

Purpose:

The practice incorporates evidence-based clinical decision support across a variety of conditions to ensure effective and efficient care is provided to the patient.

Policy:

A) Mental Health

- a. ___ uses the PHQ-9 to screen patients for depression.
- b. The Practice identifies the patients who are due for a depression screening through a chart review prior to scheduled appointments. Patients may also be identified by a care team member. Practice will use Patient Health Questionnaire-9 (PHQ-9) – A nine question depression scale that is based on the nine diagnostic criteria for major depressive disorders in the Diagnostic and Statistical Manual Fifth Edition (DSM-5). The Practice has the PHQ-9 available in English and Spanish.
- c. Patients who would benefit from depression screening are identified on the basis of one or more of the following factors:
 - i. Patient currently diagnosed with depression will be screened
 1. if introducing a medication
 2. when making a medication change
 3. Annually
 - ii. Patients currently treated with an antidepressant, antipsychotic or an anxiolytic, will be screened
 1. if introducing a medication
 2. when making a medication change
 3. Annually
 - iii. All patients will be screened annually
- d. Patients with a positive PHQ-9 (Score greater than 15) are followed up with by the provider who does:
 - i. Suicide risk assessment
 - ii. Provides Emotional Support

B) Chronic Medical Condition- Diabetes Mellitus Type 2 (DMT2)

- a. DMT2 testing is done on patients who experience the one or more of the following symptoms:
 - i. Polydipsia, polyphagia, polyuria
 - ii. Weight loss or gain
 - iii. Fatigue
 - iv. Blurred vision
 - v. Poor wound healing
 - vi. A high BMI
- b. If the patient has multiple symptoms, the provider may choose to run lab tests:
 - i. A HbA1C blood test to measure glycated hemoglobin.
 1. Normal levels are between 3.9-5.7%
 2. An HgbA1c level of 5.7% or above is flagged by the lab.
 - ii. A CMP may also be ordered to check the patient's serum glucose.
 1. Normal levels are between 74-100 mg/dL.
 2. A level of 100 mg/dL is flagged as above high normal.

- iii. A urine sample may be collected to:
 - 1. evaluate elevated urine glucose levels
 - 2. detect microalbumin in urine
 - c. Patients diagnosed with DMT2 may have blood work done periodically to assess the progression and control of the disease.
- C) Condition related to Unhealthy Behavior (Obesity)
 - a. BMI is used to diagnose obesity.
 - a. Vitals are taken at each SOAP appointment, including but not limited to weight, height, O2%, BP, and temperature.
 - i. These vitals are entered into the EHR and BMI is calculated automatically.
 - b. BMI is calculated in the EHR using the patients age, weight, and height.
 - ii. For patients 18-64 years old a BMI of ≥ 25 is indicative of obesity.
 - iii. For patients 65+ years old, a BMI of ≥ 30 is indicative of obesity.
- D) Acute Condition (Urinary Tract Infection)
 - a. In order to diagnose a patient with a UTI the following things are considered.
 - i. One or more symptoms
 - 1. Pain in the bladder, groin, lower abdomen, or pelvis
 - 2. Painful urination
 - 3. Foul smelling urine, frequent urination, bladder spasm, cloudy urine, dark urine, persistent urge to urinate, sense of incomplete bladder emptying, or blood in urine
 - 4. Fatigue, fever, or malaise
 - ii. If one or more of these symptoms are present, then a Urine Analysis (UA) is done.
 - 1. This test measures:
 - a. PH
 - b. Leukocytes
 - c. Nitrite
 - d. Protein
 - e. Glucose
 - f. ketones
 - g. Urobilinogen
 - h. Bilirubin
 - i. Blood
 - 2. A UA with positive blood, leukocytes or other factors may be indicative of a UTI.
 - 3. A urine microscopy may also be preformed to look at:
 - a. Bacteria
 - b. Leukocytes
 - c. Red blood Cells
 - d. Epithelial cells
 - iii. A urine microscopy may also be preformed to see if there are any of the following in the urine:
 - 1. Bacteria
 - 2. Leukocytes
 - 3. Red Blood Cells
 - 4. Epithelial cells

DATE	ANNUAL REVIEW/ SUMMARY OF CHANGES	APPROVED BY
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