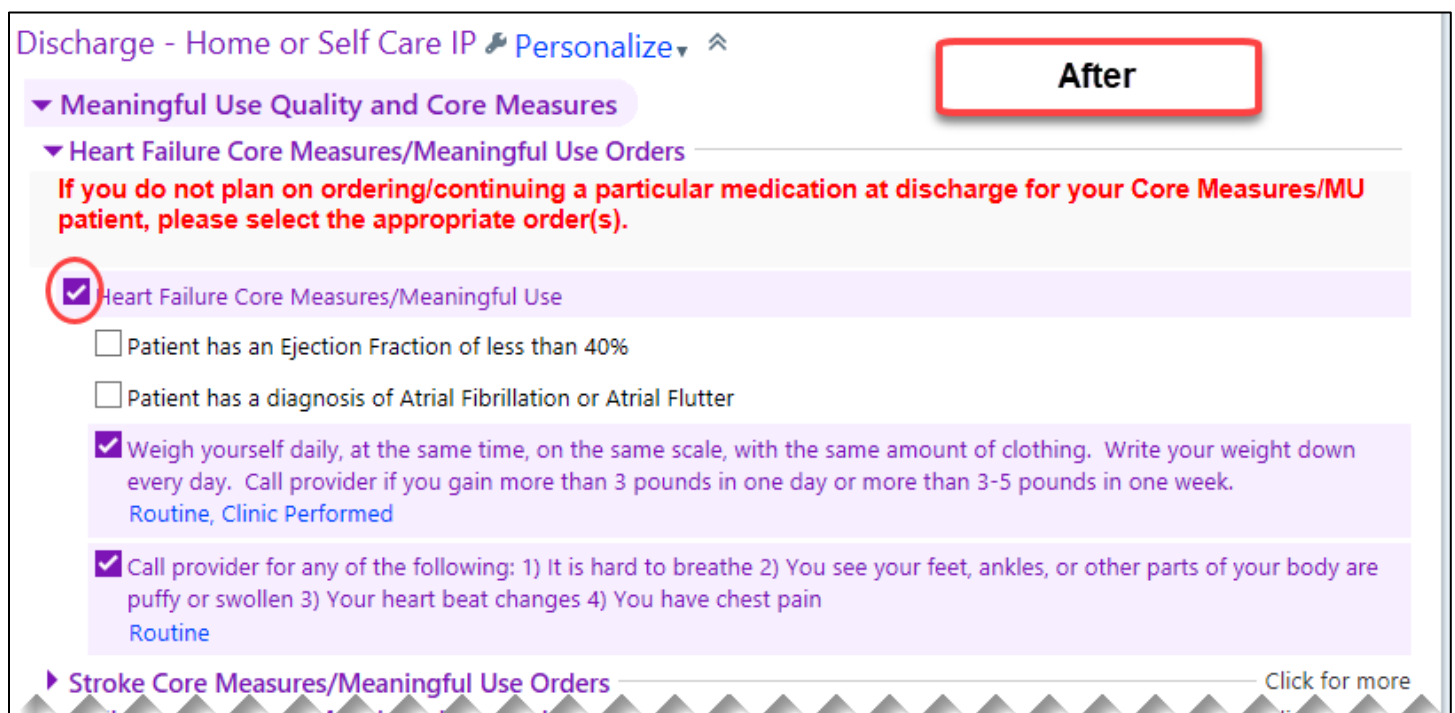
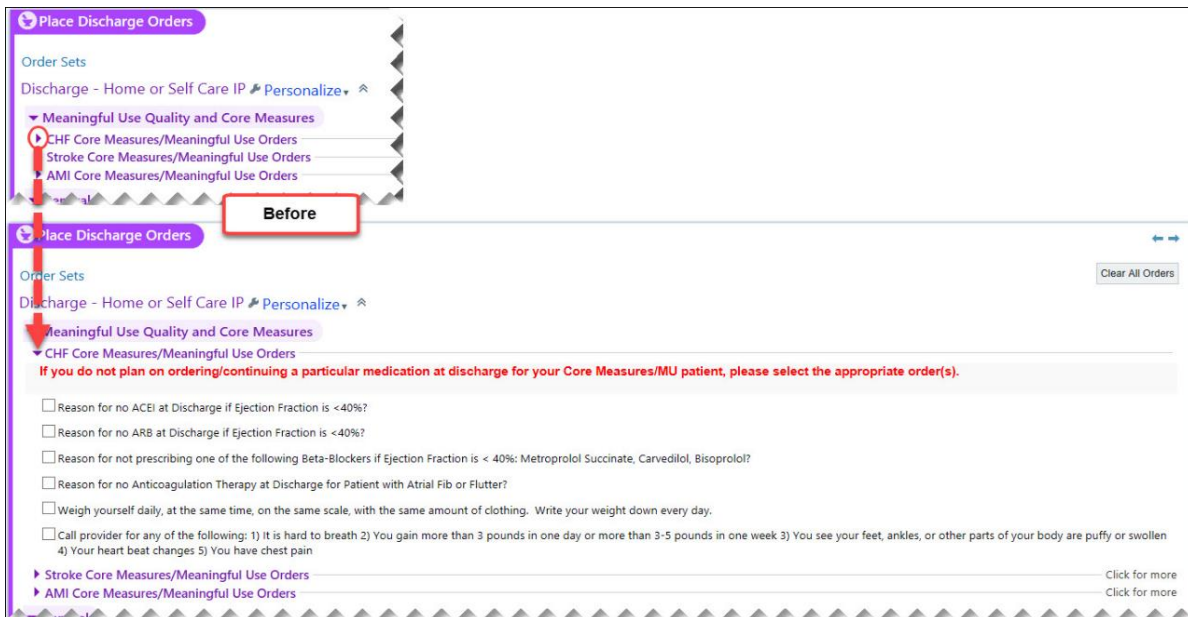


EPIC SYSTEM UPDATE

Overview of Feature / Changes

For patients with **heart failure** documented on their **Problem List** or in their **Medical History**, the **Heart Failure Core Measures** order group will be **expanded by default** in the **Discharge - Home or Self Care IP Order set**. This change is **effective as of Monday February 24, 2020** in addition to a few other changes to the order set to streamline ordering for heart failure at discharge.



Continued...

Heart Failure Core Measures

The Core Measures have been **reorganized to include all of the Weight Instructions** in one measure versus being included within the Call Provider Measure.

▼ CHF Core Measures/Meaningful Use Orders

If you do not plan on ordering/continuing a particular medication at discharge for your Core Measures/MU patient, please select the appropriate order(s).

Reason for no ACEI at Discharge if Ejection Fraction is <40%

Reason for no ARB at Discharge if Ejection Fraction is <40%

Reason for not prescribing one of the following Beta-Blockers if Ejection Fraction is < 40%: Metoprolol Succinate, Carvedilol, Bisoprolol?

Reason for no Anticoagulation Therapy at Discharge for Patient with Atrial Fib or Flutter?

Before

Weigh yourself daily, at the same time, on the same scale, with the same amount of clothing. Write your weight down every day.

Call provider for any of the following: 1) It is hard to breath 2) You gain more than 3 pounds in one day or more than 3-5 pounds in one week 3) You see your feet, ankles, or other parts of your body are puffy or swollen 4) Your heart beat changes 5) You have chest pain

Discharge - Home or Self Care IP Personalize ^

▼ Meaningful Use Quality and Core Measures

After

▼ Heart Failure Core Measures/Meaningful Use Orders

If you do not plan on ordering/continuing a particular medication at discharge for your Core Measures/MU patient, please select the appropriate order(s).

Heart Failure Core Measures/Meaningful Use

Patient has an Ejection Fraction of less than 40%

Patient has a diagnosis of Atrial Fibrillation or Atrial Flutter

Weigh yourself daily, at the same time, on the same scale, with the same amount of clothing. Write your weight down every day. Call provider if you gain more than 3 pounds in one day or more than 3-5 pounds in one week.
Routine, Clinic Performed

Call provider for any of the following: 1) It is hard to breathe 2) You see your feet, ankles, or other parts of your body are puffy or swollen 3) Your heart beat changes 4) You have chest pain
Routine

African American Patients

Orders applicable to African American patients only will be available in cases where Race is documented. If Race is blank, all orders are visible.

Discharge - Home or Self Care IP Personalize ^

▼ Meaningful Use Quality and Core Measures

▼ Heart Failure Core Measures/Meaningful Use Orders

If you do not plan on ordering/continuing a particular medication at discharge for your Core Measures/MU patient, please select the appropriate order(s).

Heart Failure Core Measures/Meaningful Use

Patient has an Ejection Fraction of less than 40%

Reason for no ACEI/ARB at Discharge

Reason for no Beta-Blocker at Discharge

Reason for no Aldosterone Antagonist with ejection fraction less than 35% at Discharge

Reason for no Hydralzine and Nitrate therapy at discharge for African American Patient

Patient has a diagnosis of Atrial Fibrillation or Atrial Flutter

Weigh yourself daily, at the same time, on the same scale, with the same amount of clothing. Write your weight down every day. Call provider if you gain more than 3 pounds in one day or more than 3-5 pounds in one week.
Routine, Clinic Performed

Call provider for any of the following: 1) It is hard to breathe 2) You see your feet, ankles, or other parts of your body are puffy or swollen 3) Your heart beat changes 4) You have chest pain
Routine