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• **“Stay at Home” Considerations**

- DME (See Durable Medical Equipment)
- If lab draws are needed:
 - Consider other lab draw needs or other reasons that they’re coming in to BMC and ordering labs and asking patients to get labs drawn when they come. For example, patient’s coming in for Chemo, labs for CHF management ordered by Cardiology, Anticoagulation INR check, etc.
 - Faulkner Home Labs:
 - Contact Information:
 - Phone: 781-322-8502
 - Fax: 781-322-8032
 - Insurance Coverage:
 - Accepted: Medicare, Medicaid (not limited though), Harvard Pilgrim, Aetna, Federal BlueCross (\$25 co-pay), Regular BlueCross (No co-pay), Harvard Pilgrim, Tuft Medicare Preferred
 - Not Accepted: Medicaid limited, Cigna
 - Others would need to call Faulkner prior to ordering.
 - Fill out form attached and fax (Clinic vs App-based Fax):
https://www.faulknerlabs.com/resources/FaulknerLabs_NPF_Fill.pdf
 - To have the clinic send the fax. Go through the PDF file with the patient and message your Suite’s Forms and Fax Pool with all of the required information. They will then print, fill out the form with the information provided and fax it to Faulkner.
 - Disclaimer/FYI:
 - Do NOT need to fill out SSN on the application
 - Average time of lab draw is about 1 week at this time. Consider calling the lab after to confirm order received and get anticipated collection date to inform patient of time.
 - Already existing VNA services (See VNA) if VNA agency can utilize lab draws
- New starts: Consider starting medications that don’t require lab monitoring
 - HTN: Consider CCB vs ACEI or Thiazide
 - DM: Consider waiting on new SGLT2 inhibitors starts. Could consider Linagliptin instead.
- Chronic Pain Management
 - <https://www.dea.gov/press-releases/2020/03/20/deas-response-covid-19>. Disclaimer: May not be most up to date release by time of reading, please reference the actual DEA website for most up to date information.
- Utilize Telemedicine / TeleVideo as an opportunity to have unique access into patient’s home environment: Med rec with meds on hand, discuss lifestyle modifications within their currently home environment, etc.
- Population Health
 - Use HTN and DM provider panels to ensure proper follow up for patients with chronic diseases especially those in whom the routine q3-4 month follow up schedule was interrupted.
 - The provider panel for DM HTN will include: last A1C/BP, Last and Next Visits (currently only in person clinic visits count but working on including Telemedicine encounters), Insurance Coverage (to help with potential resources available for patients – See Care Management / Clinic Resources)

• **Durable Medical Equipment**

- Findings Information on a Patient’s DME in EPIC Flowsheets:
 - <https://share.bmc.org/emerge/AmbulatoryOutpatient/3.%20Tip%20Sheets/Flowshheets/BMC%20Documenting%20Durable%20Medical%20Equipment%20Information.pdf>
- BMCHP (BMCHP Community Alliance) Patients
 - Who is a BMCHP patient?
 - Look on the EPIC Banner and hover over/click “Coverage” and it should include “BMCHP” in it. For example, “BMC HP ALLI ACO COMM STANDARD”.
 - Diabetes Supplies: Use Freestyle Supplies <- Can send to BMC Pharmacy
 - BP Cuff Sizes:
 - General guidelines: Length is >80% of arm circumference, Width is >40% of arm circumference.

CHRONIC DISEASE MANAGEMENT TIP SHEET

- Providers should also access this and put in VNA information if known to provider.
 - See Appendix C: How to input VNA information in EPIC Care Team

CHRONIC DISEASE MANAGEMENT TIP SHEET

- **Care Management / Clinic Resources**

- GIM PharmD

- Appropriate Referrals

- New Device Teaching: Injectable medications, Glucometers, Inhalers
 - Chronic Disease: Diabetes, HTN (more difficult unless they have a home cuff), Cholesterol, Asthma/COPD/Smoking Cessation
 - Medication Education/Management/Reconciliation

- How to refer a patient

- Flag the PharmD:

Katelyn O'Brien, Anthony Giuliani, Michael Takash, Justine Dickson, Kyle Bertram

	Monday	Tuesday	Wednesday	Thursday	Friday
SHA 5	Katelyn (0272) Anthony (3480)	Katelyn (0272) Anthony (3480)	Katelyn (0272) Anthony (3480)	Katelyn (0272) Anthony (3480) Kyle (9173)	Katelyn (0272) Anthony (3480)
CRO 6	Michael (4330)	Michael (4330) Kyle (9173)	Michael (4330)	Justine (4154)	Michael (4330) Justine (4514)

- Page if urgent:

- 5th Floor # 3445
 - 6th Floor # 6199

- Disclaimer:

- PharmDs will do chart review, and triage referrals based on acuity. PharmDs will call the new referrals. Major med changes may be deferred until video visits or face to face visits can be resumed at BMC if deemed appropriate by PharmD assessment.
 - As the needs of the hospital continue to evolve during COVID19, ambulatory pharmacy is constantly looking at ways to support the health system as a whole. Clinical pharmacy support abilities may change over time depending on the overall needs of BMC. An updated would be made if GIM PharmD access for telemedicine/disease management is affected.

- BMC SCO Insurer:

- Who is a BMC SCO patient?

- Look on the EPIC Banner and hover over/click "Coverage" and it should include "BMC SCO" in it. For example, "BMC HEALTHNET SCO MCR MNG"
 - Judy Tran (BMC SCO NP) can help in many functions with BMC SCO patients including getting DME.
 - Send message to SCO NP, Judy Tran, requesting specific DME

- Complex Care Management (CCM):

- Who is a CCM patient?

- EPIC Banner is Green in color. Team is noted in the Patient Care Coordination note.
 - ACO Top 2% Risk Score – If you believe your patient is a CCM patient but not currently enrolled message the appropriate contact noted below. The eligibility criteria are:
 - 1) Must be enrolled in the BMCHP (MassHealth) ACO - AND -
 - 2) Must be high risk (determined by healthcare utilization/cost)
 - Providers don't have to know who is eligible, they can just refer and the teams will figure it out.

- Contact Information

- Suite Dyads:

Name	Role	Site	Email
Jasmine Laguerre	RN	CRO 6B, some 6C	Jasmine.Laguerre@bmc.org
Jocylene Correia	CHW	CRO 6B, some 6C	Jocylene.Correia@bmc.org
(John) Hananiah Pierre-Louis	RN	CRO 6A, some 6C	Hananiah.Pierre-Louis@bmc.org
Christine Coates	CHW	CRO 6A, some 6C	Christine.Coates@bmc.org
Tyana Morgan	RN	SHA 5	Tyana.Morgan@bmc.org
Michelle Gilchrist	CHW	SHA 5	Michelle.Gilchrist@bmc.org

- Merida Brimhall – Nurse Manager (Email: Merida.Brimhall@bmc.org)

- **eSignatures in EPIC**

- How to create your eSignature in EPIC
 - Sign a blank white paper with a dark pen
 - Scan the signature. You can either:
 - Use a personal scanner at home
 - Use your phone by utilizing a scanning application (e.g. GeniusScan) and then email the file to yourself.
 - Crop the image so that it's just the signature showing with as little white space as possible
 - Save as a .JPG or .JPEG file on your computer.
 - Open SmartPhrase Manager in EPIC
 - Start a New Smart Phrase with any title that you can remember
 - Click the Star -> Go to "All Other Tools" -> "Insert Image"
 - Find your image from your computer and insert
 - Save the SmartPhrase and you can now put this signature at the end of your letters
- Disclaimer
 - Anyone with access to EPIC may have access to your eSignature if they access your SmartPhrases
 - Could consider having the image saved on your personal private computer and then creating and deleting the SmartPhrase when signature is needed if security is a concern

- **MyChart (EPIC)**

- MyChart Sign Up
 - Encourage patients to sign up during Telemedicine visits if not yet signed up. Currently only "45%" of clinic signed up for MyChart.
 - Send an email to the patient with instructions for sign up:
 - [More → Rarely Used → MyChart Administration then use the MyChart Email Signup button in the upper left hand corner]
 - Patient can sign up by going to a website:
 - <https://mychart.bmc.org/mychart/signup> and fill out the form.
For assistance they can call 1-844-635-1390 or email mychart.help@bmc.org

APPENDIX A: How to Monitor Blood Pressure at Home

- **How to measure blood pressure:**
 - Avoid taking blood pressure on arm with fistula and/or on the side of mastectomy if applicable
 - English: https://targetbp.org/wp-content/uploads/2017/07/How-to-measure-your-blood-pressure_patient-pdf.jpg
 - Spanish: <https://targetbp.org/wp-content/uploads/2018/04/SMBP-Infographic-Spanish-pdf-1.jpg>

How to measure your blood pressure at home
Follow these steps for an accurate blood pressure reading

1 PREPARE

- Avoid caffeine, cigarettes and other stimulants 30 minutes before you measure your blood pressure.
- Wait at least 30 minutes after a meal.
- If you're on blood pressure medication, measure your BP **before** you take your medication.
- Empty your bladder beforehand.
- Find a quiet space where you can sit comfortably without distraction.

2 POSITION

- POSITION ARM SO CUFF IS AT HEART LEVEL
- PUT CUFF ON BARE ARM, ABOVE ELBOW AT MID-ARM
- KEEP ARM SUPPORTED, PALM UP, WITH MUSCLES RELAXED
- SIT WITH LEGS UNCROSSED
- KEEP FEET FLAT ON THE FLOOR
- KEEP YOUR BACK SUPPORTED

3 MEASURE

- Rest for five minutes while in position before starting.
- Take two or three measurements, one minute apart.
- Keep your body relaxed and in position during measurements.
- Sit quietly with no distractions during measurements—avoid conversations, TV, phones and other devices.
- Record your measurements when finished.

TARGET:BP | American Heart Association | AMA

This Prepare, position, measure handout was adapted with permission of the American Medical Association and The Johns Hopkins University. The original copyrighted content can be found at <https://www.ama-assn.org/ama-johns-hopkins-blood-pressure-resources>.

Disclaimer: Each blood pressure cuff may be slightly different, so always refer to your user's manual for specific instructions on how to place each cuff.

- **Call clinic: if the top number (Systolic) is:**
 - **Greater than 180**
 - Hypertension is often times asymptomatic, however, can lead to some emergency conditions. Symptoms can include but are not exclusive to: chest pain, shortness of breath, nausea/vomiting, visual changes, confusion, seizures, headaches, speech changes, numbness/tingling or extremity weakness
 - **Less than 100 +/- symptoms of low blood pressure**
 - Symptoms of low blood pressure can include but are not exclusive to: dizziness, lightheadedness, nausea, fainting, weakness, lack of concentration, confusion, blurred vision, cold/clammy/pale skin, fatigue

APPENDIX B: How to Monitor Blood Glucose at home

- **How to measure blood glucose**

- After washing your hands in warm water, insert a test strip into your meter.
- Use your lancing device on the side of your fingertip to get a drop of blood
 - Use the side of fingertips (less nerve endings)
 - Do it quickly but get deep enough (slow insertions hurt more)
 - Rotate fingers that are utilized
- Touch and hold the edge of the test strip to the drop of blood and wait for the result.
- Your blood glucose level will appear on the meter's display
- English: <https://www.diabeteseducator.org/docs/default-source/living-with-diabetes/tip-sheets/blood-glucose-monitoring/insidertipstricks-final.pdf>
- Spanish: https://www.diabeteseducator.org/docs/default-source/living-with-diabetes/tip-sheets/blood-glucose-monitoring/insidertips-amp-tricks_2019spanish.pdf



Disclaimer: Each glucometer may be slightly different, so always refer to your user's manual for specific instructions on use.

- **Check blood sugar according to how frequently your provider has instructed.**

- This will vary based on your medication requirements.

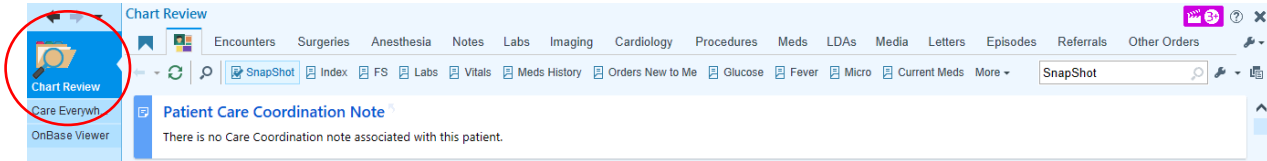
- **Call clinic if blood sugar:**

- **Less than 70 once +/- symptoms of low blood sugars.**
 - Symptoms of low blood sugar can include but are not exclusive to: shakiness, sweating, feeling clammy, mood changes (irritable and short tempered), hunger, nausea, restless sleep, fast heartbeat, blurred vision, pale skin or feeling anxious
- **Greater than 350 for three or more times**
 - Symptoms of high blood sugar can include but are not exclusive to: dry mouth, increase thirst, weakness, headache, blurred vision, frequent urination, nausea/vomiting, abdominal pain, confusion

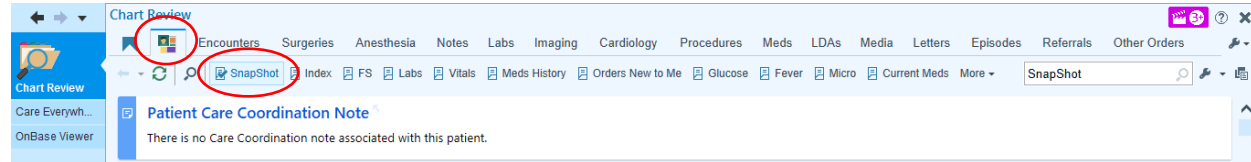
*Photo from ADA Website: https://www.diabetes.org/sites/default/files/styles/full_width/public/2019-06/Bloodglucosetesting_50%2050.jpg

APPENDIX C: How to Input VNA Information in EPIC Care Teams

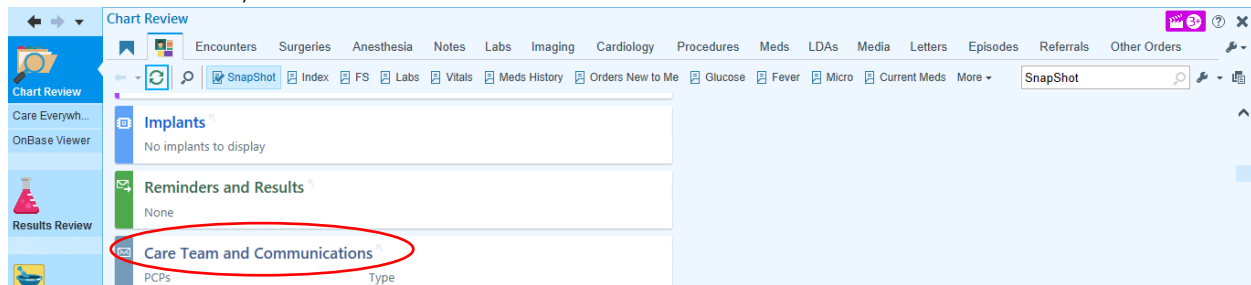
1. Enter patient's chart and select "Chart Review" on the left hand side



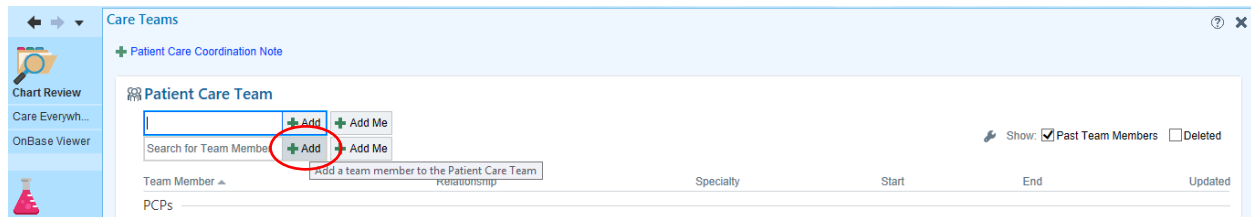
2. Click the Icon that's circled below and the "SnapShot" view



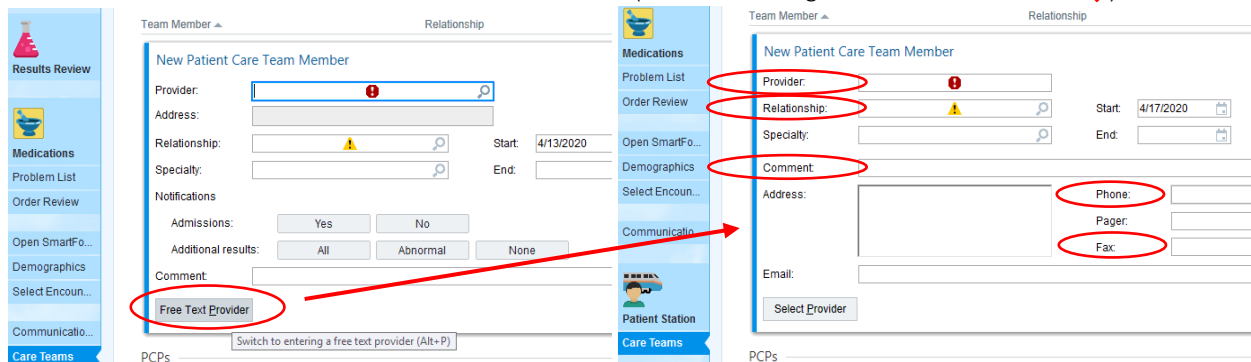
3. Scroll down until you see "Care Team and Communications" and click



4. Click "Add" next to "Search for Team Members"



5. Look to the bottom left and click "Free Text Provider" (which will change the screen to look like ↓)



6. Fill in VNA Contact Information:

- a. Provider: Write VNA agency name
- b. Relationship: VNA
- c. Phone and Fax: VNA agency phone number and fax information
- d. Comments: If available write Agency contact name for patient (e.g. Nurse's name) and phone number

7. Accept and exit patient's chart