Diabetes Education Tracking Software
User Manual
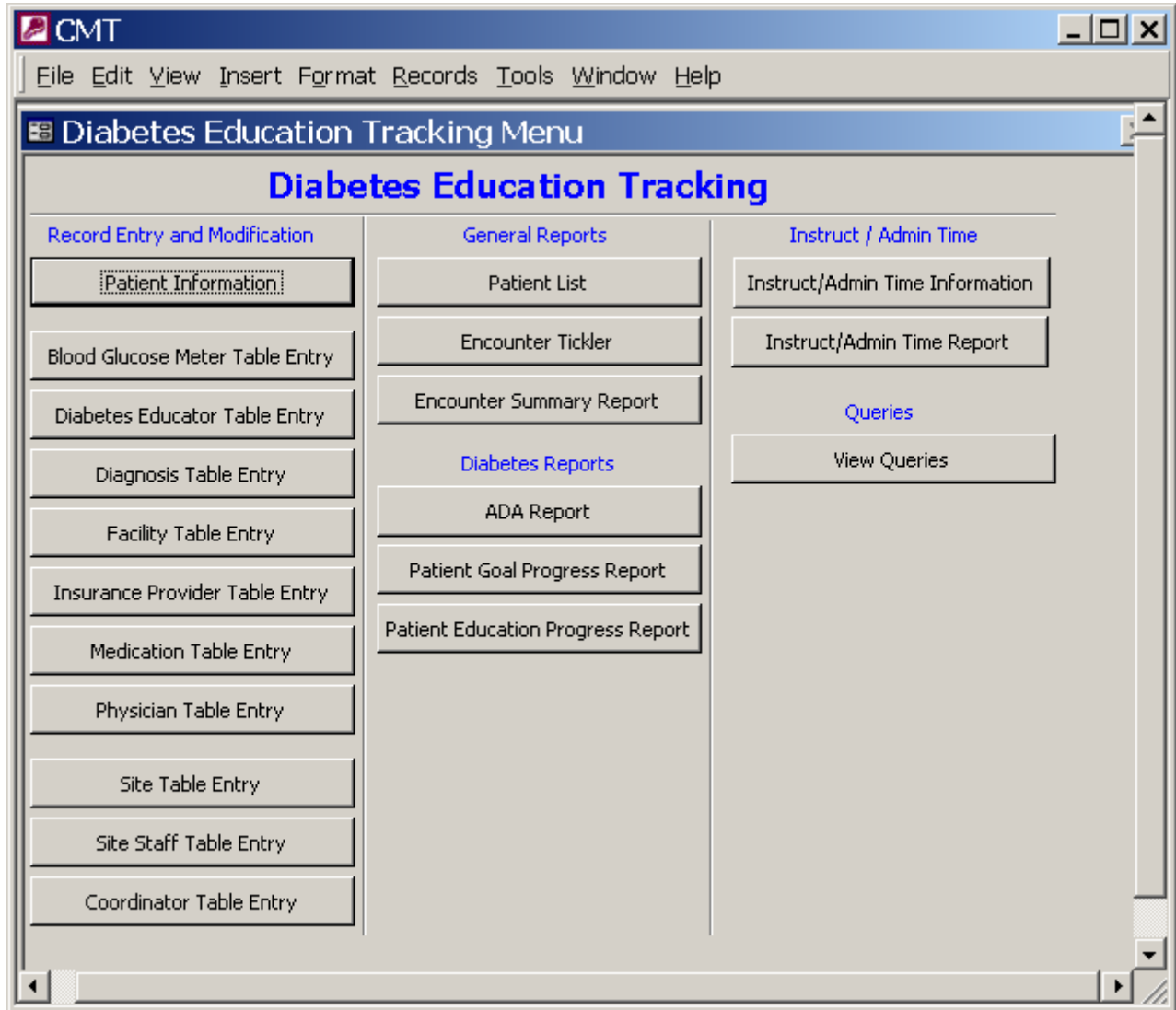
Diabetes Education Tracking Software

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Diabetes Educator Tracking Software

Installing the Database

To install the database for a single user, download and save the CMT.mdb file to the desired folder on a local drive/computer. For multiple users, install the database on a network drive. Users can be given access rights/permissions to that drive, map the drive to their computer, and create a shortcut on their desktop to access the live database.

Opening the Database

To open the database, double click the "Shortcut to CMT.mdb" icon on your desktop. The Diabetes Education Tracking Menu will appear (Fig. 1)
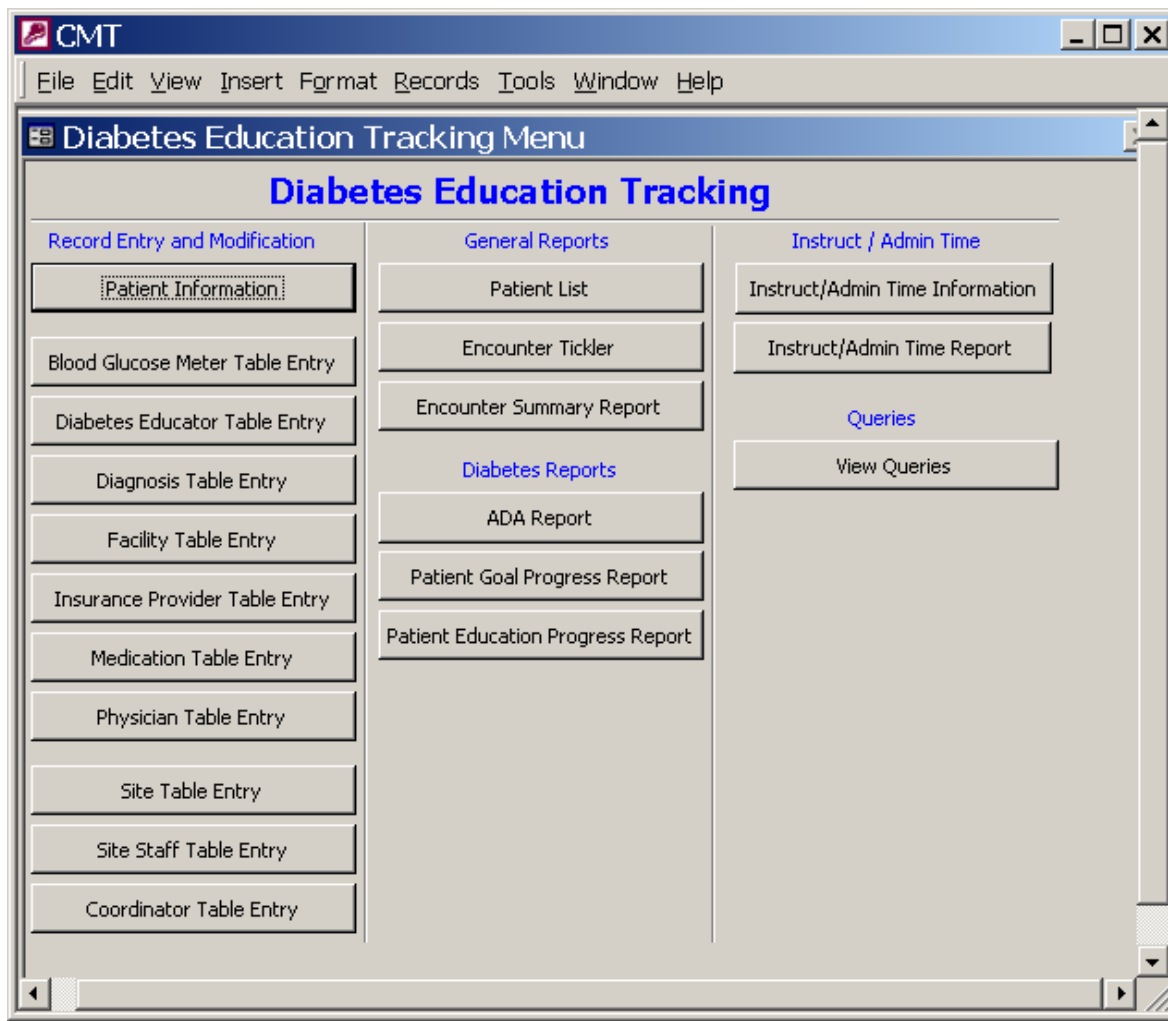

Figure 1

The Diabetes Education Tracking Menu

The Diabetes Education Tracking Database Main Menu is composed of 5 sections: Record Entry and Modification, General Reports, Diabetes Reports, Instruct/Admin Time, and Queries.

Record Entry and Modification Section
This section includes buttons to access the main Patient Information screen, as well as table information for Diabetes Educators, Physicians, Diagnoses, etc., which appear as selections in the drop-down fields throughout the database.

Entering Values on Main Menu for Blood Glucose Meters, Diabetes Educators, Diagnoses, Facilities, Insurance Providers, Medications, and Physicians

- Click on the "Diagnosis Table Entry" button or other "Table Entry" button from the main menu. A pop-up window (Fig. 2) will appear with all of the values for that category currently in the database table/available in the drop-down menus. To add a new one, scroll down the window to the blank line. Type in the new value and close the window. It will now automatically save to that table and appear as an alphabetized choice in the drop-downs within the database.

  Please note: If you are looking to add an entry for another category other than those listed on the Main Menu, please contact your database administrator/programmer. These will need to be entered "behind the scenes".
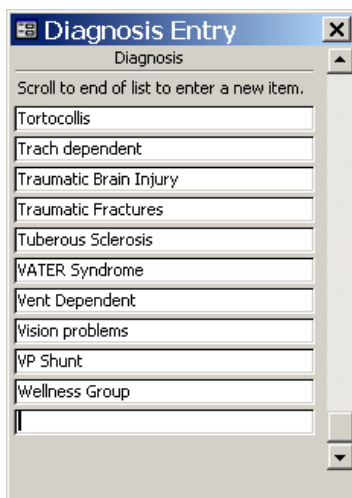

Figure 2

Entering Values on Main Menu for Coordinator, Site Staff, & Sites for ADA Recognition Application

Coordinator Table Entry
- Click on the "Coordinator Table Entry" button from the main menu. A pop-up window (Fig. 3) will appear for you to enter your organization's Diabetes Self-Management Education (DSME) Coordinator information. There is only one designated Coordinator and thus one Coordinator record in the database. Therefore, if this information changes, you must edit the record on this screen. The Coordinator will also appear automatically on the Site form for each Site in the Site table.
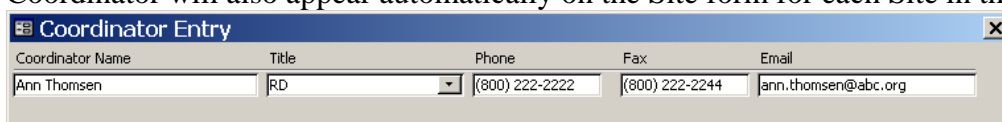

Figure 3

Site Staff Table Entry

- Click on the "Site Staff Table Entry" button from the main menu. A pop-up window (Fig. 4) will appear with all of the values for that category currently in the database table. To add a new one, scroll down the window to the blank line. Type in the new values and close the window. Add Instructional Team members and Instructional Staff here with their respective Sites. The Site drop-down on this form will be populated from the Facility table within the database. If you don't see the facility you need, please close this form, go back to the Main Menu and enter it by clicking the "Facility Table Entry" button. A Staff Member entered here will automatically be added to the Site form on the Staff Member's respective Site/Facility record.

Figure 4

Site Table Entry

- Click on the "Site Table Entry" button from the main menu. A pop-up window (Fig. 5) will appear with all of the values for that category currently in the database table. To add a new one, click the "New Site" button, enter the data and click "Save Site". Coordinator and Site Staff values on the right side of the form are automatically populated from the tables within the database.

Figure 5

Patient Information

The Patient Information button brings you to the main data entry screen (Fig. 6). Here you will locate/enter new Patients, record new encounters, assessments, and diagnoses. The top portion of the screen displays Patient demographics as well as information regarding the Patient's status with the Diabetes Educator. The middle section of the screen consists of several "windowpanes" which summarize and provide at-a-glance data entered via the navigation buttons on the bottom left of the screen. Also indicated within a thick black box on the right side of the screen is the Patient Search section. The bottom of the screen houses the navigation buttons for entering data for the selected patient, creating new patients, saving and deleting patients, and generating clinical note summaries.

Figure 6

- ADDING A NEW PATIENT

  Search for the Patient to see if he/she exists in the database:
  Go to the Patient Search section on the right side of the Patient Information screen. Enter in an ID Number, Last Name, First Name, or Diabetes Educator from the drop-down lists to search (Typing the first letter of a name will bring you to the right place in the list quickly). Click the "Search for Patients" button. You may search using a combination of fields, such as a first and last name, to further narrow the search. Please note that once you have searched, you will be seeing a subset of the records in the database. For example, you may search on "Brown" as a last name. There may be several Browns in the database. Check the record indicator number at the bottom left of the main Patient Information form to see which record you are on and how many records you are viewing. You may see "Record 1 of 4" if 4 Browns have been found. If the current record displayed isn't the record you are looking for, you can use the "VCR-like" ◀ back and ▶ forward buttons to move to the previous and next records, respectively, until you find the record you are looking for.

  Please note: To get back to viewing ALL Patients, click on the "Show All Patients" button in the Patient Search area. You are now viewing ALL records in the database instead of just the subset of Browns.

  If nothing comes up, the Patient has not yet been entered into the database, so click the **"New Patient"** button on the bottom of the screen to clear the screen fields and enter the Patient information.

  Required fields are in blue (Omitting these fields will generate a pop-up error message when you save the form):
    o Full Name (Last and First Names)
    o ID Number – Number unique to a Patient in your organization
    o Diabetes Educator
    o Date of Referral

  Click the **"Save Patient"** button on the bottom of the screen. You must save the record before any other data can be entered on pop-up screens.

- ADDING DIAGNOSES, ENCOUNTERS, MEDS, ASSESSMENTS, ETC:

  Click the "Diagnosis", "Encounter", or "Meds", etc. button at the bottom left of the screen. This will pop up an entry screen. All records entered of that type for the Patient you are currently viewing will be retrieved. Once this screen appears, you will see the latest (most recent date) entry record of that type for the current patient. **Be sure to click the "New" button to clear the screen**, or you will overwrite an existing record! If you wish to, you can navigate through these records using the navigation arrows next to the Record number on the bottom of the pop-up screen if necessary.

  Click the "Save" button and close the window to return to the main Patient Information screen. You will notice that the record you just entered will now automatically appear in the corresponding

"windowpane" on the main Patient Information screen for that Patient (if your database has that specific windowpane).
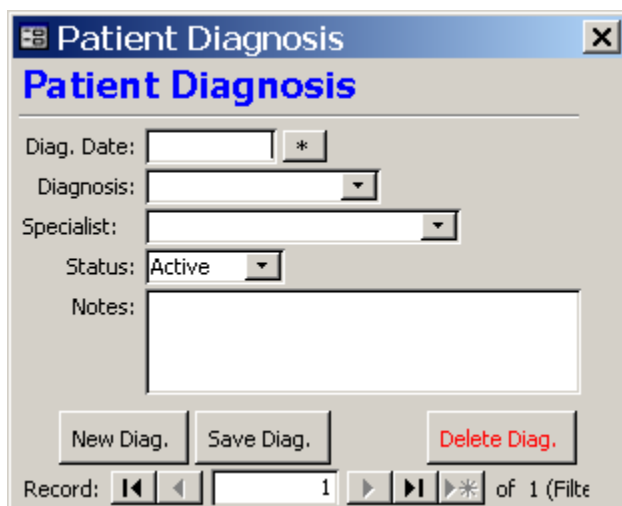
- **Diagnosis**: Clicking this button will bring up the following Patient Diagnosis screen (Fig. 7). Enter the Diagnosis information. Status has a default value of "Active".

  To enter multiple Diagnoses, enter them separately (even though they may have the same date) instead of combining using the Notes field. That way if one Diagnosis has a Status of "Resolved" and another "Active", they can be tracked separately.

  Required fields are in blue (Omitting these fields will generate a pop-up error message when you save the form):
    o Diagnosis Date
    o Diagnosis

  Click the "Save Diag." Button to save the record and close the window to return to the main Patient Information screen.

Figure 7

- **Encounter:**

  Clicking this button will bring up the following Patient Encounter screen (Fig. 8). Enter the Encounter information. Please note that Scheduled Time must be entered in the format "HH:MM AM" or "HH:MM PM".

  For a future Encounter to appear on the Encounter Tickler Report accessed from the database Main Menu, you MUST enter the top half (above the line) of the Encounter pop-up entry screen. This portion drives the report.

  Required fields are in blue (Omitting these fields will generate a pop-up error message when you save the form):
  - Scheduled Date

  Click the "Save Encounter" Button to save the record and close the window to return to the main Patient Information screen. You will notice that the windowpane for Encounters on the Patient Information screen will display that Encounter as "Pending".

  Once the Encounter has been completed, go back to the Encounter screen for the Patient to fill in the bottom portion (below the line) of the Encounter record. Filling in an Actual Date will cause the windowpane on the Patient Information screen to display "Completed" and the Encounter to drop off the Encounter Tickler "to-do" List.

Figure 8

- **Meds:**

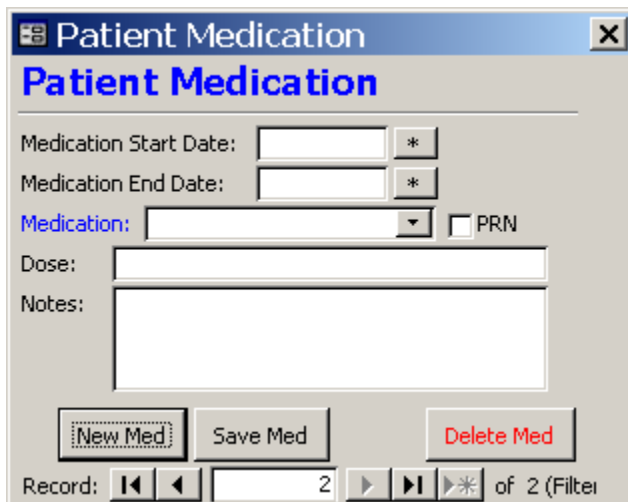 Clicking this button will bring up the following Patient Medication screen (Fig. 9). Enter the Medication information.

  Required fields are in blue (Omitting these fields will generate a pop-up error message when you save the form):
    o Medication

  Click the "Save Med" Button to save the record and close the window to return to the main Patient Information screen.

Figure 9

- **Function:**

Clicking this button will bring up the following Function screen (Fig. 10). Enter the Function information.

Required fields are in blue (Omitting these fields will generate a pop-up error message when you save the form):
  - o   Assessment Date

Click the "Save Function Assess" Button to save the record and close the window to return to the main Patient Information screen.

Figure 10

- **Diabetes History:**

  Clicking this button will bring up the following Diabetes Assessment screen (Fig. 11). Enter the Diabetes Assessment information. Default values for checkboxes are "No", and defaults for drop-downs are "Never", "None" or "Not At All", as indicated in Figure 11. Please note that you may also print a copy of this screen/form by clicking the "Print Assessment" button on the bottom left of the screen.

  Required fields are in blue (Omitting these fields will generate a pop-up error message when you save the form):
  - Assess Date

  Click the "Save Assessment" Button to save the record and close the window to return to the main Patient Information screen.

Figure 11

- **Pre/Post Knowledge Assess:**

  Clicking this button will bring up the following Diabetes Education Assessment screen (Fig. 12). Enter the Diabetes Education Assessment information. **Please note**: The Patient Name field at the top of the screen will be automatically populated from the Patient record you are currently viewing. Also, you may print a copy of this screen/form by clicking the "Print Assessment" button on the bottom left of the screen.

  Required fields are in blue (Omitting these fields will generate a pop-up error message when you save the form):
  o Assessment Date

  Click the "Save Assessment" Button to save the record and close the window to return to the main Patient Information screen.

Figure 12

- **Patient Goals:**

  Clicking this button will bring up the following Patient Goals screen (Fig. 13). Enter the Patient Goals information. **Please note**: The Patient ID field at the top right of the screen will be automatically populated from the Patient record you are currently viewing. Also, you may print a copy of this screen/form by clicking the "Print Goals" button on the bottom left of the screen.

  Required fields are in blue (Omitting these fields will generate a pop-up error message when you save the form):
    o Goals Assess Date

  Click the "Save Goals" Button to save the record and close the window to return to the main Patient Information screen.

Figure 13

- MODIFYING PATIENT INFO:

  Search for the Patient first to see if he/she exists in the database. (See above instructions):

  - To change demographic and status information on the main Patient Information form, modify fields and click the "Save Patient" button.
  - On Diagnoses, Encounters, Diabetes Assessments, etc., click the 'Edit' button on the corresponding "windowpane" to get a pop-up directly to that specific record, and click the "Save" button before closing the pop-up window.

- GENERATE CLINICAL NOTE BUTTON:

  This tool will save you from copying and pasting back and forth between windows when you need to go to another electronic charting method to enter a Note with results from Encounters, Mental Health Instruments, Diagnoses, etc. just entered into the CMT database.

  1. Choose a date: Enter a date in the white text box to the right of the button **OR** click the asterisk button to the right of the date field to pop up a calendar for reference (In case you are looking for "Last Friday", for example, and don't know the date off the top of your head).

  2. Click the "Generate Clinical Note by Date" button and a Clinical Note Summary Screen window (Fig. 14) will pop up which will summarize all events for **the day you selected** for **that patient** (the record you are currently viewing).

     Any Encounters matching that date, **Any Diabetes Assessments** recorded matching that date, **Any Goals** matching that date, and **ALL Diagnoses for that Patient (regardless of date)** will appear. We included all Diagnoses for an at-a-glance reference--you may not wish to copy and paste an earlier Diagnosis that doesn't relate to the date with which you are concerned.

Figure 14

3. To copy the text (as much as you need to transfer to another program):
   Click inside the box where the summary appears. Highlight the text you want to copy. Right-click and choose "Copy" from the menu. (Not highlighting first and just right-clicking will highlight everything and save time if that's what you want to do.)

4. Paste the text into the other electronic charting location:
   Open the program into which you wish to paste your Note. Once you choose your Patient in that system, go to where you normally enter a Note to type in or copy in information and do a Control-V sequence. (Hold down the "Cntrl" key in the bottom left of the keyboard and then press the "V" letter key on the keyboard). This is a shortcut to the Paste command. Your electronic charting system may not let you Right-click and choose "Paste" as we did with "Copy".

Please Note: You may also print from this screen by clicking the printer icon on the top right of the screen.

General Reports

Patient List

Clicking on the "Patient List" button will bring up the following Patient List Parameters screen (Fig. 15). The Patient List report generated is a list of Patients assigned to the selected Diabetes Educator. This report can be sorted by first name, last name, diagnosis, insurance, PCP (Primary Care Physician), or status.
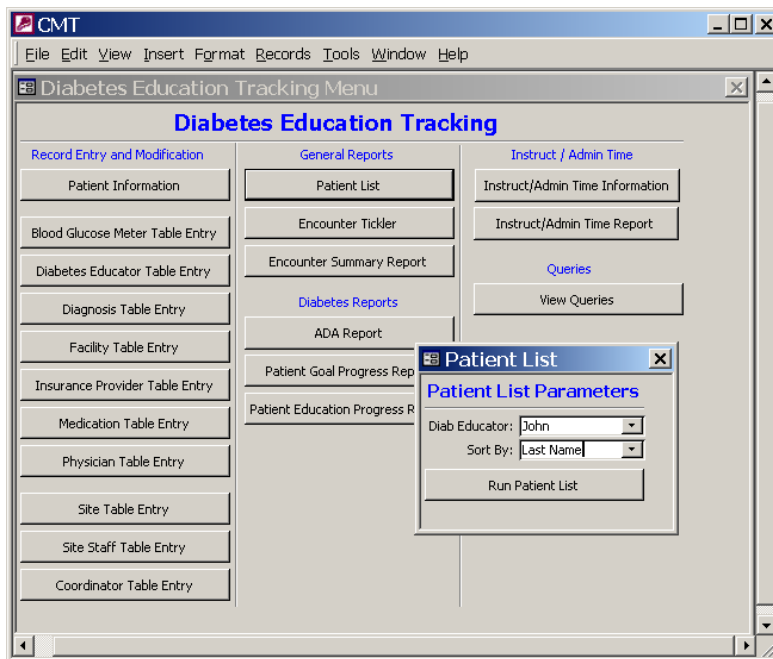
Figure 15

Click "Run Patient List" to run the report (Fig. 16).

Figure 16

Encounter Tickler

- Clicking on the "Encounter Tickler" button will bring up the following Tickler List Parameters screen (Fig. 17). The Encounter Tickler report generated is a Tickler/To-do list for contact by date range for Patients assigned to the selected Diabetes Educator.
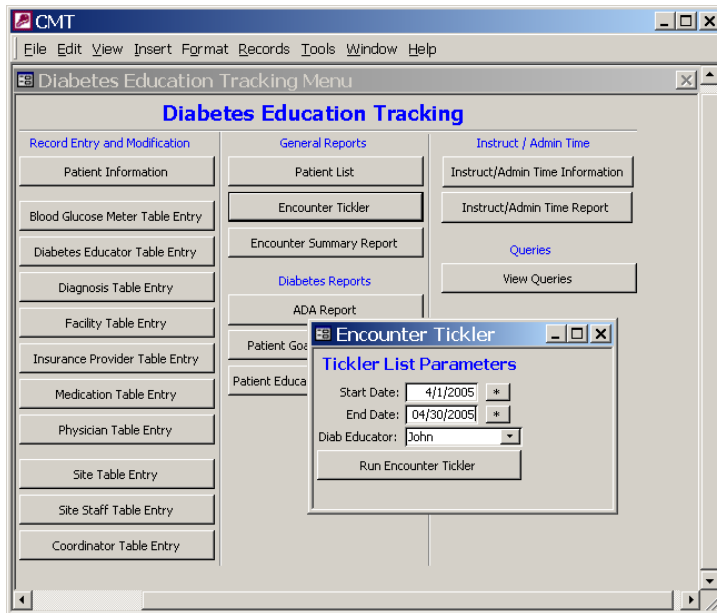
Figure 17

Click "Run Encounter Tickler" to run the report (Fig. 18).
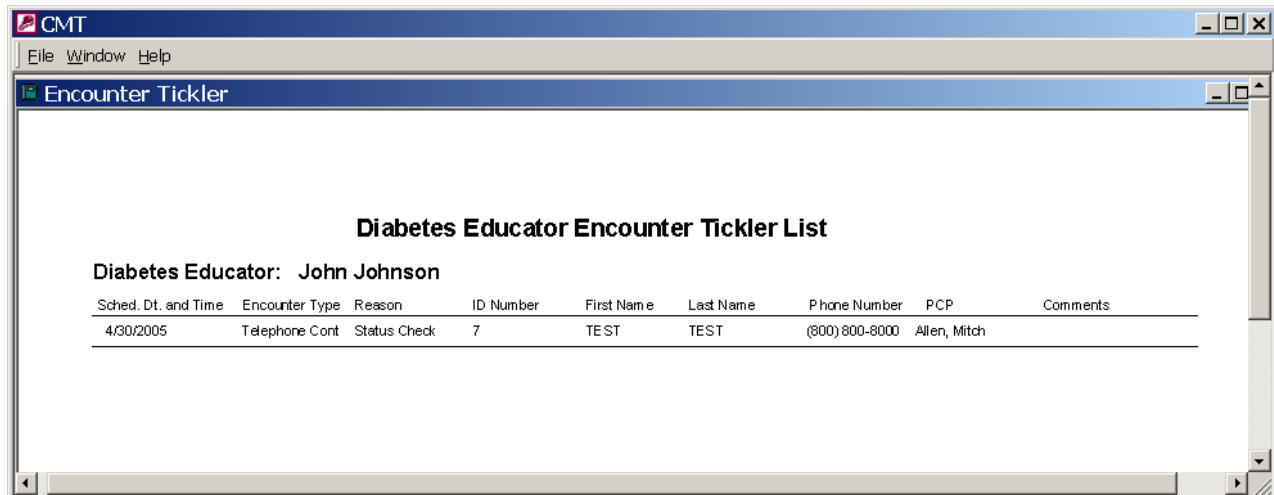
Figure 18

Encounter Summary

- Clicking on the "Encounter Summary" button will bring up the following Encounter Summary List Parameters screen (Fig. 19). The Encounter Summary report generated is a summary of Encounters by date range for Patients assigned to the selected Diabetes Educator. This report can be sorted by first name, last name, encounter date, encounter type, or encounter outcome.
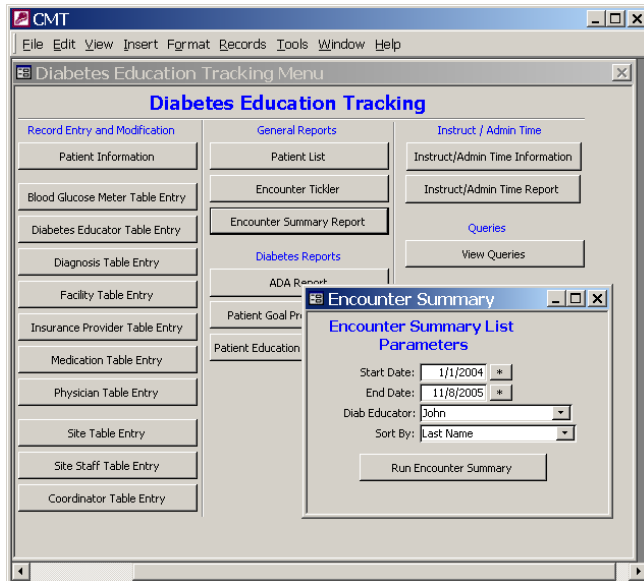
Figure 19

Click "Run Encounter Summary" to run the report (Fig. 20).

Figure 20

Diabetes Reports

ADA Report
- Clicking on the "ADA Report" button will bring up the following ADA Report Parameters screen (Fig. 21). The ADA Report generated is a summary report by date range for submission to the American Diabetes Association.
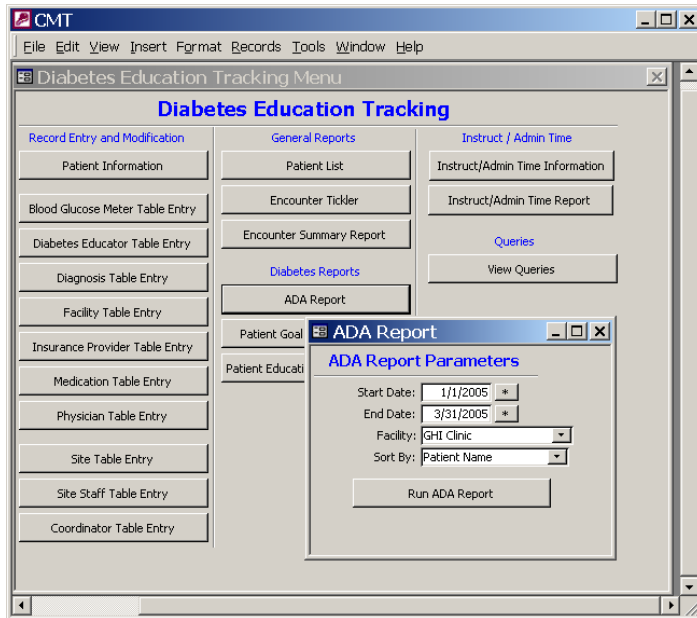
Figure 21

Click "Run ADA Report" to run the report (Fig. 22).

Figure 22

Patient Goal Progress Report

- Clicking on the "Patient Goal Progress Report" button will bring up the following Patient Goal Progress Parameters screen (Fig. 23). The Patient Goal Progress Report generated is a summary report generated from the Patient Goal screen sorted by Diabetes Educator.
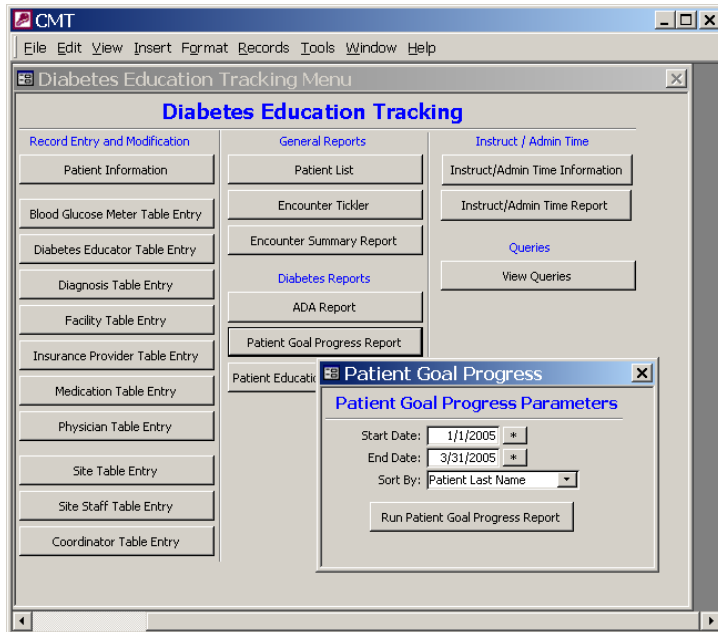
Figure 23

Click "Run Patient Goal Progress Report" to run the report (Fig. 24).
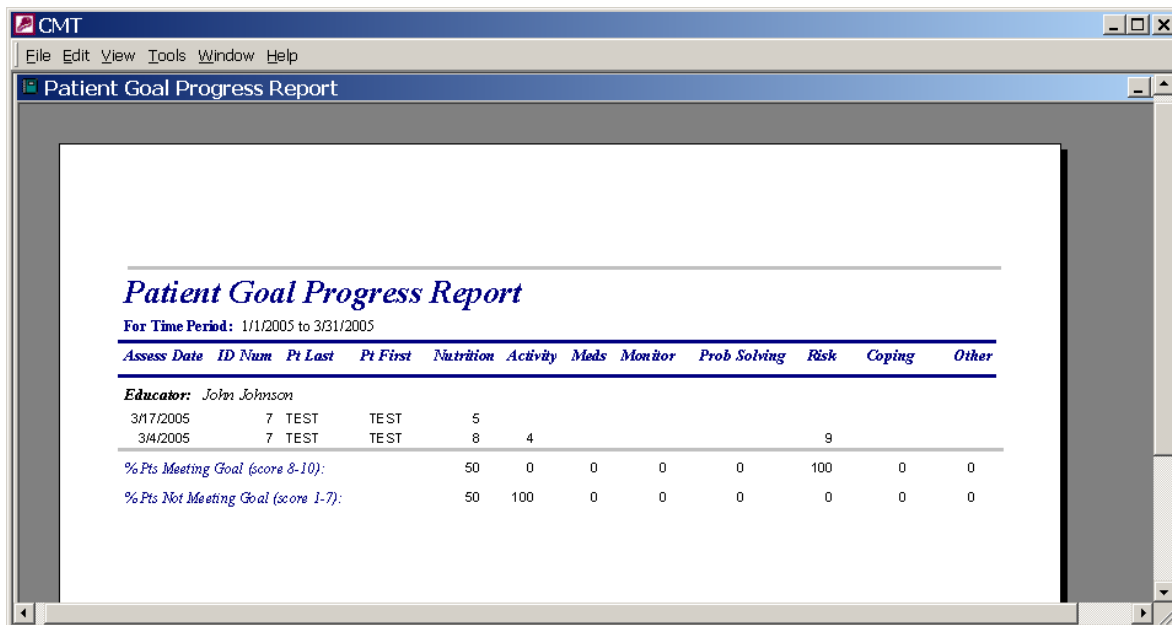
Figure 24

Patient Education Progress Report

- Clicking on the "Patient Education Progress Report" button will bring up the following Patient Education Progress Report Parameters screen (Fig. 25). The Patient Education Progress Report generated is a summary report generated from the Patient Diabetes Education Assessment screen for the selected Diabetes Educator.
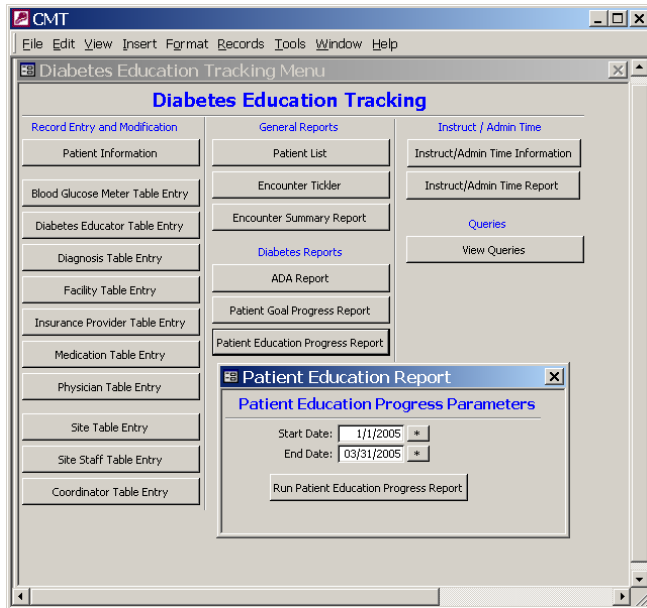
Figure 25

Click "Run Patient Education Progress Report" to run the report (Fig. 26).

Figure 26

Queries

View Queries

Clicking on the "View Queries" button will bring up the following Queries screen (Fig. 27).

- Generate queries by entering a date range (Start and End Date) and choosing the button corresponding to the query you wish to run.
- These listed Queries are "canned" queries. Any queries not listed here are not available to the users unless this screen is customized by a programmer.
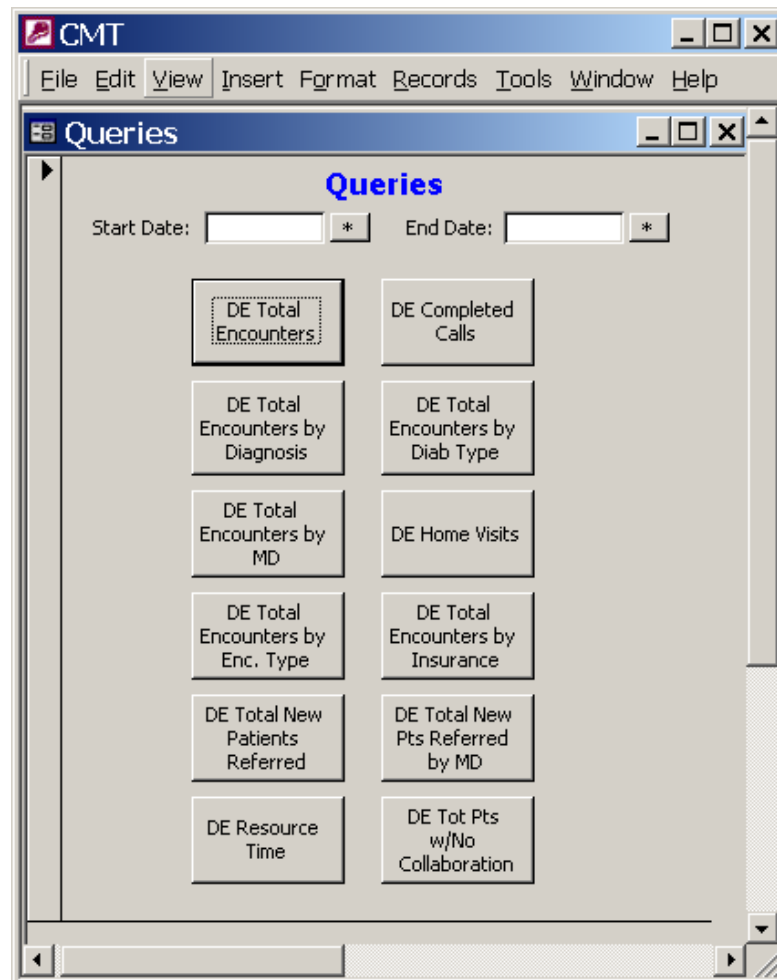
Figure 27

DE Total Encounters:
Clicking on the "DE Total Encounters" button will bring up the following query screen (Fig. 28). This query displays the number of Diabetes Educator-Patient Encounters falling within the entered date range.

Figure 28

DE Completed Calls:
Clicking on the "DE Completed Calls" button will bring up the following query screen (Fig. 29). This query displays the number of Diabetes Educator Telephone Calls and Average Call Length for Diabetes Educator-Patient Encounters falling within the entered date range.

Figure 29

DE Total Encounters by Diagnosis:
Clicking on the "DE Total Encounters by Diagnosis" button will bring up the following query screen (Fig. 30). This query displays the number of Diabetes Educator-Patient Encounters falling within the entered date range, sorted by Diagnosis. **Please note**: In the CMT database, encounters are not linked with specific diagnoses. Therefore, it cannot be deduced that there were 6 encounters geared specifically for Diabetes management in this time period (see Fig. 30). Rather it suggests that there were 6 encounters within this time period with Patients who have Diabetes in the Problem List.

Figure 30

DE Total Encounters by Diab Type:
Clicking on the "DE Total Encounters by Diab Type" button will bring up the following query screen (Fig. 31). This query displays the number of Diabetes Educator-Patient Encounters falling within the entered date range, sorted by Diabetes Type. The Type of Diabetes with which a Patient has been diagnosed is recorded on the Diabetes History/Assessment screen.

Figure 31

DE Total Encounters by MD:
Clicking on the "DE Total Encounters by MD" button will bring up the following query screen (Fig. 32). This query displays the number of Diabetes Educator-Patient Encounters falling within the entered date range, sorted by Primary Care Physician.
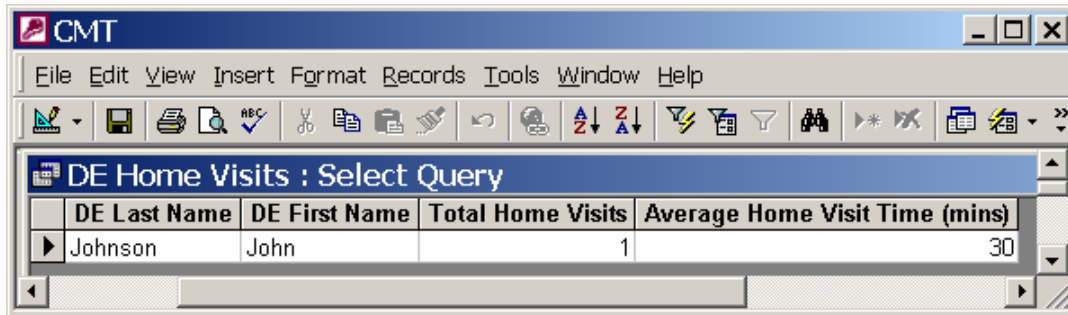
Figure 32

DE Home Visits:
Clicking on the "DE Home Visits" button will bring up the following query screen (Fig. 33). This query displays the number of Diabetes Educator-Patient Encounters of type Home Visit falling within the entered date range, and the Average Home Visit Time with those Patients.

Figure 33

DE Total Encounters by Enc. Type:
Clicking on the "DE Total Encounters by Enc. Type" button will bring up the following query screen (Fig. 34). This query displays the number of Diabetes Educator-Patient Encounters falling within the entered date range, sorted by Type of Encounter.
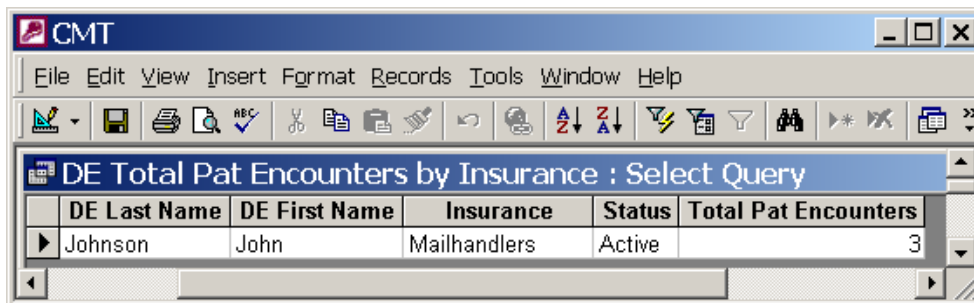
Figure 34

DE Total Encounters by Insurance:
Clicking on the "DE Total Encounters by Insurance" button will bring up the following query screen (Fig. 35). This query displays the number of Diabetes Educator-Patient Encounters falling within the entered date range, sorted by Insurance Provider and Patient Status.
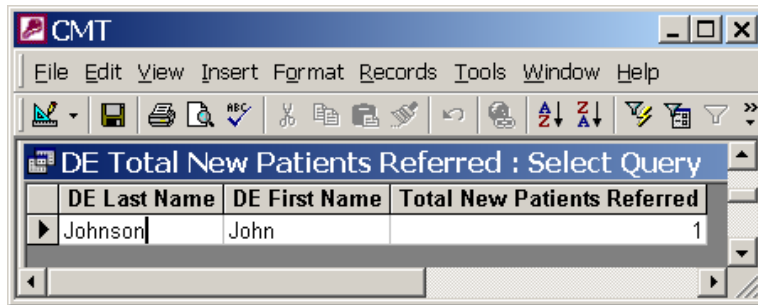
Figure 35

DE Total New Patients Referred:
Clicking on the "DE Total New Patients Referred" button will bring up the following query screen (Fig. 36). This query displays the number of New Patients referred to the Diabetes Educator with a Date of Referral within the entered date range.
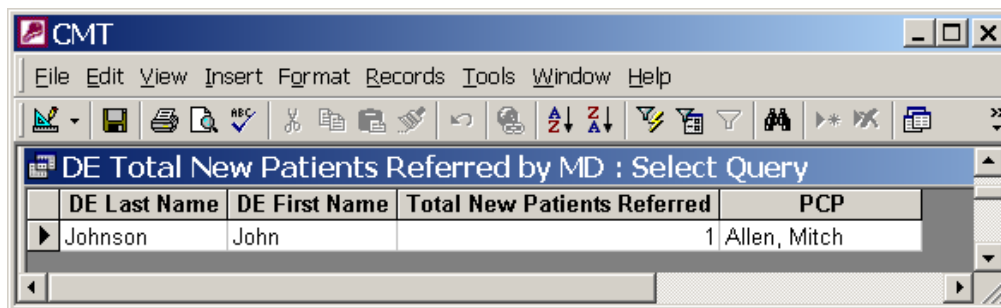
Figure 36

DE Total New Patients Referred by MD:
Clicking on the "DE Total New Patients Referred by MD" button will bring up the following query screen (Fig. 37). This query displays the number of New Patients referred to the Diabetes Educator with a Date of Referral within the entered date range, sorted by Patient's Primary Care Physician.
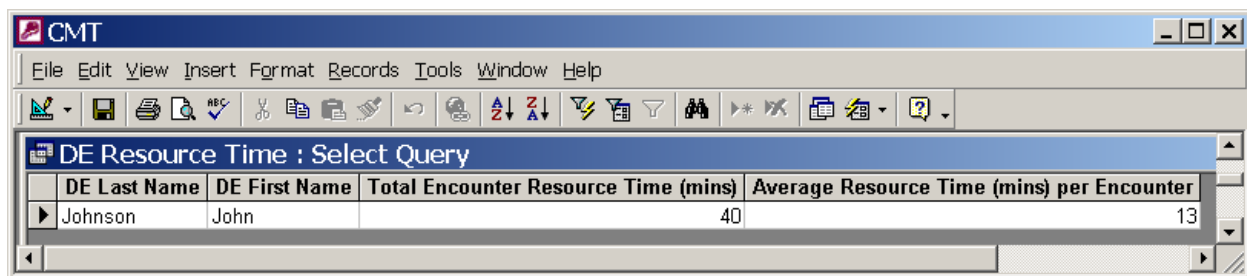
Figure 37

DE Resource Time:
Clicking on the "DE Resource Time" button will bring up the following query screen (Fig. 38). This query displays the Total Diabetes Educator-Patient Encounter Resource Time within the entered date range, and the Average Resource Time for those Encounters.

Figure 38

DE Tot Pts w/No Collaboration:
Clicking on the "DE Total Pts w/No Collaboration" button will bring up the following query screen (Fig. 39). This query displays the Number of Patients for which there has been no collaboration for Diabetes recorded (as evidenced by an unchecked "Diab Collaboration" checkbox on the main Patient Information form). This query is mainly used as a "check" to identify those Patients who need collaboration, which will also be displayed on the ADA Report accessible from the Main Menu.
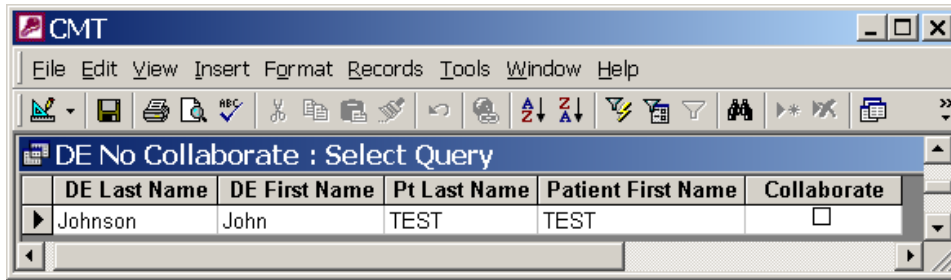
Figure 39

Instruct/Admin Time

Instruct/Admin Time Information

Module to enter Diabetes Educator time not spent on Patient Encounters such as meeting times, education, and vacation (Fig. 40). Enter the Instruction or Administrative Time Information. The total time for the day will be automatically calculated. Each day should be entered separately.

> **Click the "Save Day's Time" Button** to save the record and close the window to return to the Diabetes Education Tracking Menu (Main Menu).

Figure 40

Instruct/Admin Time Report

- Clicking on the "Instruct/Admin Time Report" button will bring up the following Instruct/Admin Time Report Parameters screen (Fig. 41). The report generated is a summary report for all Diabetes Educator database users generated from the Instruction/Administrative Time Daily Entry module.
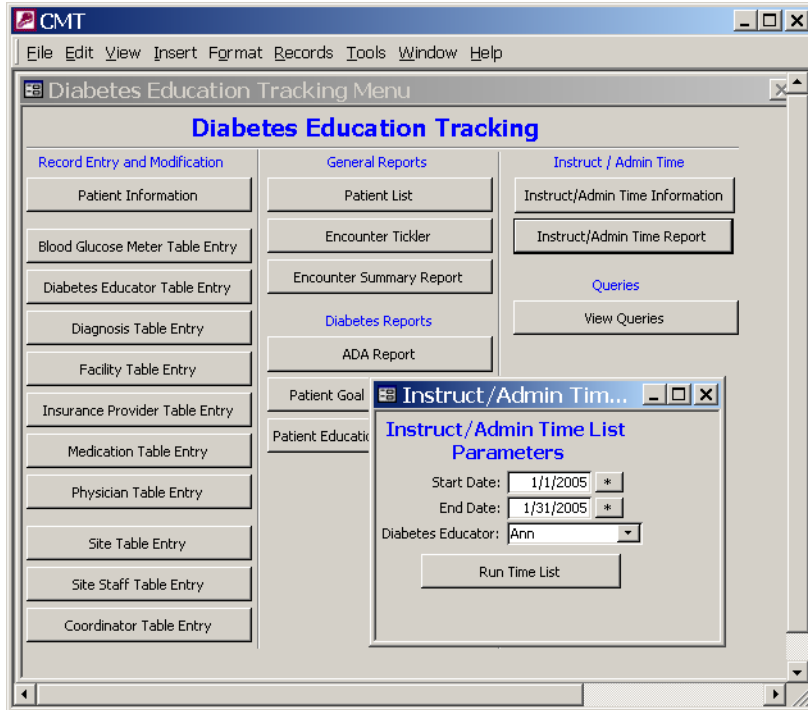
Figure 41

Click "Run Time List" to run the report (Fig. 42).

Figure 42

Tips for Entry / Data Integrity

- Using drop-downs—Always drop-down to select—NEVER type in an entry. If it needs to be added, do so in Value List from the Main Menu or request a change from your database administrator/programmer.

- Dates: If typing in a date, you must use the MM-DD-YYYY format ('03' instead of '2003' will generate an error), or click on the "*" button for a pop-up calendar.

- Consult the Data Dictionary and/or Data Manager for your program when in doubt as to what to enter into a field.

Technical/Programmer Use Only

Following are instructions for revealing and hiding the tables of the CMT software so that programmers may customize it.

1) Right-click on the title bar of the Diabetes Education Tracking Menu.
2) Choose Form Design.
3) Right-click again on the title bar of the Diabetes Education Tracking Menu.
4) Choose Properties.
5) Scroll down to the Form's "On Load" property and click on the words "Event Procedure". Click the button with the 3 dots.
6) Change all the "False" booleans to "True".
7) Close out of the database (all the way).
8) Open it again 2 more times. The 3rd time you should see the database window.

After you make your changes,

Please go to "Tools" on the main Access toolbar. Choose Database Utilities and "Compact and Repair Database". It may take a few moments, but then your windows will pop back up.

Repeat the earlier steps to get to the code window or in Design view of the Main Menu choose View and "Code" from the main Access toolbar. In the SetStartUp Properties, change all of the "True"s back to "False". Close out of the database and go back in 2 more times (3rd time's a charm!) to make sure the database window is no longer visible.

Data Element	Type/Control	Values	Required	Definition
PATIENT INFORMATION				
ID Number	Textbox	Numeric	Yes	Unique Number specific to a Patient in your organization
Last Name	Textbox	Free Text	Yes	Patient's Last Name
First Name	Textbox	Free Text	Yes	Patient's First Name (& Middle Initial, if desired)
DOB	Date field	Date MM/DD/YYYY	No	Patient's Date of Birth
Age	Drop-down	<19; 19-44; 45-64; >= 65	No	Automatically calculated from Patient's DOB
Race	Drop-down	White/Caucasian; Am Indian/Alaskan Native; Black/African Am; Asian/Chinese/Japanese/Korean/Pacific Islander; Hispanic/Chicano/Cuban/Mexican/Puerto Rican/Latino	No	Patient's Race Classification
Sex	Drop-down	M (Male); F (Female)	No	Patient's Gender
Phone	Textbox	Numeric (000) 000-0000	No	Patient's Contact Phone Number
Cell Phone	Textbox	Numeric (000) 000-0000	No	Patient's Cell Phone Number
Email	Textbox	Free Text	No	Patient's Email Address
PCP	Textbox	From PCP Table/Values	No	Patient's Primary Care Physician
PCP Phone	Textbox	Numeric (000) 000-0000	No	Patient's Primary Care Physician Phone Number
Insurance	Drop-down	From Insurance Table/Values	No	Patient's Primary Insurance carrier. Defaults to "Unknown" if not entered
Facility	Drop-down	From Facility Table/Values	No	Care Manager's Facility
Diab Collaboration	Checkbox	Yes/No	No	Has at least 1 RN and 1 RD, as Diabetes Education Instructors, collaborated on Patient?
FPP	Drop-down	1.Disconnected/Avoidance; 2.Confused/Chaotic; 3.Secured/Balanced	No	Patient's Family Pattern Profile: "An assessment of the relationship pattern/style that is most like the family of the patient."
Date of Referral	Date field	Date MM/DD/YYYY	Yes	Date Patient was Referred/Assigned to Care Manager/Diabetes Educator
Care Manager	Drop-down	From Care Manager Table/Values	Yes	Care Manager assigned to Patient
Status	Drop-down	Active; Closed; 1X Only	No	Patient's status with Care Manager

Data Element	Type/Control	Values	Required	Definition
		Closed		*Deceased, Moved, etc.*
PATIENT DIAGNOSIS				
Diag. Date	Date field	Date MM/DD/YYYY	Yes	Date Diagnosis Management began
Diagnosis	Drop-down	From Diagnosis Table/Values	Yes	Patient's Active Problem from Problem List
Specialist	Drop-down	From Physician Table/Values	No	Physician managing the Diagnosis
Status	Drop-down	Active; Resolved	No	Status of the Diagnosis
Notes	Textbox	Free Text	No	Notes relating to the Diagnosis
PATIENT ENCOUNTER				
Scheduled Date	Date field	Date MM/DD/YYYY	Yes	Date for Patient's scheduled phone call/visit
Scheduled Time	Time field	Time HH:MM AM/PM	No	Time for Patient's scheduled phone call/visit
Encounter Type	Drop-down	CM Office Visit; Class; MD Office Visit; Home Visit; Telephone Contact; Group Visit; MHI Conference; Email; Non-Encounter-Related; Diab Initial; Diab Followup; Diab Class 1; Diab Class 2; Diab Class 3; Diab Class 4; Diab Class 5; Diab Class 6; Diab Additional Class; Diab Inpatient; Diab Insulin Start	Yes	Type of Care Manager-Patient Encounter
		Class		*Patient Education*
		Non-Encounter-Related		*Filling out forms, admin, other charting, etc.*
Enc. Reason	Drop-down	DEA Screen; PHQ-9 F/U; MHI F/U; DM F/U; Depression F/U; DM/Depression F/U; Med. Assist.; Medication Mgmt Agreement; Status Check; Resource Management; New Patient	No	Reason for the Care Manager-Patient Encounter

Data Element	Type/Control	Values	Required	Definition
		Med. Assist. = Medication Assistance		Assisting Patients in obtaining Medications (Financial Assistance)
		Medication Mgmt Agreement		Agreement between Physician and Patient re: Narcotic use
		Resource Management		Assisting Patient with Referrals, Procurement, Research, etc. (ex: finding MDs or Nursing Home, obtaining equipment)
Actual Date	Date field	Date MM/DD/YYYY	No	Date Patient Encounter Actually took place
Outcome	Drop-down	Completed; No Show; Cancelled; Reschedule; Wrong Number; No Answer; Left Message; Letter Sent; Disconnected; Deceased	No	Outcome of Care Manager-Patient phone call/visit
		No Answer		*Includes Busy Signal*
Call Attempts to Pts	Drop-down	1;2;3;4;5+	No	Number of tries to reach Patient by Phone
Total Call Time for Day	Textbox	Numeric	No	Total Length of time on phone (in minutes) for the day for the Encounter
Number of Phone Calls	Textbox	Numeric	No	Total Number of phone calls for the Encounter
Resource Time	Textbox	Numeric	No	Total Time spent on any preparatory work, charting, travel, research, admin, etc. (in minutes) for the Encounter
Clinic Visit Time	Textbox	Numeric	No	Time spent on Patient Visit in Clinic (in minutes) - Face-to-face
Home Visit Time	Textbox	Numeric	No	Time spent on Patient Visit in Home (in minutes) - Face-to-face
Notes	Textbox	Free Text	No	Notes relating to the Care Manager-Patient Encounter
PATIENT MEDICATION				
Medication Start Date	Date Field	Date MM/DD/YYYY	No	Date Medication Started
Medication End Date	Date Field	Date MM/DD/YYYY	No	Date Medication Ended
Medication	Drop-down	Medications from Table/Values	Yes	Medication Name
PRN	Checkbox	Yes/No	No	Medication PRN?
Dose	Textbox	Free Text	No	Medication Dose

Data Element	Type/Control	Values	Required	Definition
Notes	Textbox	Free Text	No	Notes relating to the Patient Medication
DIABETES HX/ASSESSMENT				
Assess Date	Date field	Date MM/DD/YYYY	Yes	Date of the Diabetes Assessment
Diabetes Type	Drop-down	Type 1; Type 2 Diet; Type 2 Oral; Type 2 Oral/Insulin; Type 2 Insulin; GDM; Pre-Diabetes/IGT	No	Patient's Diabetes Type
Special Needs	Drop-down	Visual Impairment; Hearing Impairment; Low Literacy; Eng 2nd Language	No	Patient Special Needs
Smoker?	Checkbox	Yes and No Fields	No	Does Patient smoke?
Drinker?	Checkbox	Yes and No Fields	No	Does Patient drink alcohol?
History				
Hypertension	Checkbox	Yes and No Fields	No	Does Patient have a history of Hypertension?
Heart Attack/Heart Disease	Checkbox	Yes and No Fields	No	Does Patient have a history of Heart Attack/Heart Disease?
High Cholesterol	Checkbox	Yes and No Fields	No	Does Patient have a history of High Cholesterol?
Family Hx Diabetes	Checkbox	Yes and No Fields	No	Does Patient have a family history of Diabetes?
How long have you had Diabetes?	Textbox	Free Text	No	How long has Patient had Diabetes?
Hospitalized for Diabetes in last year?	Checkbox	Yes and No Fields	No	Has Patient been hospitalized for the Problem of Diabetes in the last year?
If Yes (Hospitalized), Explain	Textbox	Free Text	No	If Patient has been hospitalized for Diabetes in the last year, details
Height/Weight				
Height (ft)	Textbox	Free Text	No	Patient Height (in feet)
Height (in)	Textbox	Free Text	No	Patient Height (in inches)
Weight (lbs)	Textbox	Free Text	No	Patient Weight (in lbs)
Weight Change in last 6 months?	Checkbox	Yes and No Fields	No	Any Patient Weight change in the last 6 months?
Do you want to lose weight?	Checkbox	Yes and No Fields	No	Does Patient want to lose weight?

Data Element	Type/Control	Values	Required	Definition
At what weight have you felt healthy?	Textbox	Free Text	No	Weight (in lbs) at which Patient felt most healthy
Are you experiencing any of the following now?				
Blurred vision	Checkbox	Yes and No Fields	No	Patient now experiencing blurred vision?
Fatigue	Checkbox	Yes and No Fields	No	Patient now experiencing fatigue?
Frequent Infections	Checkbox	Yes and No Fields	No	Patient now experiencing frequent infections?
Increased Thirst	Checkbox	Yes and No Fields	No	Patient now experiencing increased thirst?
Increased Urination	Checkbox	Yes and No Fields	No	Patient now experiencing increased urination?
Numbness, tingling, pain in hands and feet	Checkbox	Yes and No Fields	No	Patient now experiencing numbness, tingling, or pain in hands/feet?
Sores that won't heal	Checkbox	Yes and No Fields	No	Patient now experiencing sores that won't heal?
Pain/Tightness in Chest	Checkbox	Yes and No Fields	No	Patient now experiencing pain/tightness in chest?
Stress	Checkbox	Yes and No Fields	No	Patient now experiencing Stress?
Sexual Difficulty	Checkbox	Yes and No Fields	No	Patient now experiencing Sexual Difficulty?
Other Medical Conditions	Textbox	Free Text	No	Patient's Other Medical Conditions not listed above
Financial Concerns?	Checkbox	Yes and No Fields	No	Does Patient have financial concerns?
Monitoring				
Last Diabetes Foot Exam	Drop-down	Never; Within the last year; Within the last 2 years, > 2 years ago	No	Time frame for Patient's last Diabetes Foot Exam
Examining your own feet?	Checkbox	Yes and No Fields	No	Is Patient examining his/her own feet?
Last Dilated Eye Exam	Drop-down	Never; Within the last year; Within the last 2 years, > 2 years ago	No	Time frame for Patient's last Dilated Eye Exam
Last Dental Exam	Drop-down	Never; Within the last 6 months; Within the last year; Within the last 2 years, > 2 years ago	No	Time frame for Patient's last Dental Exam
Do you have a Blood Glucose Meter?	Checkbox	Yes and No Fields	No	Does Patient have a blood glucose meter?

Data Element	Type/Control	Values	Required	Definition
(If Meter), Type	Drop-down	None; Bayer Ascensia; Bayer Dex; Bayer Glucometer Elite; Chronimed; Lifescan SureStep; Lifescan Ultra; Lifescan Ultra Smart; One Touch Basic; Other; Precision Extra; Precision QID; Precision SofTac; Prestige; Profile; Roche AccuCheck Active; Roche AccuCheckAdvantage; Roche AccuCheck Compact; Therasense Flash; Therasense Freestyle	No	Type/Brand of Patient's blood glucose meter
(If Meter), Approx. how old is it?	Drop-down	< 1 year old; 2 years old; 3 years old; 4 years old; 5 years old; > 5 years old	No	Approximate Age of Patient's blood glucose meter
(If Meter), How often do you test?	Drop-down	Not at all; 2 or 3 times weekly; 1-2 times daily; 3-4 times daily; 5-8 times daily; > 8 times daily	No	Patient Testing Frequency with blood glucose meter
Date of Last HgbA1C	Drop-down	Never; Unknown; Within the last 3 mos.; Within the last 6 mos.; Within the last year; > 1 year ago	No	Date of Patient's last HgbA1C test
Result HgbA1C	Textbox	Free Text	No	Result of Patient's last HgbA1C test
What type of Activity do you do?	Drop-down	Walking; Running; Biking; Swimming; Weight Lifting ; Other	No	Patient Exercise/Activity
(Activity Text)	Textbox	Free Text	No	Notes relating to Exercise/Activity
Physical Limitations that impact activity	Textbox	Free Text	No	Patient's Physical Limitations that may prevent them from exercising
Meal Plan	Textbox	Free Text	No	Meal Plan Patient follows, if any
Do you skip meals?	Checkbox	Yes and No Fields	No	Does Patient skip meals?
What's your insulin to carbohydrate ratio?	Textbox	Free Text	No	Patient's insulin-to-carb ratio

Data Element	Type/Control	Values	Required	Definition
Last Diabetes Education	Drop-down	None; Within the last year; 1-5 years ago; > 5 years ago	No	When did the Patient last participate in Diabetes Education?
Have you seen a Dietitian?	Checkbox	Yes and No Fields	No	Has Patient seen a Dietitian?
How often do you eat out?	Drop-down	< 1 time a week; 1-2 times a week; 3 or more times a week	No	How often does Patient eat outside the home?
Food Allergies?	Checkbox	Yes and No Fields	No	Does Patient have any food allergies?
If Yes (Food Allergies), What?	Textbox	Free Text	No	If Patient Allergies, list them
What is the most difficult part of living with Diabetes?	Textbox	Free Text	No	What is the most difficult thing for the Patient in living with Diabetes?
Sad/Blue?	Checkbox	Yes and No Fields	No	Is Patient sad/blue? (Depression Screening)
Lost Interest?	Checkbox	Yes and No Fields	No	Has Patient lost interest? (Depression Screening)
Someone to talk to?	Checkbox	Yes and No Fields	No	Does Patient have someone to talk to? (Depression Screening/FPP)
PRE/POST KNOWLEDGE ASSESSMENT (Diabetes Education Assessment)				
Patient Name	Textbox	From Patient Table/Values	No	Patient Name automatically populated from Patient record currently selected
Person(s) Instructed	Textbox	Free Text	No	Name of Person(s) given Diabetes Education (Patient, family members, etc.)
Assessment Date	Date field	Date MM/DD/YYYY	Yes	Date of Diabetes Education Assessment
Before Education				**Score BEFORE diabetes education**
Do you understand how diabetes affects you?	Drop-down	1. (Poor); 2. (Fair); 3. (Good); 0. (N/A)	No	Score: Does Patient understand how diabetes affects him/her?
Do you understand your meal plan?	Drop-down	1. (Poor); 2. (Fair); 3. (Good); 0. (N/A)	No	Score: Does Patient understand his/her meal plan?
Do you understand the benefit of exercise/physical activity?	Drop-down	1. (Poor); 2. (Fair); 3. (Good); 0. (N/A)	No	Score: Does Patient understand the benefit of exercise/physical activity?
Do you understand how your medications work?	Drop-down	1. (Poor); 2. (Fair); 3. (Good); 0. (N/A)	No	Score: Does Patient understand how his/her medications work?
Do you understand the benefits of blood glucose monitoring?	Drop-down	1. (Poor); 2. (Fair); 3. (Good); 0. (N/A)	No	Score: Does Patient understand the benefit of blood glucose monitoring?

Data Element	Type/Control	Values	Required	Definition
Do you understand how to detect, treat, and prevent hypoglycemia?	Drop-down	1. (Poor); 2. (Fair); 3. (Good); 0. (N/A)	No	Score: Does Patient understand how to detect, treat, and prevent hypoglycemia?
Do you understand how to detect, treat, and prevent hyperglycemia?	Drop-down	1. (Poor); 2. (Fair); 3. (Good); 0. (N/A)	No	Score: Does Patient understand how to detect, treat, and prevent hyperglycemia?
Do you understand how to prevent and/or reduce chronic complications?	Drop-down	1. (Poor); 2. (Fair); 3. (Good); 0. (N/A)	No	Score: Does Patient understand how to prevent and/or reduce chronic complications?
Do you understand how reaching your goals will help you with your diabetes?	Drop-down	1. (Poor); 2. (Fair); 3. (Good); 0. (N/A)	No	Score: Does Patient understand how reaching his/her goals will help with diabetes?
Do you understand that the diabetes team is available to help you problem solve?	Drop-down	1. (Poor); 2. (Fair); 3. (Good); 0. (N/A)	No	Score: Does Patient understand that the diabetes team is available to help him/her problem solve?
Do you understand how diabetes affects emotional health?	Drop-down	1. (Poor); 2. (Fair); 3. (Good); 0. (N/A)	No	Score: Does Patient understand how diabetes affects emotional health?
Do you understand that your blood glucose needs to be in control before and during pregnancy?	Drop-down	1. (Poor); 2. (Fair); 3. (Good); 0. (N/A)	No	Score: Does Patient understand that his/her blood glucose needs to be in control before and during pregnancy?
After Education	Drop-down	1. (Poor); 2. (Fair); 3. (Good); 0. (N/A)	No	**Score AFTER diabetes education for each question above**
Instruct Date	Date field	Date MM/DD/YYYY	No	**Instruction Date For Each question above**
Instructor	Textbox	Free Text	No	**Instructor For Each question above**
Follow-up Plan	Textbox	Free Text	No	**Follow-up Plan For Each question above**
Instructors (1)	Textbox	Free Text	No	For 1st Diab Educ Instructor "signature"
Instructors (2)	Textbox	Free Text	No	For 2nd Diab Educ Instructor "signature"
Instructors (3)	Textbox	Free Text	No	For 3rd Diab Educ Instructor "signature"
Instructors (4)	Textbox	Free Text	No	For 4th Diab Educ Instructor "signature"
Collaborate Date	Date field	Date MM/DD/YYYY	No	Date of Collaboration on Patient if not as part of class/education above (Ex. Meeting re: Patients)
PATIENT GOALS				
Goals Assess Date	Date Field	Date MM/DD/YYYY	Yes	Date of Patient Goals Assessment
Patient ID	Textbox	Free Text	No	Patient ID Number automatically populated from Patient record currently selected
Goals:				

Data Element	Type/Control	Values	Required	Definition
Healthy Eating	Checkbox	Yes/No	No	Does Patient have Goal of Healthy Eating?
Healthy Eating (text)	Textbox	Free Text	No	Details for Healthy Eating Goal
Being Active	Checkbox	Yes/No	No	Does Patient have Goal of Being Active?
Being Active (text)	Textbox	Free Text	No	Details for Being Active Goal
Taking Medication	Checkbox	Yes/No	No	Does Patient have Goal of Taking Medication?
Taking Medication (text)	Textbox	Free Text	No	Details for Taking Medication Goal
Monitoring	Checkbox	Yes/No	No	Does Patient have Goal of Monitoring?
Monitoring (text)	Textbox	Free Text	No	Details for Monitoring Goal
Problem Solving	Checkbox	Yes/No	No	Does Patient have Goal of Problem Solving?
Problem Solving (text)	Textbox	Free Text	No	Details for Problem Solving Goal
Reducing Risks	Checkbox	Yes/No	No	Does Patient have Goal of Reducing Risks?
Reducing Risks (text)	Textbox	Free Text	No	Details for Reducing Risksn Goal
Healthy Coping	Checkbox	Yes/No	No	Does Patient have Goal of Healthy Coping?
Healthy Coping (text)	Textbox	Free Text	No	Details for Healthy Coping Goal
Other (Goal)	Checkbox	Yes/No	No	Does Patient have Other Goal not listed?
Other (text)	Textbox	Free Text	No	Details for Other Goal
Follow-up Dates:				
Healthy Eating	Date field	Date MM/DD/YYYY	No	Follow-up Date for Goal of Healthy Eating
Being Active	Date field	Date MM/DD/YYYY	No	Follow-up Date for Goal of Being Active
Taking Medication	Date field	Date MM/DD/YYYY	No	Follow-up Date for Goal of Taking Medication
Monitoring	Date field	Date MM/DD/YYYY	No	Follow-up Date for Goal of Monitoring
Problem Solving	Date field	Date MM/DD/YYYY	No	Follow-up Date for Goal of Problem Solving
Reducing Risks	Date field	Date MM/DD/YYYY	No	Follow-up Date for Goal of Reducing Risks
Healthy Coping	Date field	Date MM/DD/YYYY	No	Follow-up Date for Goal of Healthy Coping
Other (Goal)	Date field	Date MM/DD/YYYY	No	Follow-up Date for Other Goal not listed
Scores:				
Healthy Eating	Drop-down	1; 2; 3; 4; 5; 6; 7; 8; 9; 10	No	Score for Goal of Healthy Eating
Being Active	Drop-down	1; 2; 3; 4; 5; 6; 7; 8; 9; 10	No	Score for Goal of Being Active
Taking Medication	Drop-down	1; 2; 3; 4; 5; 6; 7; 8; 9; 10	No	Score for Goal of Taking Medication
Monitoring	Drop-down	1; 2; 3; 4; 5; 6; 7; 8; 9; 10	No	Score for Goal of Monitoring
Problem Solving	Drop-down	1; 2; 3; 4; 5; 6; 7; 8; 9; 10	No	Score for Goal of Problem Solving
Reducing Risks	Drop-down	1; 2; 3; 4; 5; 6; 7; 8; 9; 10	No	Score for Goal of Reducing Risks
Healthy Coping	Drop-down	1; 2; 3; 4; 5; 6; 7; 8; 9; 10	No	Score for Goal of Healthy Coping
Other (Goal)	Drop-down	1; 2; 3; 4; 5; 6; 7; 8; 9; 10	No	Score for Other Goal not listed
Notes	Textbox	Free Text	No	Notes relating to Patient Goals

Data Element	Type/Control	Values	Required	Definition
FUNCTION				
Assessment Date	Date Field	Date MM/DD/YYYY	Yes	Date of Function Assessment
Activities of Daily Living Question 1	Checkbox	Yes/No	No	ADL Question: Is Patient able to "Get out of bed or chair" without help?
Activities of Daily Living Question 2	Checkbox	Yes/No	No	ADL Question: Is Patient able to "Walk" without help?
Activities of Daily Living Question 3	Checkbox	Yes/No	No	ADL Question: Is Patient able to "Take a Bath or Shower" without help?
Activities of Daily Living Question 4	Checkbox	Yes/No	No	ADL Question: Is Patient able to "Get dressed" without help?
Activities of Daily Living Question 5	Checkbox	Yes/No	No	ADL Question: Is Patient able to "Go to the toilet" without help?
Activities of Daily Living Question 6	Checkbox	Yes/No	No	ADL Question: Is Patient able to "Feed self a meal" without help?
ADL	Textbox	Numeric	No	Activities of Daily Living Score (Values 1 to 6)
Instrumental Activities of Daily Living Question 1	Checkbox	Yes/No	No	IADL Question: Is Patient able to "Shop" without help?
Instrumental Activities of Daily Living Question 2	Checkbox	Yes/No	No	IADL Question: Is Patient able to "Use a telephone" without help?
Instrumental Activities of Daily Living Question 3	Checkbox	Yes/No	No	IADL Question: Is Patient able to "Cook" without help?
Instrumental Activities of Daily Living Question 4	Checkbox	Yes/No	No	IADL Question: Is Patient able to "Travel outside the home" without help?
Instrumental Activities of Daily Living Question 5	Checkbox	Yes/No	No	IADL Question: Is Patient able to do "Bills, Checkbooks, Finances" without help?
Instrumental Activities of Daily Living Question 6	Checkbox	Yes/No	No	IADL Question: Is Patient able to do "Housekeeping" without help?
Instrumental Activities of Daily Living Question 7	Checkbox	Yes/No	No	IADL Question: Is Patient able to "Take Medications" without help?
IADL	Textbox	Numeric	No	Instrumental Activities of Daily Living Score (Values 1 to 7)
MMSE	Textbox	Numeric	No	Mini Mental Status Examination Score
Pain Score	Textbox	Numeric	No	Pain Score (Scale 0-10)
Notes	Textbox	Free Text	No	Comments relating to Function