

PSYCKES & Electronic Medical Records (EMR)

Psychiatric Services and Clinical
Knowledge Enhancement System



PSYCKES & EMR

➤ Mount Sinai's PSYCKES Leadership Team

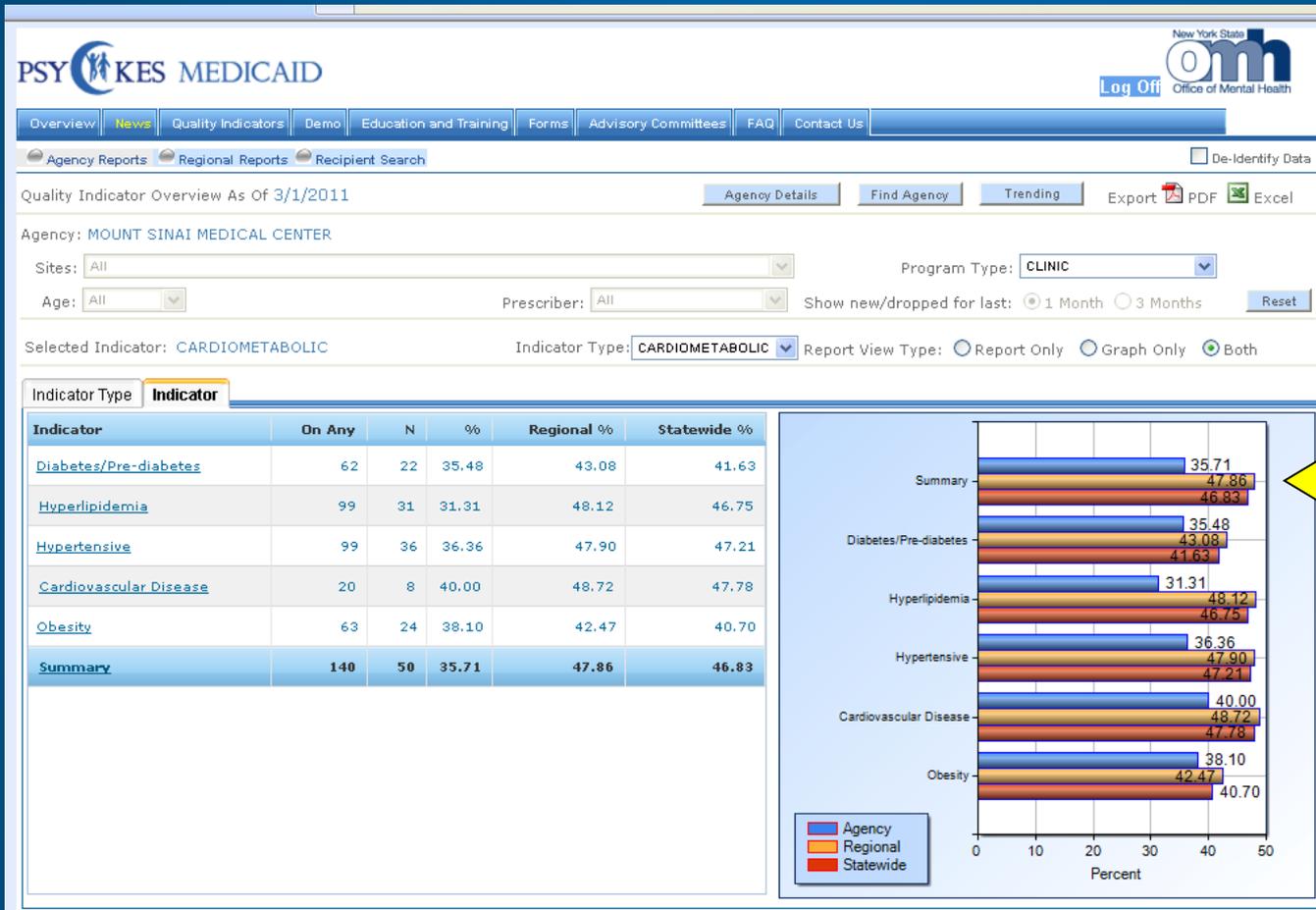
- Kathleen Ault, N.P., Adult Ambulatory Psychiatry
- Alejandra Durango, M.D., Medical Director, CDT
- Richard Embry, Ph.D., Administrative Director, Child Ambulatory Psychiatry
- Andrew Aronson, M.D., Medical Director, Ambulatory Psychiatry

PSYCKES & EMR

➤ Mount Sinai's Five Year Effort at Metabolic Monitoring

- History
- Target population
- Monitoring Method
- Results

PSYCKES



PSYCKES & EMR

Pre-PSYCKES Metabolic Monitoring Form-1

Metabolic Monitoring - Baseline/ Quarterly/ 6 Month Metabolic Monitoring Worksheet

Encounter: PSYCH CONF 0 05/25/11
Date: 05/25/11

Values By

Assessment Details

Next assessment date:

This assessment is (includes sections):

Section A: Non-modifiable Risk Factors

Ethnicity:

Patient history: Diabetes

Patient history: HTN

Patient history: STROKE

Patient history: Heart Attack

Family history: Diabetes

Family history: HTN

Family history: Stroke

Family history: Heart Attack

Family history: Obesity

Family history: Other (please specify)

PSYCKES & EMR

Pre-PSYCKES Metabolic Monitoring Form-2

Section B: Modifiable Risk Factors						
Cigarette smoking:	<input type="button" value="Current"/>	<input type="button" value="Past Hx"/>	<input type="button" value="No"/>	<input type="button" value="📄"/>		
Illicit substance abuse:	<input type="button" value="Current"/>	<input type="button" value="Past Hx"/>	<input type="button" value="No"/>	<input type="button" value="📄"/>		
Alcohol > 2 drinks/ day:	<input type="button" value="Current"/>	<input type="button" value="Past"/>	<input type="button" value="No"/>	<input type="button" value="📄"/>		
Chronic Stress:	<input type="button" value="Adequate"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="📄"/>		
Avoids saturated/ trans fats	<input type="button" value="Adequate"/>	<input type="button" value="Needs Improvement"/>	<input type="button" value="📄"/>			
2 fruits/ veg/ day	<input type="button" value="Adequate"/>	<input type="button" value="Needs Improvement"/>	<input type="button" value="📄"/>			
Regular Exercise:	<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="📄"/>			
Section C						
Height	<input type="text"/>	<input type="button" value="📄"/>	<input type="button" value="📄"/>			
Weight	<input type="text"/>	<input type="button" value="📄"/>	<input type="button" value="📄"/>			
BMI (Calculated) kg/m	<input type="text"/>					
BP	<input type="text"/>	<input type="button" value="📄"/>	<input type="button" value="📄"/>			
Waist Circumference (in)	<input type="text"/>	<input type="button" value="📄"/>	<input type="button" value="📄"/>			
Actions to be taken:						
Actions to be taken:	<input type="button" value="continued monitoring"/>	<input type="button" value="counseling"/>	<input type="button" value="medication change"/>	<input type="button" value="referral/to"/>	<input type="button" value="other"/>	<input type="button" value="📄"/>
Responsible person	<input type="text"/>				<input type="button" value="📄"/>	
Time frame	<input type="text"/>				<input type="button" value="📄"/>	
Are there additional actions to be taken?	<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="📄"/>			
Clozaril Monitoring						
Patient should receive Clozaril labs every:	<input type="button" value="7 days"/>	<input type="button" value="14 days"/>	<input type="button" value="28 days"/>	<input type="button" value="📄"/>		

PSYCKES & EMR

- **EPIC: Mount Sinai's EMR**
 - Implementation History
 - Resources Available

- **EPIC Focused Plan for PSYCKES**

PSYCKES & EMR

PSYCKES Metabolic Monitoring Form

Screen name: Every.

Clinical Review

Is this an OMH/PSYCKES identified patient?

Has clinical review take place?

Outcome of clinical review

Rationale for no change in medication

If medication change deferred or not yet complete, will reassess in

Restore Close F9 Cancel

unt
ai

PSYCKES & EMR

PSYCKES Metabolic Monitoring Form

Flowsheet Report ? Close X

Select Flowsheets to View						
AMB PSYCH METABOLIC MONITORING [319]						
Load More						

METABOLIC MONITORING	Latest Ref Rng	10/5/2009	11/4/2009	11/10/2010	12/17/2010	2/9/2011	6/10/2011
Cigarette smoking:					Current		Current
Avoids saturated/ trans fats					Adequate		Needs Improvement
2 fruits/ veg/ day					Adequate		Needs Improvement
Height			5' 11.5"		5' 11"		5' 10.87"
Weight			167 lb 8 oz		176 lb		185 lb
BMI (Calculated) kg/m			23.1 kg/m2		24.6 kg/m2		26 kg/m2
BP		140/76	122/78	120/80	112/68	120/70	105/65
Waist Circumference (in)					39		40
GLUCOSE-BLD	65 - 199 MG/DL						
HEMOGLOBIN A1C	4.1 - 6.5 %				5.4		5.6
LDL CHOLESTEROL	40 - 160 MG/DL		133		157		107
HDL CHOLESTEROL	30 - 120 MG/DL		39		34		42
TRIGLYCERIDES	10 - 250 MG/DL		205		156		98
CHOLESTEROL	120 - 240 MG/DL		213		222		169
CARBON DIOXIDE-BLD	22.0 - 32.0 MEQ/L				24.8		
UREA NITROGEN-BLD	10 - 30 MG/DL				11		
Is this an OMH/PSYCKES identified patient?							1. Yes (questions below required)
Has clinical review take place?							Yes
Date Held							62255
Outcome of clinical review							Continue current medications
Rationale for no change in medication							Patient Preference;Other (comment)
If medication change deferred or not yet complete, will reassess in							3 months

PSYCKES & EMR

➤ Report Options

- Automatic on 5th Month
- By Program
- By PSYCKES Client
 - Clinical Review Status/date
 - Clinical Review Outcome
- Numerical Summary
 - Clients in PSYCKES Program
 - Clinical Reviews Held in Month
 - Medication Changes Completed in Month
 - Medication Changes in Progress



PSYCKES & EMR

- Accomplishments and Challenges
- Question and Answer