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Public Domain Medical Record Abstraction Software

INTRODUCTION

A key component of a quality improvement project is the collection and analysis of clinical data. These data can be used to document baseline performance, opportunities for improvement, and ongoing monitoring of performance. Many organizations use software packages for data entry and analysis.

Enclosed are examples of two public domain abstraction software packages. The first is the Diabetes Quality Improvement Project (DQIP) Abstraction Toolkit. The DQIP toolkit uses MedQuest software which was developed by the Health Care Financing Administration. The second example includes two applications of Epi Info software. This software package was developed by the Centers for Disease Control and Prevention and the enclosed applications were developed by the Indian Health Service and by Information and Quality Healthcare (the Medicare Peer Review Organization for Mississippi).

1. THE DIABETES QUALITY IMPROVEMENT PROJECT, ABSTRACTION TOOLKIT (MEDQUEST SOFTWARE)

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2. ABOUT EPI INFO

- Examples from the Indian Health Service
 - + Data entry screen
 - + Sample reports
- Examples from Information and Quality Healthcare (Diabetic Outpatient Management Document)
 - + Data entry screen
 - + Sample reports

Diabetes Quality Improvement Project (DQIP) Abstraction Toolkit

The goal of the national Diabetes Quality Improvement Project (DQIP) is to create consensus around a single set of diabetes measures for performance reporting. DQIP began under the sponsorship of a coalition including the American Diabetes Association, the Foundation for Accountability, the Health Care Financing Administration (HCFA), and the National Committee for Quality Assurance (NCQA). Use of DQIP will help health plans meet accreditation requirements of national organizations such as HCFA and NCQA. In addition, physicians can use DQIP to generate baseline data as a first step in improving diabetes processes of care in their practices. Finally, the collection and reporting of DQIP data allows for a valid comparison of care within and across health care settings.

Diabetes affects over 16 million Americans of all ages and socioeconomic groups and causes 150,000 deaths each year. The annual cost of diabetes is reported at nearly 100 billion dollars making it one of the deadliest and most costly diseases in the U.S. Most of the morbidity and mortality of diabetes is due to the complications associated with the disease. Improved blood glucose control, regular eye examinations, and reduction in cholesterol and blood pressure are some of the practices that have been unequivocally shown to reduce complications and the heavy personal and financial toll of the disease. However, data collected from quality improvement projects conducted in the HMO setting indicate underutilization of these services.

The DQIP abstraction toolkit is designed for use by managed care plans and physician practices to measure the routine care they deliver to their diabetic patients. Using the toolkit, providers can collect and analyze data to measure and ultimately improve the quality of diabetes care they deliver. The toolkit contains the following elements:

- * DQIP *User's Guide* (including measures & specifications, instructions for installation and use of software, paper copy of abstraction tool & instructions, & toll-free telephone number for technical assistance)
- * DQIP data abstraction software
- * 10 diabetes training medical records & answer key
- * DQIP orientation/training video

The price of the DQIP toolkit, including UPS shipping, is \$47.00. For more information about the DQIP toolkit, or to order a copy, please call 1-888-691-9167. Information and free downloadable tools are also available on the HCFA website. Go to <http://www.hcfa.gov/medquest/medq5.htm> and select "diabetes."

DQIP Measures

The percentage of diabetic patients with:

- 1. Hemoglobin A_{1c} tested** (once during reporting year)
- 2. Poor hemoglobin A_{1c} control** (most recent HbA_{1c} > 9.5%)
- 3. Eye exam performed** (once during reporting year; or year prior for low risk patients)
- 4. Lipid profile** (once during reporting year or year prior)
- 5. Lipid control** (most recent LDL value < 130 mg/dL)
- 6. Monitoring for diabetic nephropathy**
- 7. Blood pressure controlled** (most recent values below 140 systolic and 90 diastolic)
- 8. Foot exam performed** (once during reporting year)

About MedQuest

MedQuest is a data-entry software program for Microsoft Windows that allows customized data-entry modules and data collection. FU Associates developed the software for the Health Care Financing Administration (HCFA).

The Diabetes Quality Improvement Project (DQIP) application contains a predesigned analysis module and an analysis report that was created using the MedQuest Analyzer. The MedQuest Analyzer provides the capability to create an 'Analysis' of the data that has been collected using the MedQuest data entry system. An analysis can contain several variables that are derived from the collected data.

Once data have been entered, the data can be analyzed by calculating derived variables and then running an analysis text report. The eight measures that make up the analysis text report have been programmed according to the DQIP specifications for medical record abstraction. These measures have been included as a separate table and pie graph in addition to being included as a table in the text report. There are also several other tables that include the quality improvement measures and other tables and graphs that might be useful.

SYSTEM REQUIREMENTS FOR MEDQUEST

You may use **MedQuest** if your computer meets all of the following requirements:

1. IBM-compatible computer with a 80486/50Mhz or higher processor;
2. Microsoft DOS version 5.0 (or higher) **and** Microsoft Windows 3.1 (or higher);
3. VGA-compatible display monitor;
4. Mouse or pointing device (Microsoft compatible);
5. 3.5" 1.44 megabytes (MB) floppy drive;
6. Hard disk with at least 12MB of space;
7. At least 8MB of Random Access Memory (RAM); (16MB are recommended for Windows 95/98NT).

HOW TO OBTAIN A COMPLETE VERSION OF MEDQUEST

The MedQuest disks in the DQIP abstraction toolkit include only the components needed to support this project. To receive a complete copy of MedQuest and the MedQuest documentation, contact the HCFA website at <http://www.hcfa.gov/medquest/medq5.htm>. The software and documentation can be downloaded from the HCFA website and requires approximately ten 1.44MB 3.5" floppy disks.

The complete version includes these additional features:

- * Master database of variables
- * Internal quality-control software
- * Data-entry engine
- * Documentation

Patient Name: _____

Diabetic History	
<p>14. Was a diagnosis of diabetes mellitus present during the reporting year? : (Pick One)</p> <p>___ Yes ___ No ___ UTD</p> <p>If NO or UTD, Abstraction should be discontinued. Complete the END ABSTRACTION Section.</p>	<p>15. Was there evidence of medical attention for diabetic nephropathy in the reporting year or the year prior?: (Pick One)</p> <p>___ Yes ___ No ___ UTD</p>
<p>16. Was there documentation of routine insulin administration during the reporting year?: (Pick One)</p> <p>___ Yes ___ No ___ Patient Declined/Refused ___ UTD</p>	

Symptoms / Findings	
<p>17. Was a blood pressure documented during the reporting year?: (Pick One)</p> <p>___ Yes ___ No ___ UTD</p> <p>If NO or UTD, skip to the next section.</p>	<p>18. Date of most recent blood pressure ___/___/___</p>
<p>19. Most recent systolic blood pressure _____ mmHg</p>	<p>20. Most recent diastolic blood pressure _____ mmHg</p>

Patient Name: _____

Laboratory / Glycohemoglobin	
<p>21. Was a glycosylated hemoglobin A1C (HbA1c) performed in the reporting year?: (Pick One)</p> <p style="margin-left: 20px;"> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> UTD </p> <p>If NO or UTD, skip to the next section.</p>	<p>22. Date of most recent HbA1c test ____/____/____</p>
<p>23. Value of most recent HbA1c _____ %</p>	

Laboratory / Lipid Profile		
<p>24. Was a lipid profile (including total cholesterol, LDL, HDL, and triglycerides) performed in reporting year or prior year?: (Pick One)</p> <p style="margin-left: 20px;"> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> UTD </p> <p>If NO or UTD, skip to the next section.</p>	<p>26. LDL cholesterol value _____mg/dL or _____mmol/L</p>	<p>28. HDL cholesterol value _____mg/dL or _____mmol/L</p>
<p>25. Date of most recent lipid profile ____/____/____</p>	<p>27. Total cholesterol value _____mg/dL or _____mmol/L</p>	<p>28. Triglyceride value _____mg/dL or _____mmol/L</p>

Patient Name: _____

Laboratory / Proteinuria

30. Was a urinalysis for protein performed in reporting year or prior year? : (Pick One)

- Yes
 No
 UTD

If NO or UTD, skip to the next section.

31. Was at least one urinalysis for protein assessed as positive in reporting year or year prior?: (Pick One)

- Yes
 No
 UTD

If NO or UTD, skip to the next section.

32. Date of most recent POSITIVE proteinuria result ___/___/___

Laboratory / Microalbuminuria

33. Was a urinalysis for microalbuminuria performed in reporting year?: (Pick One)

- Yes
 No
 UTD

If YES, complete the date in question 34, then skip to the next section.

If NO or UTD, skip question 34 and complete the rest of this section.

34. Date of most recent microalbumin test ___/___/___

35. Was a urinalysis for microalbuminuria performed in prior year?: (Pick One)

- Yes
 No
 UTD

If NO or UTD, skip to the next section.

36. Date of most recent microalbumin test in prior year

___/___/___

37. Did the results of the prior year microalbumin test exceed the lab reference range?: (Pick One)

- Yes
 No
 UTD

Patient Name: _____

Exams / Foot	
<p>38. Did the patient have both feet amputated prior to the reporting year?: (Pick One)</p> <p>___ Yes ___ No ___ UTD</p> <p>If YES, skip to the next section.</p>	<p>40. Date of most recent foot exam ____/____/____</p>
<p>39. Was there documentation of a foot exam during the reporting year?: (Pick One)</p> <p>___ Yes ___ No ___ UTD</p> <p>If NO or UTD, skip to the next section.</p>	<p>41. Specificity of foot exam: (Pick all that apply)</p> <p>___ Visual Inspection of the Feet ___ Sensory Examination ___ Vascular Examination</p> <p>___ UTD</p>

Exams / Eye	
<p>42. Was an eye exam by an eye care professional performed in reporting year?: (Pick One)</p> <p>___ Yes ___ No ___ UTD</p> <p>If NO or UTD, skip question 43, then complete the rest of this section.</p> <p>If YES, complete the date in question 43, then skip to the END ABSTRACTION section.</p>	<p>44. Was an eye exam by an eye care professional performed in prior year?: (Pick One)</p> <p>___ Yes ___ No ___ UTD</p> <p>If NO or UTD, skip to the END ABSTRACTION section.</p>
<p>43. Date of most recent eye exam ____/____/____</p>	<p>45. Date of most recent eye exam in prior year ____/____/____</p>
	<p>46. Did the patient have a diagnosis of retinopathy in prior year?: (Pick One)</p> <p>___ Yes ___ No ___ UTD</p>

Patient Name: _____

END ABSTRACTION

Abstraction status: (Pick One)

- ___ Completed
- ___ Stopped, Technical reason

If stopped, indicate reason

- ___ Missing medical record/component
- ___ Illegible medical record/component
- ___ Erroneous medical record/component
- ___ Other

Please complete the following when the abstraction is completed:

Abstraction date ___/___/___

Abstractor Id _____

Notes

ORDER FORM

DIABETES QUALITY IMPROVEMENT PROJECT ABSTRACTION TOOLKIT

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- DQIP *User's Guide* (including measures & specifications, instructions for installation and use of software, paper copy of abstraction tool & instructions, & toll-free telephone number for technical assistance)
- DQIP data abstraction software
- 10 diabetes training medical records & answer key
- DQIP orientation/training video

The entire package is available via UPS delivery for \$47.00

The DQIP *User's Guide* and software are available, at no charge, for download from the Health Care Financing Administration's website: <http://www.hcfa.gov/medquest/medq5.htm> (please email Eileen Davidson at edavidson@hcfa.gov if you need assistance downloading these items). If you wish, you may order only those items that will not be available online – the training video and the training medical records/answer sheet. Each item in the toolkit is available individually (prices listed in order grid below).

To place an order, please fill in the following information then return the form to the Texas Medical Foundation. Credit card orders may be faxed to 512-327-7159. Otherwise, please mail the form and a check payable to Texas Medical Foundation to the address at the foot of the page. If you have any questions or need more information, please call 1-888-691-9167.

name of organization contact person and telephone #

street address (not a PO box) city state zip code

Quantity	Item	Price	Total Cost
	DQIP Abstraction Toolkit (includes everything below)	\$47.00	
	DQIP <i>User's Guide</i>	\$10.00	
	DQIP Abstraction Software	\$8.00	
	DQIP Orientation/Training Video	\$5.50	
	DQIP Training Medical Records/Answer Key	\$29.50	
Method of payment: <input type="checkbox"/> Check <input type="checkbox"/> Mastercard <input type="checkbox"/> VISA <input type="checkbox"/> AMEX <input type="checkbox"/> Discover _____ credit card number/exp. date			Grand Total

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