DATA ENTRY

Clinical Information

The Clinical Information Data Entry Screen is the main screen in the DQCMS application.

To enter data, a patient must first be selected from the Patient pull-down list. Upon selection, the screen will be refreshed to show the most recent information for the patient.

To enter new information, type the date as mm/dd/yy and the result for each available clinical test over the existing information. When new information is entered, the background color of the updated field will be highlighted yellow. The yellow background indicates that the data shown in the field are new and need to be saved. Enter all relevant information for the patient before clicking **Save and Refresh**.

**NOTE:** A revised date is required for each new clinical result in order for it to be saved.
Data Entry Fields

Most Recent Date

- **Office Visit** – Enter date of office visit.

Clinical Exam

- **Weight** – Enter date weight was obtained and the weight in pounds (lb) or kilograms (kg) and the other value will automatically calculate. Validation is required if weight is less than 100 lb or greater than 300 lb.

- **Height** – Enter date height was measured and height in feet and/or inches (without shoes). If inches are equal to zero, leave the field blank. Height is required for the patient’s body mass index (BMI) to calculate.

- **Blood Pressure** – Enter date blood pressure was taken. Enter systolic and diastolic values in the respective fields. Validation is required if the systolic value is <90 or >165 or if the diastolic value is <50 or >100.

- **Foot Exam**:
  1. Enter the date the foot exam was completed.
  2. Select type of foot exam as *Monofilament* or *Visual*.
  3. Select the level of risk as *High*, *Low*, or *Unknown*.
  4. Select whether a foot problem is currently active or not. If this is unknown or not documented, tab through this field to leave it blank.
  5. If the level of risk is *High* or *Low*, select a recommendation. If this is unknown or not documented, tab through this field to leave it blank.

  **NOTE:** Refer to Appendix A for information on completion of foot exam.

Eye and Dental Exams

- **Dilated Eye Exam** – Enter date of dilated eye exam and select the diagnosis as *No Retinopathy*, *Mild Retinopathy*, *Severe Retinopathy*, or *Unknown*.

- **Eye Exam Referral** – Enter date patient was referred for an eye exam.

- **Dental Exam Referral** – Enter date patient was referred for a dental exam.

Laboratory Data

- **A1C** – Enter date A1C test was completed and the resulting value. A validation prompt will appear if the result is <5 or >14.

- **Lipid Panel** – Enter date and result of lipid panel tests. A validation prompt will appear if:
  - HDL is <25 or >60.
  - LDL is >200.
- Triglyceride is >400.

- **Creatinine** – Enter the date the creatinine test was completed and the result with up to two decimals. A validation prompt will appear if the value is >12.

- **E-GFR** – Enter the date of estimated glomerular filtration rate (GFR) and result with no decimals. A validation prompt will appear if the value is <9 or >186.

- **Urine ACR** – Enter date of the urine creatinine ratio (ACR) and the result with one decimal allowed. A validation prompt will appear if the value is >5000. Once this field is completed, microalbuminuria and proteinuria are automatically populated based on the following criteria:
  - Urine ACR <30, then microalbuminuria = “-” and proteinuria = “-”.
  - Urine ACR = 30 to 299, then microalbuminuria = “+” and proteinuria = “-”.
  - Urine ACR ≥ 300, then microalbuminuria = “+” and proteinuria = “+”.

- **Proteinuria** – Enter date of proteinuria urine test and result of positive (+) or negative (-).

- **Microalbuminuria** – Enter date of microalbuminuria urine test and result of positive (+) or negative (-).

**Immunization Status**

- **Influenza** – Enter date when the influenza vaccination was provided. If declined, check the declined box.

- **Pneumo** – Enter date when the pneumococcal vaccination was provided. If declined, check the declined box.

**Prevention Services**

- **Tobacco Use** – Enter date when the patient was asked about tobacco usage. If the patient is a current tobacco user, select Yes. If not, select No. If the patient is a current smoker, select whether an intervention was provided.

- **Diabetes Education** – Enter the date diabetes education was provided. Once the date is entered, the Education List box appears to the right of the date field and lists several types of education. Select all appropriate types of education from the list box by clicking on each one to highlight it black. Unselect the education by clicking on it again. To enter specific information about the patient’s Diabetes Self-Management Education (DSME), click the DSME button to access the current patient’s DSME Recognition and Behavior Goals screen.

- **Medications** – Enter date diabetes medications were prescribed. Once the date is entered, the Medications List box appears to the right of the date field and lists several types of medications. If the patient was previously prescribed medications at an office visit, the Medications List box will have those medication highlighted. Select all appropriate medications from the list box by clicking on each one to highlight it black. If the patient is currently not on any medications, specify the date and unselect all medications.
**NOTE:** If patient is not on any medications, **No Meds** will appear on the IPP form for this patient.

**NOTE:** Refer to Appendix B for a complete list of medications.

**Screen Buttons**

- **Demographics** – Accesses the Patient Demographics screen where the user can view and edit demographic information for the selected patient.

- **Print IPP** – Sends the current patient's IPP (individual patient profile) form automatically to the default printer.

- **Other Comments** – Add up to 75 characters of text (including spaces) that will appear on the bottom of the printed IPP report. The comment field is not intended for medical charting but could serve as a reminder note for future visits. **NOTE:** Comments are not saved in the history.

- **Save and Refresh** – Saves newly entered information and refreshes the Clinical Information Data Entry Screen.

- **Cancel Changes** – Disregards all new changes, clears out all yellow background fields, and refreshes the form.

- **Exit** – Closes the DQCMS software.

- **DSME** – Accesses the current patient's DSME Recognition and Behavior Goals screen.

**Patient Demographics**

The Patient Demographics data entry screen allows users to enter demographic information about each patient.

**Accessing Patient Demographics Screen**

- **New Patient** – Select **File** on the main menu bar, and select **New**.

- **Existing Patient** – Select the patient from the patient pull-down list on the Clinical Information Data Entry Screen. Once the patient is selected, there are two options for accessing the patient demographics screen:

  **Option 1:** On the main menu bar, click **Current Patient** and select **Demographics**.

  **Option 2:** Click the **Demographics** button on the Clinical Information Data Entry Screen.
Data Entry Fields

Required fields are noted with a red asterisk sign. If the required fields are not completed, the data will not be saved.

- **First Office Visit Date** – Defaults to today’s date for new patients. The date may be replaced with the date of the first Office Visit if it occurred prior to today’s date.

- **Last Name** – Enter patient’s last name.

- **First Name** – Enter patient’s first name.

- **MI** – Enter patient’s middle initial.

- **Gender** – Select Female or Male from the pull-down list.

- **Address** – Enter patient’s street address.

- **City** – Enter patient’s city of residence.

- **State** – Select patient’s state/province from the pull-down list.
• **Zip** – Enter patient’s zip code.

• **Telephone** – Enter patient's telephone number. If the state field is completed, the area code for the telephone number automatically displays in the telephone field.

• **Race** – Select the patient’s race from the pull-down list. If AsianPacific Islander is chosen, select the ethnicity from the options provided in the pull-down list.

• **Medical Record Number** – Enter the patient’s medical record number. A medical record number or social security number is required for every patient.

• **Social Security Number** – Enter the patient’s social security number. A medical record number or social security number is required for every patient.

• **Status** – Select **Active** if the patient is considered to be a current patient who either has been treated or is receiving ongoing treatment. Select **Inactive** if the patient is deceased or no longer a patient of the clinic.

• **DSME Education Site** – Select the site where patient receives DSME from the pull-down list. If the site is not in the list, go to DSME on the main menu, select **Education Site**, and then select **Update Site** to add the site to the list. Follow the instructions provided at the top of the screen.

• **Physician** – Select the primary physician from the pull-down list. If the physician's name is not in the list, type the physician’s name in the field and press **Enter** on the keyboard. The user will be prompted to add the physician’s name to the list. Click **Yes** to access the **Update Physician Information** screen and follow the instructions at the top of the screen.

• **Payor** – Select the type of insurance/payor from the pull-down list.

• **Date of Birth** – Enter the participant's date of birth manually with two digits in each of the day and month fields and four digits in the year field (mm/dd/yyyy).

• **Date of Death** – Enter the date the patient died. Once a date is entered, deceased patients will be marked as **Inactive**.

• **Diagnosis** – Four coexisting diagnoses (Coronary Artery Disease, Renal Disease, Hypertension, and Neuropathy) are permanently stored in DQCMS. Site-/provider-specific diagnoses may be added to the list. To add, modify, or delete a diagnosis, click the **New** button next to the diagnosis and enter the information. **NOTE:** The new diagnosis will not be listed specifically on the patient’s IPP; rather, it will be listed as Other.

• **Diabetes Type** – Select the type of diabetes (Type 1, Type 2, Prediabetes, GDM, or Unknown) from the pull-down list.

**Saving Patient Demographics**

Remember to click the **Save and Close** button after all edits to return to the Clinical Information Data Entry Screen. The data will not save if the required fields (noted with a red asterisks * sign) are not completed.
MENU DESCRIPTIONS

File

File menu options are available by selecting File on the menu bar.

Patient

- **New** – Opens a blank Demographics screen to allow the user to enter new patient information.
- **Find** – Searches for a patient by medical record number or social security number.

Print

Print menu options are only available when a report or graph is viewed. The print menu will be disabled (not available) when portions of the DQCMS software are viewed that are not printable, such as data entry screens.

- **Page Setup** – Customizes the page setup using the following three tabs:
  - **Print Options** allows the user to change the page margin sizes.
  - **Page** allows the user to select the page orientation (portrait or landscape), choose the paper size and source, and select a printer. The printer is already set to the default printer. If a different printer is desired, select **Use Specific Printer** and click **Printer**. Select the printer from the pull-down list and click **OK**. If the printer is not in the pull-down list, click **Network** to select the printer from the network, and click **OK**.
  - **Columns** tab is not used for the DQCMS application.