgia  
headache-tension, muscle, migranes, analgesic rebound HA's CDTT  
Ha's-- DR Rosenthal  
high LDL's 181,223 w/high # particles = pattern B  
High cholesterol 330,270,218,285  
high TG's 462,257,237,170  
Asthma, ( moderate, intermittent ) COPD  
IGT w/ Metabolic Syndrome  
Depression, Anxiety D/O, Bipolar DO, Insomnia - all chronic, major  
FMS  
GERD, NSAID Gastritis  
Lumbar & Cervical Spondylosis 2/07-Epidural Blocks & Trigger Point  
injections  
S/P Thoracic Rhizotomies ~12/07 Dr Melvin  
lumbar DJD/synovitis  
s/p L5-S1 Laminectomy, decompression, + fusion 1/00  
L-4-L-5 spinal stenosis, s/p epidural Blks + s/p Rhizotomies X 3  
Mild obstructive sleep apnea & absent Delta sleep on CPap Rx  
Osteopenia - Spine; improved slightly 2009 WCR  
Vitamin D Deficiency  
chronic micro hematuria, s/p Nml Urol Eval'95  
SUI & Overactive Bladder  
Tachycardia, chronic x years, probably 2' pain and OTC TX's and BP  
issues  
Chest CT 11/08 Pulm Nodules w/ pathologic LN's, but stable over 2  
years Dr Layish

Smoker  
hypertension w/ ECHO +borderline LVH 11/08-WPMH  
Fibromyalgia  
headache-tension, muscle, migranes, analgesic  
rebound HA's CDTT Ha's-- DR Rosenthal  
high LDL's 181,223 w/high # particles = pattern B  
High cholesterol 330,270,218,285  
high TG's 462,257,237,170  
Asthma  
IGT w/ Metabolic Syndrome  
Depression, Anxiety D/O, Bipolar DO, Insomnia - all  
chronic, major  
FMS  
GERD, NSAID Gastritis  
Lumbar & Cervical Spondylosis 2/07-Epidural Blocks  
& Trigger Point injections  
S/P Thoracic Rhizotomies ~12/07 Dr Melvin  
lumbar DJD/synovitis  
s/p L5-S1 Laminectomy, decompression, + fusion 1/00  
L-4-L-5 spinal stenosis, s/p epidural Blks + s/p  
Rhizotomies X 3  
Mild obstructive sleep apnea & absent Delta sleep on  
CPap Rx  
Osteopenia - Spine; improved slightly 2009 WCR  
Vitamin D Deficiency  
chronic micro hematuria, s/p Nml Urol Eval'95  
SUI & Overactive Bladder  
Tachycardia, chronic x years, probably 2' pain and  
OTC TX's and BP issues  
Chest CT 11/08 Pulm Nodules w/ pathologic LN's, but  
stable over 2 years Dr Layish



# Take Home Message

- Make Better Use eCW Capabilities to Improve Efficiency & Documentation



**eClinicalWorks**

**Bradley M. Block, M.D.**