

Developing a Tracking Tool for Continuous Glucose Monitor Prescriptions Among Children and Young Adults with Type 1 & Type 2 Diabetes

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BACKGROUND

Rates of Continuous Glucose Monitor (CGM) uptake remain suboptimal despite evidence that CGM use improves diabetes control. Successful CGM uptake requires a multi-disciplinary team of prescribers, pharmacists, diabetes educators and administrative staff. Ability to track the process is a strategy to increase uptake.

METHODS

Inability to track new CGM prescriptions through initiation, fulfillment and patient education and was identified in a key driver diagram of barriers to uptake. Process mapping was completed with input from a multi-disciplinary team. Iterative Plan-Do-Study-Act cycles were undertaken to develop a tracking tool which was integrated into the Cerner electronic medical record (Figure 1).

Figure 1: PDSA Cycles and Usage

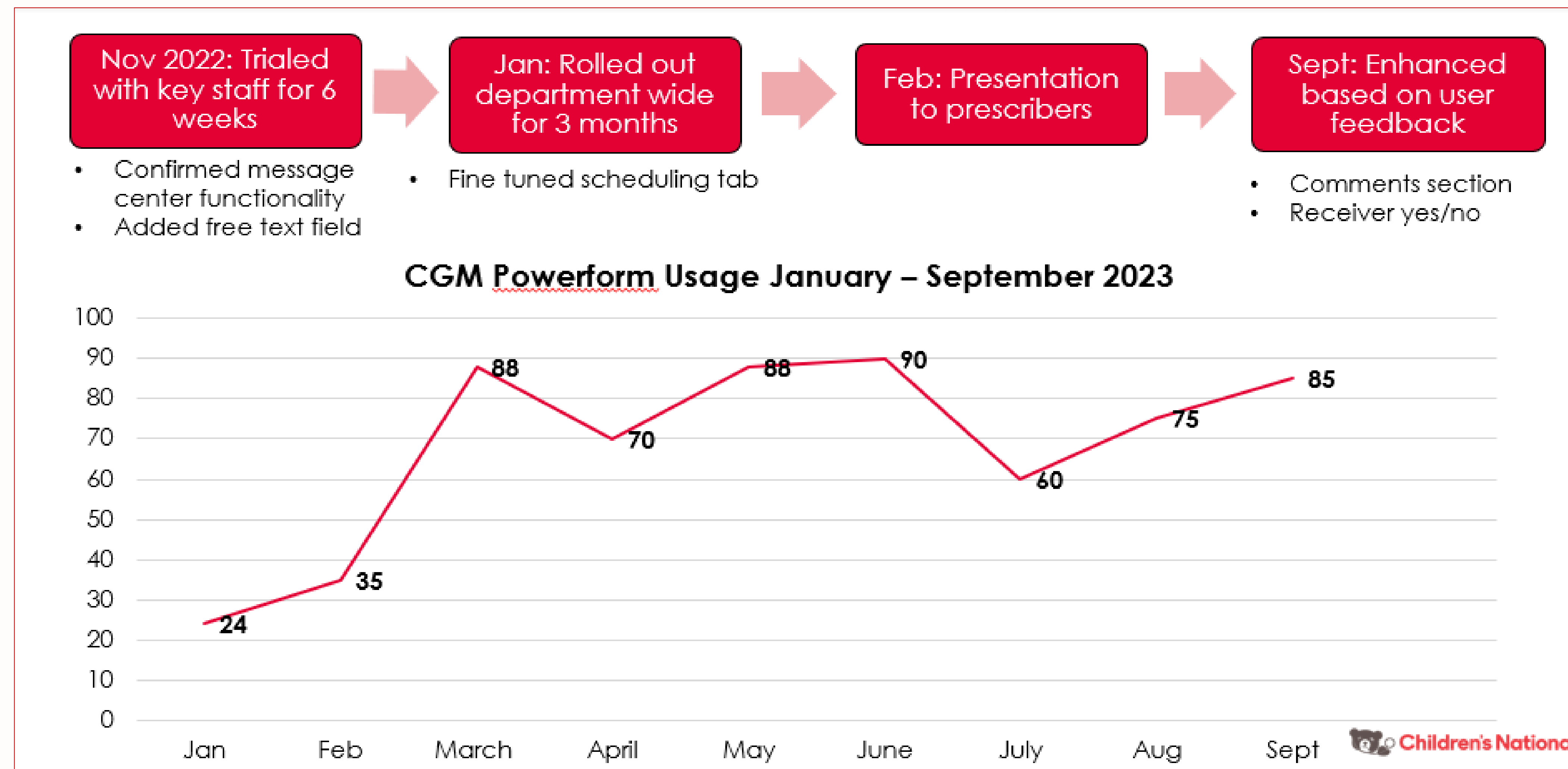


Figure 2: CGM Powerform

RESULTS

The CGM Powerform (CGMPF) consists of four tabs accessible for documentation by a multi-disciplinary team (Figure 2). When initiated by the prescriber, the CGMPF sends a prompt to the pharmacist alerting of a new CGM request. Separate tabs allow for documentation of insurance-required record submission, prior authorizations and appeals for patients with durable medical equipment or pharmacy benefits, and patient education. A total of 615 CGMPFs (Figure 1) were initiated since inception.

CONCLUSIONS

A CGMPF embedded in the electronic medical record creates a centralized location for documentation of new CGM prescriptions and allows for a multi-disciplinary team to follow progress. Extracted data from this form will identify areas for further process improvement and disparities in the process. The QI team plans to implement a similar form to track insulin pump initiation.