

Structured Report Designed for Transitional Care of Acute Myocardial Infarction Patients

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BACKGROUND

Care Transitions are vulnerable times for patients who are already vulnerable

- High risk for medication errors, missing diagnostic tests, adverse drug events and increased readmissions^{1,2}
- Sharing patient information in an organized manner increases effectiveness and improves safety³
- Poor communication contributes to errors during transition³
- Discharge summary is absent at the 2 week follow up 34-42% of the time³
- Research indicates improved transitions improve outcomes, satisfaction, patient comprehension, and decreases healthcare costs⁴

Electronic medical records can increase care coordination, improve quality, efficiency, and care coordination⁵

- Structured reports are standardized, organized, and provide retrievable information⁶
- The report should include: medication changes, duration of treatments, pending tests, follow-up care, pertinent testing and diagnostic information^{6,7}

PURPOSE

The project developed a prototype structured report called "Synopsis" within the electronic medical record to augment the discharge summary which may improve communication between in and outpatient providers.

RESEARCH QUESTION

In the post myocardial infarction patient, what care elements should be provided to the primary care provider in order to improve the quality of the care transition from the hospital to the outpatient follow-up appointment?

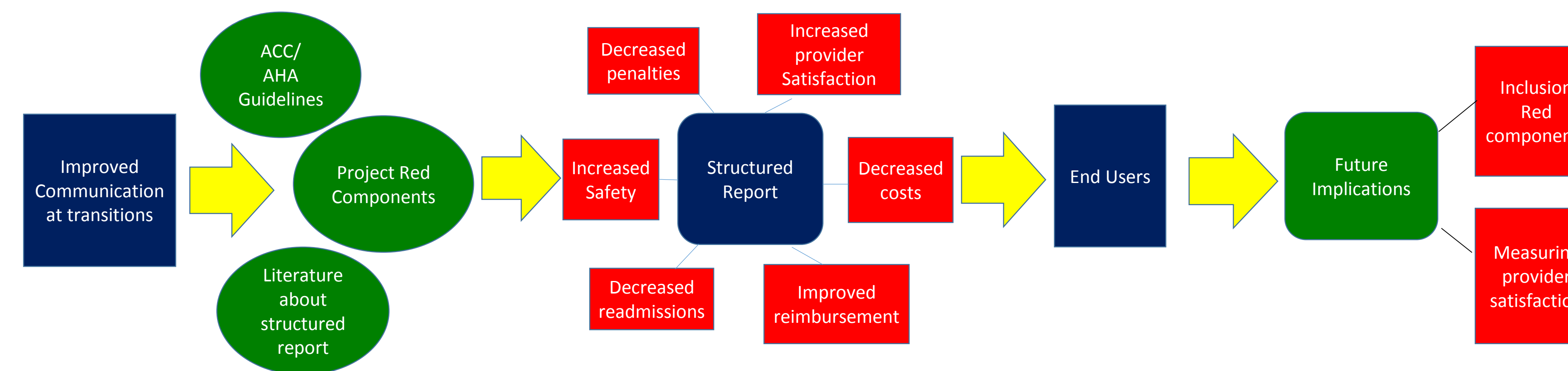


METHODS

Project RED or Re-Engineered Discharge

- Developed to impact key discharge principles and reduce readmissions
- Goal is to unify and define discharge processes, decrease adverse events, and readmissions⁸

Model of EBP Change Proposed to the EMR



Evidence Based elements included in report were based on AHA/ACC Guidelines

- Coronary link - cath lab procedures
- EKG link – ischemic and other arrhythmias
- ECHO link – Assess ventricular dysfunction
- Lifestyle management & referrals
 - Cardiac Rehab
 - Dietary
 - Diabetic Educator
- Discharge link – to DC summary
- Pharmacological Treatment
 - ACE/ARB
 - Statin
 - Beta Blocker
 - Aspirin
 - Platelet inhibitor if stented
- Laboratory links – co morbid conditions
 - CMP
 - CBC
 - HgbA1c
 - Troponin
 - Lipids



DESIGN OF REPORT

A prototype of the synopsis report was developed and will be submitted to the Systems Intake Committee

Summary	Synopsis View AMI	3/5/16	Laboratory Trends
Chart Review	HGB-A1C	7.9 (H)	
Results Review	Lipid Panel	TI 185	
		LDL 93	
		HDL 50	
		TG 164 (H)	
	Troponin	3.4 ng/ml (H) peak value	
	CMP link	3/3/16	
	Medication Link	3/4/16	
	EKG link	3/4/16	
	Cardiac Cath Link	3/3/16	
History	ECHO Link	3/4/16	
Notes	Discharge summary link	3/5/16	
	Referral to Cardiac Rehab	3/5/16	
	Referral to Endocrinology	3/5/16	

Implications for Nursing

Practice: Project aimed at improving patient safety, provider satisfaction, and decreased readmissions

Education: Education would be required to affected End Users including outpatient providers, nursing in outpatient offices, nurses in outpatient cardiac rehab

Policy: SBAR written

Research: Assessment of implementation process, inclusion of all Project Red criteria and retest, replication with other cardiac diagnoses

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