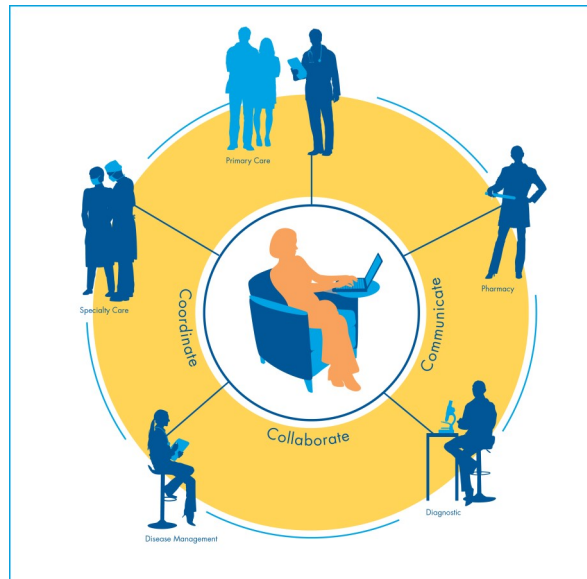


Using Datuit Care Plan Manager for Coordinated Care After Surgery

- Care coordinator-developed e-care plan
 - Patient and family access to e-care plan
 - Access by other clinicians in care team
 - Communicate and adjust medications between visits
-



PUTTING PATIENTS IN THE CENTER OF HEALTHCARE



datuit
safe simple sharing

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Dave Carlson is a 52 year old male with Type 2 Diabetes, Hypertension and Obesity. He is a construction worker and lives alone, but his former wife and 2 teenage children live nearby.

Before his MI, Dave saw his primary care physician, Dr. Andreason, once a year about diabetes and hypertension. He watched his diet and took his medications but didn't attend diabetes education classes and didn't check his blood glucose or blood pressure regularly.

Dave's last clinic labs/observations:

- ◆ 5'10" and 250# (BMI 36)
- ◆ Fasting glucose 110
- ◆ A1c 7.5
- ◆ LDL 145; HDL 35; TG 395

Dave's medications:

- ◆ Metformin 1000 mg 2x/day
- ◆ Furosemide 40 mg 2x/day
- ◆ Aspirin 81 mg 1x/day

Dave went to the ED with chest pain and was admitted for an acute MI. On admission, his weight is 265#; glucose is 245; BP 175/105. After initial treatment, Dave is scheduled for an angioplasty that was unsuccessful and then was brought to the OR for an emergent CABGx3.

He spent 2 days in ICU followed by 5 days in the cardiac unit. During that time, he was started on insulin, and Lisinopril 40 mg 1x/day was added along with increasing Furosemide to 60 mg 2x/day. He was taught how to use a glucometer to check his blood glucose at home. He was instructed to attend outpatient diabetes education to reinforce what he has learned in the hospital; follow up with Dr. Andreason and his surgeon; and start cardiac rehab 1-2 weeks after discharge. His oldest daughter, Lisa, was with him to hear the discharge information.

Dave's medications in Care Plan Manager

His discharge medications were **Metformin** 1000 mg 2x/day; **Furosemide** 60 mg 2x/day; **Clopidogrel** 75 mg 1x/day; **Atorvastatin** 40 mg 1x/day; **Aspirin** 81 mg 1x/day; **Lantus** 20 U subq at bedtime; **Novolog** 4 U subq with meals.

Lisa recently started school in a local junior college. She plans to check on Dave and help him manage his care. In the hospital, she learned how to use his glucometer and use the Lantus and Novolog insulin pens. She also agreed to go with him to diabetes education classes when he is able and take him to his first follow up appointments.

On the day after discharge, Dr. Andreason assigns Dave a care coordinator, Sally. She reviews Dave's discharge instructions and invites him to the Care Plan Manager (CPM).

← BACK		MEDICATIONS			
MEDICATIONS		+ ADD MEDICATION			
Show	25	entries	Search:		
MEDICATION	▲	STATUS	◆	DOSAGE	◆ SCHEDULE ◆ GOAL ◆
ASPIR-LOW (Oral Pill)		active		1 - 81 mg DR Tablet Once a day	Reduce risk of heart attack or stroke
Atorvastatin (Oral Pill)		active		1 - 40 mg Tablet Once a day	LDL < 100
Clopidogrel (Oral Pill)		active		1 - 75 mg Tablet Once a day	Reduce risk of heart attack or stroke
LANTUS (Injectable)		active		20 U - 100 unt/ml Pen Injector 3 ml Once a day	A1c < 7.0
LASIX (Oral Pill)		active		3 - 20 mg Tablet Twice a day	Blood pressure <140/<90
Lisinopril (Oral Pill)		active		1 - 40 mg Tablet Once a day	Blood pressure <140/<90 Reduce risk of heart attack or stroke
metFORMIN (Oral Pill)		active		1 - 1,000 mg Tablet Twice a day	A1c < 7.0
NovoLOG (Injectable)		active		4 U - 100 unt/ml Pen Injector 3 ml Three times per day	A1c < 7.0
Showing 1 to 8 of 8 entries					

Medications and Problems on Hospital CCD

Data automatically integrated into Care Plan Manager

Medications Section

Name	Drug	Form	Dose	Route	SIG	Begin Date	End Date
metFORMIN (Oral Pill)		Tablet	1,000 mg	Oral Pill	1 - 1,000 mg Tablet Twice a day	07/01/2010	
LASIX (Oral Pill)		Tablet	20 mg	Oral Pill	3 - 20 mg Tablet Twice a day	01/21/2010	
ASPIR-LOW (Oral Pill)		DR Tablet	81 mg	Oral Pill	1 - 81 mg DR Tablet Once a day	01/10/2017	
Lisinopril (Oral Pill)		Tablet	40 mg	Oral Pill	1 - 40 mg Tablet Once a day	01/10/2017	
LANTUS (Injectable)		Pen Injector 3 ml	100 unt/ml	Injectable	20 U - 100 unt/ml Pen Injector 3 ml Once a day	01/18/2017	
NovoLOG (Injectable)		Pen Injector 3 ml	100 unt/ml	Injectable	4 U - 100 unt/ml Pen Injector 3 ml Three times per day	01/10/2017	
Clopidogrel (Oral Pill)		Tablet	75 mg	Oral Pill	1 - 75 mg Tablet Once a day	01/10/2017	
Atorvastatin (Oral Pill)		Tablet	40 mg	Oral Pill	1 - 40 mg Tablet Once a day	01/18/2017	

Problems Section

Name	Severity	Begin Date	End Date
Diabetes mellitus type 2	Chronic	01/01/2010	
Benign essential hypertension	Chronic	01/01/2007	
Body mass index 30+ - obesity	Chronic	01/01/2001	
History of - coronary artery bypass grafting	Acute	01/10/2017	
Acute myocardial infarction of inferior wall	Acute	01/09/2017	

Dave has some pain at the incision site, for which Dr. Andreason recommends over-the-counter acetaminophen when needed, which takes care of the problem. Sally asks via CPM secure message how his wound is healing, and Dave reports that it is clean, dry and intact, and he has a normal temperature.

Andrew at the Diabetes Education Center uses CPM to give education materials; message recommendations to Dr. Andreason and Sally as well as other care team members; and add interventions to the e-care plan. They emphasize the importance of having good blood glucose control while his surgical wounds are healing. Because he is not able to attend classes immediately after coming home, Lisa gets the basic information she needs and figures out how to communicate with Dave's care team. She begins to check his blood sugars once or twice a day, depending on her schedule, recording the results in CPM. She also makes sure he takes his medications, including his insulin. She uses an on-line grocery ordering company to order his food, making sure she's following the suggested meal plan.

DATUIT CARE PLAN MANAGER
Powered by SafeIX

DAVID M CARLSON
Apr 3, 1964 (Age 52) Male

HOME
 PATIENTS
 ADD
 GO
 LOGOUT

Welcome Sally Lund | A A A

[← BACK](#)
[INTERVENTIONS DETAILS](#)

CHECK BLOOD GLUCOSE 2 TIMES PER DAY
 DELETE

Intervention Description:

Intervention Priority: High

SAVE

Cancel

GOAL(S) FOR THIS INTERVENTION
 GOAL

NAME
 A1c < 7.0

WHICH CLINICIAN(S) WILL HELP YOU WITH THIS INTERVENTION?
 CLINICIAN

NAME
 Charles Andreason
 Andrew Anderson

RESOURCES
 ADD RESOURCE

HOW TO USE A GLUCOMETER
 Instructional Video from Dr. Kari Fabian

Dr. Andreason receives a Discharge Summary CCD from the hospital and uses it to create his CPM medication list and start planning Dave's education and rehabilitation.

Sally also invites **Andy, the diabetes educator**, and **Anthony, the cardiac rehab therapist**, to join CPM, as well as **Lisa**, Dave's daughter.

Datuit's Care Plan Manager
Powered by SafeIX

Hi Lisa Carlson

David M Carlson uses the Datuit Care Plan Manager to help manage his care. He values your advice and invites you to join his care team. By signing up you will be able to view his care plan, have secure communications with him and his other care team members, and help him understand his medical problems.

To join David M Carlson's care team, please click [here](#).

Thank You,
 David M Carlson

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 Phone: 651-894-2814

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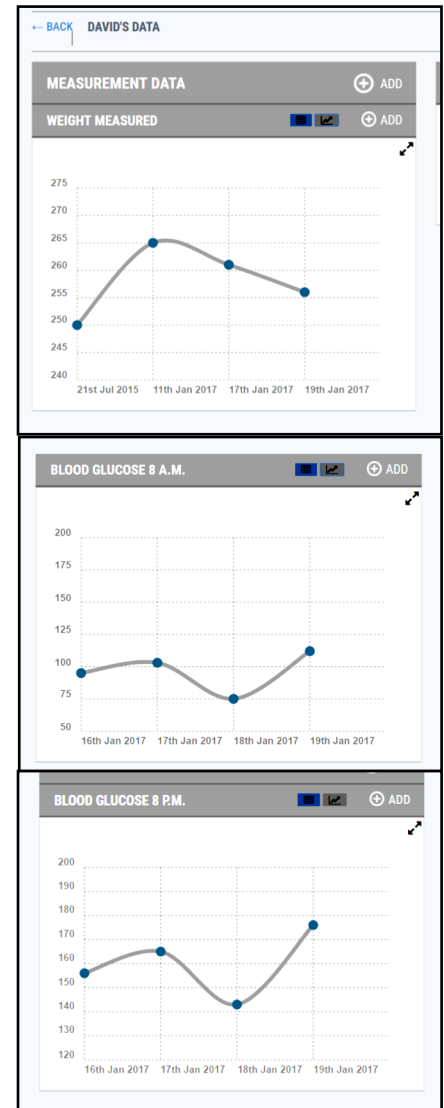
Anthony at the Cardiac Rehabilitation Center also uses the CPM to communicate with Dr. Andreason and the care team about progress in their program. Two weeks after discharge, Dave starts exercising at Cardiac Rehab. In the second week, Anthony notices symptoms of low blood glucose. Anthony sends a message to Sally who

Dave's Secure Messages

talks with Andrew and Dr. Andreason, who tells Dave and Lisa that he should take 1/2 his meal-time Novolog dose (2 U) when he knows he will be exercising after the meal. Dave does not have any hypoglycemic incidents after the change is made.

Dave and Lisa see Dr. Andreason 2 weeks after hospital discharge. They discuss his progress. His weight is 245#, and Dave reports feeling light-headed when he stands. Dr. Andreason changes his Furosemide dose back to the pre-hospitalization dose of 40 mg 2x/day. He reviews the blood glucose levels

reported in CPM and encourages Dave and Lisa to continue following Dave's e-care plan.



Dr. Andreason asks Dave to return in 6 weeks to review his e-care plan and check his A1c and lipids. They can also discuss if/when he can return to work. He encourages them to stay in touch with Sally and attend diabetes classes as soon as he's able. He observes that Dave's wounds are healing well and congratulates Dave and Lisa on their work to make Dave healthy again.