



# Documenting Use of Aspirin or Another Antithrombotic for IVD

*Outlines the proper workflow for documenting the use of aspirin or another antithrombotic for Ischemic Vascular Disease (IVD)*

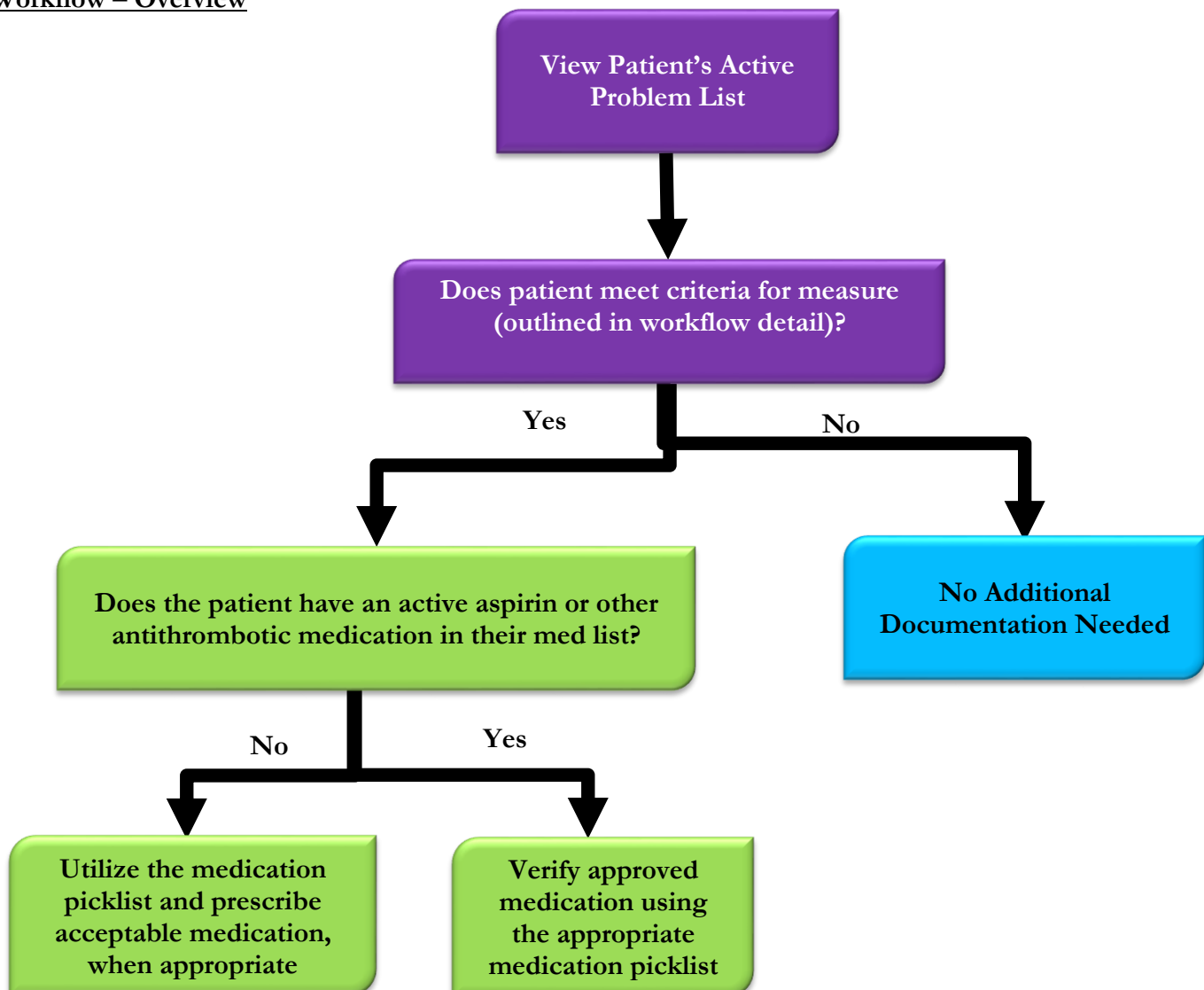
## Purpose of Structured Data

- Documenting the use of aspirin or another antithrombotic for ischemic vascular disease (IVD) is a Uniform Data System (UDS) measure and is directly linked with the 2016 Clinical Quality Measure (CQM) 164v4 – Ischemic Vascular Disease (IVD) – Use of Aspirin or Another Antithrombotic (NQF0068)


## Description of Measure

- This measure looks at the total percentage of patients 18 years of age and older who were discharged alive for acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous coronary interventions (PCI) in the 12 months prior to the measurement period, or who had an active diagnosis of ischemic vascular disease (IVD) during the measurement period, and who had documentation of use of aspirin or another antithrombotic during the measurement period

## Workflow – Overview

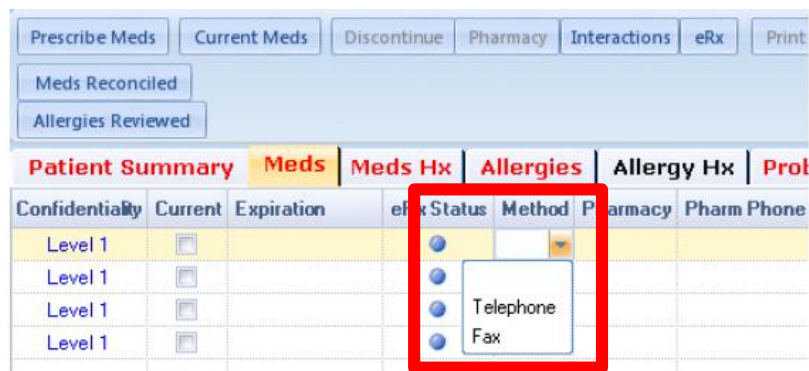


## Workflow - Detail

1. Verify the patient falls into one of the following two categories:
  - a. 12 months prior to current measurement period (always the current calendar year)
    - i. Patient was discharged alive for:
      1. Acute Myocardial Infarction (AMI)
      2. Coronary Artery Bypass Graft (CABG)
      3. Percutaneous Coronary Interventions (PCI)
  - b. Active diagnosis of Ischemic Vascular Disease (IVD) during the current measurement period
2. If the patient falls into either of the above categories and has no current medication then you would proceed with prescribing a new medication, when appropriate.
3. To prescribe new med, select the Medications icon 
4. Click the **Prescribed** Meds button to prescribe a medication. Utilizing the **IVD Medications (UDS)** picklist in the **Prescribe Meds** screen, select a medication for the patient, when appropriate
5. Add and/or edit the desired sig details, refills, frequency, dispense amount, etc. and click **Save**
6. On the **Medication Summary** screen or the **Overview** tab select to eRx or Print the medication



7. You may also call in the medication by phone or fax the medication. However, if the prescription is called in or faxed, you must update the method column to display accordingly after the med has been added/updated for the selected encounter

A screenshot of a software interface for medication management. At the top, there are several tabs: "Prescribe Meds", "Current Meds", "Discontinue", "Pharmacy", "Interactions", "eRx", and "Print". Below these are "Meds Reconciled" and "Allergies Reviewed" buttons. The main section has a header with "Patient Summary", "Meds", "Meds Hx", "Allergies", "Allergy Hx", and "Prot". Under "Meds", there is a table with columns: "Confidentiality", "Current", "Expiration", "eRx Status", "Method", "Pharmacy", and "Pharm Phone". The table contains four rows, each with "Level 1" in the "Confidentiality" column. A red rectangle highlights the "eRx Status" and "Method" columns for the first three rows. A dropdown menu is open for the "Method" column of the first row, showing "Telephone" and "Fax" options.

**Note:** If the patient is already taking aspirin and you simply need to add it to the **Current Medications** screen you must enter the medication as a **Dispensable Drug**. Entering the medication as a routed drug will not document compliance for the measure.