

Pre-Visit Planning

- 1. Complete approximately one week prior to the patient's appointment
- 2. Nurse or MA reviews the provider schedule Can be done in between rooming patients, when working triage, or when physician is out of office (hospital/nursing home) or during other alternate times
- 3. The initial focus could be patients with specific chronic diseases (CAD, HTN, DM, Asthma, CHF) that need blood work or studies completed prior to their visit. Annual Medicare Wellness exams and well child visits are critical visits that should be planned as well.
- 4. Review patient record and Health Maintenance Tab for outstanding tests, labs, immunizations, referrals, etc. For Diabetics, search for an eye exam and foot exam. Evaluate when the last HgbA1c, micro albumin urine, and BMP was done (a complete review of the chart includes looking for endocrinology reports, clinical documents, hospital visits, etc.
- 5. Review last OV to identify previous physician orders and instructions
- 6. Confirm labs and or tests results have been received and are in the patient's medical record
- 7. If not in patient's chart, call the patient to confirm tests/labs were completed asking where done; if not done instruct patient to complete as soon as possible and remind them of upcoming appointment
- 8. Orders may need to be printed out and mailed to the patient (Practice protocols for standing orders for certain chronic conditions would be helpful)
- 9. May need to re-schedule practice appointment if tests not done and patient is not able to complete in time
- 10. If tests were completed, but not in medical record, must track them down
- 11. Ensure test results are entered in the chart in the appropriate place
- 12. A note or flag should be placed in the chart indicating other outstanding items needing attention
- 13. The physician sees the patient and is alerted to the outstanding items; he/she appropriately orders/completes
- 14. The patient's next appointment is made before leaving and any future labs ordered

Tips

- o Identify common services required by evidenced based guidelines (HTN, diabetes, etc.) Utilize established workflows
- Identify key staff responsible for identifying care gaps and ensure properly educated
- Use protocols and standing orders to allow staff to act independently and at the top of their license
- o Include patients scheduled for acute visits that have chronic conditions identified
- Utilize EHR and HealthEC to identify specific patients overdue for tests/care needs (use reports and HealthEC quality dashboard)
- Huddle with care team prior to the start of day and as appropriate to review and anticipate the needs of the patients scheduled for the day
- Encourage Patient Engagement

 $\frac{\text{https://www.ama-assn.org/practice-management/sustainability/10-steps-pre-visit-planning-can-produce-big-savings}{\text{Approved Quality Committee} - 1/8/2020}$