Transition of Care Case

(Post planned surgical with new onset of type 2 diabetes)

Screening

Greg presents on the Admission – Discharge – Transfer (ADT) list (available from the Health Information Exchange the practice uses) after a hospitalization for a planned cholecystectomy. The care manager has access to the hospital medical record and the practice medical record.

1) **What steps or actions could the care manager consider completing prior to calling the patient?**

Continue reading:

At the time of the hospitalization it was noted in the inpatient record, Greg had elevated blood sugars, and based on lab findings, he was diagnosed with type 2 diabetes. The finding of a new diagnosis of diabetes and complications of the planned surgical event indicate this patient does meet criteria for a post-discharge call, screening for ongoing care management enrollment, and an initial visit with the care manager.

2) **List the key information you will include in the post-discharge call and screening assessment at the time of the call with Greg:**

3) **What is the main goal of the post-discharge call?**

4) **What tool could you consider using to determine the complexity of this patient?**

5 Step Process

Screening

Continue reading:

Later that week, Greg presents for his post-discharge follow up visit with the PCP. He is brought into an exam room with his wife, Patty. You are able to talk briefly with the Greg while the couple is waiting for Dr. Eloch to come into the exam room. Greg shares his hospital experience with you, and the fact he thought this was going to be a very simple procedure and then everything "went south." He explains, "due to difficulties, the planned laparoscopic cholecystectomy turned into an open cholecystectomy. In addition to the intraoperative

complication he also found out he has Type 2 Diabetes". He is very concerned about his health and states that he has always been in excellent health.

Post-discharge follow-up and screening continued:
After the exam you ask if you can spend about 15 minutes with Greg and Patty. One of your objectives is to understand what medications were prescribed for Greg following his discharge. You did notice that he was only prescribed Lipitor prior to his hospitalization. Patty has the names of his medications and states that the hypoglycemic agent, Metformin that was prescribed by Dr. Eloch was initiated while he was hospitalized. They have a thirty-day supply according to the bottle she had with her. In addition to the Metformin he has an antibiotic and an analgesic. You review the medications that Greg is taking and document the findings.

5) Describe the process and provide example questions you will use to complete the *medication reconciliation*:

You note that both Greg and Patty are not interested in discussing the type 2 diabetes. Greg states, "I just need to get through one event and then I will see if I still need the Metformin."

Monitoring
You ask him if he would allow you to call him in a week to see how he is feeling. He and Patty agree to the follow up call.

6) What information will you gather at the time of the follow-up and monitoring call?

After your meeting with Patty and Greg, which lasted about 40 minutes in total, you complete your documentation of the visit.

7) What information will you include in the documentation of this visit?

You and Dr. Eloch review your findings from the post-discharge call and todays visit. You explain you would like to meet again with Greg and Patty to further evaluate Greg's understanding of the new diagnosis Type 2 Diabetes. Dr. Eloch appreciates that you will be working with Greg on the new diagnosis and ask you to update him with your efforts.

What are the goals and problems you have noted?

Considering that this a TOC visit what should you update on the Medical Record?

One Week Later

One week later you call Greg. He sounds as if he is feeling much better than when he was in the office. You feel comfortable in addressing his new diagnosis once you evaluate how he progressing post operatively.

Greg tells you that he has not driven since he came home since the surgeon said that he should not drive until his post-op appointment next week. His wife is back to work and he is doing some work at home. He finished his antibiotic Rx and continues to take his Lipitor and Metformin as prescribed. You ask him if he had received any education on Diabetes while hospitalized. Greg states he has some pamphlets but hasn't read them yet. You ask him if he would be interested in attending the Diabetes Education series of classes offered by the Certified Diabetic Educator at the hospital where he was at while hospitalized. He states he will think about the offer but right now is not interested. He believes taking the Metformin is all he needs for control of the diabetes. Greg states his diet is "fine" and he does not have "to go on a diet" You sense that at this time he is not ready to receive further information on Type 2 Diabetes. You ask him if you can call him next week as a routine post admission call. Greg is in agreement to the follow up call again.

Following the 20-minute call you document in the Medical Record.

What will you review at the time of the call?

The Following Week

In your two week follow up phone call again you sense that Greg is progressing well following his surgery. He has seen his surgeon and received positive feedback. He has begun to drive short distances only and continues to work from home. He estimates he will return to work in two more weeks.

When questioned about his medications, he reports he is taking Lipitor and Metformin daily as prescribed. In your conversation again you ask him if he would attend a Diabetes Education series. Greg claims he feels comfortable with his understanding and will reach out to you should he have any questions about his Diabetes. You advise him that you have materials that you will send him if he would like to read them. Greg again states that he is very comfortable with his status post operatively and also with his diagnosis of Type 2 Diabetes. He is not interested any further follow up phone calls and will contact you if he has any questions.

After your fifteen-minute phone call you send a message to Dr. Eloch via your EMR that states you have tried to encourage further Diabetes education for Mr. Whin but he continues to refuse the support.

You document your phone call.

Based on Mr. Whin's response, what is your plan regarding enrollment into care management services?

What steps will you take to complete this plan?