

AIM

Decrease the incidence of “no PMH/PSH/FH on file” and “no active hospital problems” documented in Pediatric Hospital Medicine (PHM) H&P notes to less than 5% over 4 months

BACKGROUND

- The electronic health record (EHR) provides many benefits, but can allow for incomplete documentation
- In the EHR, Epic, when information is in the history tab, it can be hyperlinked into a History & Physical (H&P) note using a SmartLink
- If there is no history in the tab, the SmartLink will be empty (Figure 1)
- A wildcard (***), or hard stop, prevents users from signing a note until it is addressed
- Wildcards can be used as a clinical decision support (CDS) tool to improve documentation (Figure 2a)

METHODS

- Quality improvement methodology
- 1129 patient encounters admitted between 3/1/2021- 6/30/2021 to PHM resident teams, which includes pediatric and rotating resident providers

Interventions: Creation and implementation of the CDS tool into the PHM H&P template (#1), Housestaff meeting (#2), and email reminder (#3) as seen in Figure 3

Outcome measures: Percent of H&P's with “no PMH/PSH/FH on file” and “no active hospital problems” (Figure 3)

Process measures: Percent of H&Ps that used the PHM H&P note template which contained CDS tool (Figure 2ab)

Balancing measures: Percent of H&Ps that free texted FH as “none” rather than pertinent FH positives or negatives

Before

Past Medical History No past medical history on file.
Past Surgical History No past surgical history on file.
Family History His family history is not on file.
Problem List Active Problems:
* No active hospital problems. *

(Figure 1: Empty SmartLinks)

Intervention

Past Medical History

@CERMSGREF(1003806:29867;1003807:29920,1)@

Indicates a RULE

RULE
IF “No PMH on file” would appear,
THEN display 29867 (SmartText)

RULE
IF PMH is filed in History Section,
THEN display 29920 (SmartText)

Past Medical History
Click **Past Medical History** to update, close window, and then right click to refresh this SmartLink. If there is no PMH, then delete section and type “None”. ***

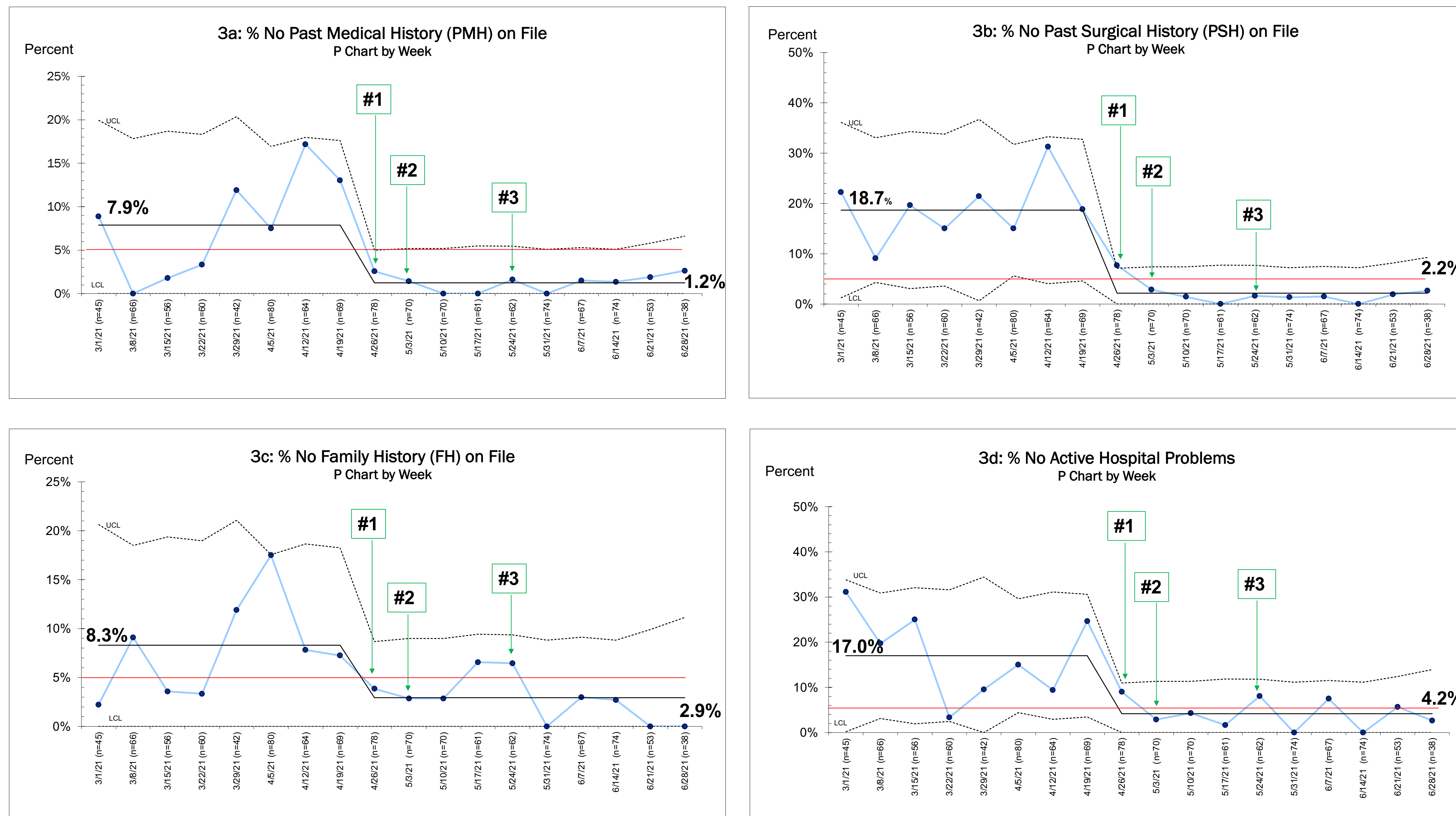
(Figure 2a. The CDS tool)

After

Past Medical History (Figure 2b. Filled SmartLinks)
Moderate persistent asthma
Unconjugated hyperbilirubinemia
Past Surgical History
None
Family History
Her family history includes Diabetes type II in her father; No Known Problems in her mother.
Problem List
Principal Problem:
Acute respiratory insufficiency
Active Problems:
Fever in pediatric patient

RESULTS

Outcome Measures (Figure 3)



- After the intervention of the CDS tool, special cause variation was seen with improvement to 1.2%, 2.2%, 2.9%, and 4.2% respectively

Process Measure

- Utilization of the PHM H&P template remained high at 87.2% without special cause variation

Balancing Measure

- No changes in balancing measure noted

CONCLUSIONS

- Our aim was met, surpassing our goal of <5%
- A simple CDS tool was associated with a decreased incidence of “no PMH/PSH/FH on file” and “no active hospital problems” in H&P notes
- Resident utilization of templates remained high and reminders to use the template did not further increase its use
- Future directions would involve implementation into other areas of the hospital

LIMITATIONS

- Variation in provider documentation habits exist, including individual providers using own H&P template
- No subspecialties services, advanced practice provider teams, or private pediatricians with admitting privileges included
- Unable to evaluate accuracy of documented history

FUTURE DIRECTIONS

- Implementation into other specialty templates
- Wider usage for components of required documentation