EPIC® GUIDE

ATHEROSCLEROTIC CARDIOVASCULAR DISEASE
EHR TOOLBOX

PATIENT WORKFLOW OPTIMIZATION GUIDE

Collaborating with your organization to optimize workflows to enhance standardization of care for LDL-C reduction in patients at risk for (Primary Prevention) or with (Secondary Prevention) atherosclerotic cardiovascular disease (ASCVD)

- **Care Pathway**
- **Order Set**

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ASCVD/LDL-C Care Pathway Optimization

CONSIDERATIONS

Novartis has identified a need to help customers understand how they can set up an ASCVD/LDL-C care pathway. Care pathways can help clinicians address conditions that may have complex treatment and care management decisions. Health systems can use care pathways to integrate the patient's history, interactive touchpoints, and evidence-based guidelines, and make them part of the clinician workflow.

Care pathways are modified at the system level. While setting up care pathways requires health system buy-in on the proposed clinical and care pathway, it is recommended that the resulting care pathways are incorporated in the organization's clinical workflow and clinical practices. It is also recommended that clinical and operational leadership determine the final care pathway contents in line with the organization's expectations and goals.

Suggested Care Pathway:

1. Patient has ASCVD + has an LDL-C ≥ 70 mg/dL (Secondary Prevention)
2. Patient has Hyperlipidemia and Diabetes Mellitus or Familial Hypercholesterolemia and LDL-C ≥ 100 mg/dL (Primary Prevention)

→ **Question:** Is patient on maximally tolerated statin?

　　→ If yes: consider adding non-statin LDL-C—lowering therapy

Note: A complete ASCVD care pathway may be created based on the health system's clinical preferences. This suggested care pathway is only a part of a broader ASCVD care pathway.

LIMITATIONS

These instructions were created specifically to set up an ASCVD/LDL-C care pathway for the Epic EHR system and will not work for other conditions, treatments, therapeutic areas, or other EHR systems.

Once the ASCVD/LDL-C care pathway is set up, end users should be offered training on the appropriate use and new contents. It is likely that most end users have already been trained on this, thus training requirements may be limited.

INSTRUCTIONS

This section details the proposed steps to set up the ASCVD/LDL-C care pathway. The care pathway steps are suggestions.

Creating a new care pathway or updating an existing care pathway may require appropriate user rights.

INSTRUCTIONS (cont)

Step 1 – Create the ASCVD/LDL-C Care Path Episode:

1. Open the **Episode Type Editor** (**Admin > Patient Care Admin > Episode Type Editor**). Use of the Episode Type Editor requires admin rights and privileges
2. Create a new **Episode Type**, for example, **ASCVD/LDL-C Care Path**
3. Select **Care Path** for the **Class Type**

If a Best Practice Advisory Alert (BPA) record is already available (with the logic patient has ASCVD + has LDL-C ≥ 70 mg/dL), complete **Step 2a**. If a BPA record is NOT available (with the logic patient has ASCVD + has LDL-C ≥ 70 mg/dL), complete **Step 2b**. Next, attach a second BPA, if already available (with the logic patient has Hyperlipidemia and Diabetes Mellitus, or Familial Hypercholesterolemia and LDL-C ≥ 100 mg/dL) in **Step 2c;** if not available, complete **Step 2d.** Configure this second BPA as a second step to fire only if the first BPA does not fire.

Step 2a – Create the ASCVD/LDL-C Care Path (BPA record with the logic patient has ASCVD + has LDL-C ≥ 70 mg/dL IS available):

1. Open the **Care Path Editor.** Use of the Care Path Editor requires admin rights and privileges
2. Select **Care Path** for the **Episode Type**
3. Click **Add Step**
4. Select the **Display** tab
5. In the **Display Text** field, enter **patient has ASCVD + has an LDL-C ≥ 70 mg/dL**
6. Click the **Related Records** tab
7. In the **BPA** field, enter the BPA record with the logic patient has ASCVD + has LDL-C ≥ 70 mg/dL. Confirm the BPA Base record has a **Display** text "Consider adding LDL-C—lowering therapy." A link to the order or SmartSet may be added as desired
8. Click **OK**
9. Option to add additional steps to the **ASCVD/LDL-C Care Path**

Step 2b – Create the ASCVD/LDL-C Care Path (BPA record with the logic patient has ASCVD + has LDL-C ≥ 70 mg/dL IS NOT available):

1. Open the **Care Path Editor**. Use of the Care Path Editor requires admin rights and privileges
2. Select **Care Path** for the **Episode Type**
3. Click **Add Step**
4. Select the **Display** tab
5. In the **Display Text** field, enter **Patient has ASCVD + has an LDL-C ≥ 70 mg/dL**

INSTRUCTIONS (cont)

6. Click the **Related Records** tab

7. In the **BPA** field, complete the **BPA Criteria** and **Base** records:

    a. **BPA Criteria Record:**

        i. Select **Diagnosis** from the **Criteria** menu

        ii. Select the diagnosis record for ASCVD and click **Accept**

        iii. Select **BPA Locator** or **Doc Flowsheet** from the **Criteria** menu

        iv. Select **LDL-C ≥ 70 mg/dL**

    b. **BPA Base Record:**

        i. Set the **Display** text "Consider adding LDL-C–lowering therapy." A link to the order or SmartSet may be added as desired

8. Click **OK**

9. Option to add additional steps to the **ASCVD/LDL-C Care Path**

Step 2c – Attach the second BPA record with the logic patient has Hyperlipidemia and Diabetes Mellitus, or Familial Hypercholesterolemia and LDL-C ≥ 100 mg/dL (BPA is already available):

1. Open the **Care Path Editor.** Use of the Care Path Editor requires admin rights and privileges

2. Select **Care Path** for the **Episode Type**

3. Click **Add Step**

4. Select the **Display** tab

5. In the **Display Text** field, enter **patient has Hyperlipidemia and Diabetes Mellitus, or Familial Hypercholesterolemia and LDL-C ≥ 100 mg/dL**

6. Click the **Related Records** tab

7. In the **BPA** field, enter the BPA record with the logic patient has Hyperlipidemia and Diabetes Mellitus , or Familial Hypercholesterolemia and LDL-C ≥ 100 mg/dL. Confirm the BPA Base record has a **Display** text "Consider adding LDL-C–lowering therapy." A link to the order or SmartSet may be added as desired

8. Click **OK**

9. Option to add additional steps to the **ASCVD/LDL-C Care Path**

INSTRUCTIONS (cont)

Step 2d – Attach the second BPA record with the logic patient has Hyperlipidemia and Diabetes Mellitus, or Familial Hypercholesterolemia and LDL-C ⩾ 100 mg/dL (BPA is not available):

1. Open the **Care Path Editor.** Use of the Care Path Editor requires admin rights and privileges
2. Select **Care Path** for the **Episode Type**
3. Click **Add Step**
4. Select the **Display** tab
5. In the **Display Text** field, enter **patient has Hyperlipidemia and Diabetes Mellitus, or Familial Hypercholesterolemia and LDL-C ⩾ 100 mg/dL**
6. Click the **Related Records** tab
7. In the **BPA** field, complete the **BPA Criteria** and **Base** records:
    a. **BPA Criteria Record:**
        i. Select **Diagnosis** from the **Criteria** menu
        ii. Select the diagnosis record for Hyperlipidemia
        iii. Select the diagnosis record for Diabetes Mellitus
        iv. Select the diagnosis record for Familial Hypercholesterolemia, and click **Accept**
        v. Select **BPA Locator** or **Doc Flowsheet** from the **Criteria** menu
        vi. Select **LDL-C ⩾ 100 mg/dL**
    b. **BPA Base Record:**
        i. Set the Display text "Consider adding non-statin LDL-C—lowering therapy." A link to the order or SmartSet may be added as desired
8. Click **OK**
9. Option to add additional steps to the **ASCVD/LDL-C Care Path**

ASCVD/LDL-C Order Set Optimization

CONSIDERATIONS

Novartis has identified a need to help customers optimize ASCVD/LDL-C order sets to enhance standardization of care for patients with hyperlipidemia with ASCVD or at an increased risk for ASCVD. Order set optimization provides an opportunity to incorporate treatment updates. It is recommended to align with the organization's disease priorities and strategies.

LIMITATIONS

These instructions were created specifically to optimize order sets with a new medication or lab test for the Epic EHR system and will not work for other conditions, treatments, therapeutic areas, or other EHR systems.

Once the order sets are optimized, end users should be offered training on the appropriate use and new contents. It is likely that most end users have already been trained on this, thus training requirements may be limited.

INSTRUCTIONS

This section details the proposed steps to optimize order sets, referred to as "SmartSets" in the Epic EHR, for patients with hyperlipidemia with ASCVD or at an increased risk for ASCVD. The order set steps are suggestions.

Creating a new SmartSet, or updating an existing SmartSet, may require appropriate user rights.

Two steps are required to update an existing SmartSet with a new medication or lab test; first, the Medication or Labs SmartGroup should be updated to include the new medication or lab, and secondly, the updated Medication or Labs SmartGroup should be added to the desired ASCVD/LDL-C SmartSet(s).

Step 1 – Update the SmartGroup:

1. Open the management console (**Tools > Management Console**). Use of the management console typically requires appropriate user rights and privileges

2. Select **SmartGroups** from the **Decision Support** menu to launch a new window

3. Select the desired **SmartGroup** to be modified. If there are no existing SmartGroup records, consider creating a new SmartGroup

4. Click the **Create** tab

INSTRUCTIONS (cont)

5. Update the **Name**, **ID**, **Contact Date**, and **Record Type** of the SmartGroup, if needed. Click **Accept**

6. Click **Enter** to open the SmartGroup editor

7. Select **General Info** and set the record name, display name, and other information as desired. Restrictions may be set as well

8. Click **Configuration** from the menu

9. To add a new medication:
    i. Click **Add Item** and select the **Item Type** (for example, Medications)
    ii. Select and add the new medication to the SmartGroup. If desired, reference information can be added (eg, Lipid Panel test [LOINC: 303756])

10. To add a lab:
    i. Click **Add Item** and select the **Item Type** (for example, Ambulatory Order or Labs)
    ii. Search for the labs (enter the desired LDL-C test and LOINC number here). Modify if needed to conform to the local naming conventions. Add the labs to the order group

11. Release the SmartGroup record once satisfactory testing has been completed

Step 2 – Update All Desired SmartSets:

1. Open the **SmartSet Editor** and identify all appropriate ASCVD or hyperlipidemia SmartSets

2. Click **Add SmartGroup** to the desired **Sections** in the **Configuration** form to update the desired SmartSets with the optimized SmartGroup record created in Step 1 (with the optimized SmartGroup that includes the new medication)

3. Select the desired position of the SmartGroup within the sections by using the up and down buttons and the **Cascading** style in the **Configuration** menu

4. Consider adding a SmartGroup with clinical references (patient education content)

5. Consider adding future clinic visits for 3 and every 6 months

6. Release the SmartSets once satisfactory testing has been completed

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For more information on how the Novartis HIT Team can collaborate with your organization to identify shared priorities, please email: HIT.Novartis@novartis.com