

**CQIC Diabetes Management Learning Log A: Learning from practice performance assessment  
(Category 1 CME Credits = 5)**

**General Instruction:** This Diabetes Management Learning Log A form has been prepared by Clinical Content Consultants and Memorial Hermann Office of Continuing Medical Education as part of the CQIC Diabetes Management Project. The purpose of this form is to help you to learn and make changes in your practice, and to satisfy the requirements for CME credit.

Please submit a copy of the completed Diabetes Management Learning Log A to:  
 Gayla Bruner, RN, BSN, CCMEP  
 Office of Continuing Medical Education  
 9301 SW Freeway, Suite 470  
 Houston, Texas 77074  
 Office 713-448-5101  
 Fax 713-448-4542

Provider Name: \_\_\_\_\_

Date of Learning Log Entry: \_\_\_\_\_

Organization: \_\_\_\_\_

e-mail: \_\_\_\_\_

**Part 1:** Please review your baseline performance data, enter results below, and set your Performance Improvement Goals. Performance measures are based on current evidence-based Diabetes management guidelines from AHA/ACC and clinical quality measures for Stage 1 Meaningful Use.

Performance Measure	Best Practice	Baseline		Performance Improvement Goals	
		Group	Provider	Group	Provider
DM HgbA1c < 7	Close to 100%				
DM HgbA1c < 7-9	NA				
DM HgbA1c > 9	NA				
DM HgbA1c > 9 NO Insulin	NA				
DM HgbA1c > 9 on Insulin	NA				

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DM and NO HgbA1c in last 12 months	Close to 0%				
DM and NO HgbA1c in last 6 months	Close to 0%				
DM: SBP<130	Close to 100%				
DM: DBP<80	Close to 100%				
DM and NO LDL in last 12 months	Close to 0%				
DM: LDL >100	Close to 0%				
DM: LDL <100	Close to 100%				
DM: LDL <70	Close to 100%				
DM: on Statin	NA				
DM: NOT on Statin	NA				
DM: on ASA	Close to 100%				
DM: on ACE-I or ARB	Close to 100%				
DM: NOT on ACE-I or ARB	Close to 0%				
DM: Pneumovax or contraindication	Close to 100%				
DM: Flu Vax last 12 months or contraindication	Close to 100%				
DM: Dilated Eye Exam last 12 months	Close to 100%				
DM: Foot Exam last 12 months	Close to 100%				
DM: Renal Assessment (microalbumin, EGFR)	Close to 100%				

**Part 2:** Please complete the CQIC Diabetes Management/PI CME Pre-test below (circle the best answer)

1. Based on the ADA Standards of Medical Care in Diabetes, the current criteria for the diagnosis of diabetes are:
  - a.) HgbA1c > 6.5%
  - b.) FPG > 126 mg/dl
  - c.) 2hr OGTT plasma glucose > 200mg/dl
  - d.) random BS > 200mg/dl in asymptomatic patient
  - e.) a, b, & c above
  
2. Based on the ADA Standards of Medical Care in Diabetes, screening recommendations for the diagnosis of diabetes include:
  - a.) all adult patients with BMI > 25 kg/m<sup>2</sup>
  - b.) adult patients with BMI > 25 kg/m<sup>2</sup> starting at age 45 years
  - c.) all adult patients starting at age 50 years
  - d.) all adult patients with BMI > 25 kg/m<sup>2</sup> and one or more risk factors
  - e.) b, & d above
  
3. According to ADA and JNC VII, BP goals for patients with diabetes are?
  - a.) SBP < 140 and DBP < 90
  - b.) SBP < 135 and DBP < 85
  - c.) SBP < 130 and DBP < 80
  - d.) SBP < 130 and DBP < 85
  
4. Based on the ADA Standards of Medical Care in Diabetes:
  - a.) HgbA1c should be measured at least two times a year
  - b.) HgbA1c should be measured at least once a year
  - c.) HgbA1c should be measured at least four times a year if not meeting goals
  - d.) HgbA1c should be measured at least four times a year
  - e.) a & c above

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5. Based on the ADA Standards of Medical Care in Diabetes, glycemic goals for HgbA1c are:
  - a.) < 7 for non-pregnant adult patients
  - b.) < 6.5 for newly diagnosed patients
  - c.) less stringent goals (7.5-8) for Hx severe hypoglycemia or advanced microvascular or macrovascular complications
  - d.) all the above
  - e.) a & c above
  
6. Based on the ADA Standards of Medical Care in Diabetes, Dyslipidemia screening and management should include:
  - a.) fasting lipid profile at least annually
  - b.) treatment to obtain LDL < 100 mg/dl
  - c.) treatment to obtain HDL > 50 mg/dl
  - d.) treatment to obtain Triglycerides < 150mg/dl
  - e.) all of the above
  
7. Based on the ADA Standards of Medical Care in Diabetes, Dyslipidemia management should include:
  - a.) Statins for all patients with CVD
  - b.) Statins for all patients with LDL > 100 mg/dl
  - c.) Statins for all patients over 40 years (with or without CVD)
  - d.) Statins for all patients with diabetes to prevent micro/macrovascular complications
  - e.) all the above
  - f.) a, b, & c
  
8. Based on the ADA Standards of Medical Care in Diabetes, Lipid goals for patients with diabetes are:
  - a.) LDL < 100 mg/dl
  - b.) LDL < 70 mg/dl if diagnosis of CVD
  - c.) HDL > 40 mg/dl in men and > 50 mg/dl in women
  - d.) Triglycerides < 150 mg/dl in men and 175 mg/dl in women
  - e.) a, b, & c

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9. Based on the ADA Standards of Medical Care in Diabetes, antiplatelet therapy should be considered if no contraindication for:
  - a.) 10 year risk of CVD > 10%
  - b.) most men > 50 years and women > 60 years
  - c.) all patients with CVD
  - d.) combination of ASA and clopidogrel for up to 1 year after acute coronary syndrome
  - e.) all of the above
  
10. Based on the ADA Standards of Medical Care in Diabetes, nephropathy screening and treatment should include:
  - a.) optimize glucose and blood pressure goals
  - b.) urine albumin screening annually in all patients with diabetes
  - c.) urine albumin screening annually in all Type 2 diabetic patients and Type 1 diabetic patients for  $\geq$  5 years
  - d.) annual creatinine with eGFR with CKD staging
  - e.) a & c above
  - f.) a, c, & d above

**Part 3:** Please review and confirm the quality improvement processes below you plan to implement (initial each process and enter an anticipated completion date).

1. What do you plan to do to reach the goals that you set up?

Process	Providers Initials	Anticipated Date
View the CQIC_56_Diabetes_Management_PI_CME.pptx and/or Video		
Receive training on the Diabetes Q&E-CCC form and CQIC Diabetes Management workflows		
Implement the Diabetes Q&E-CCC form and CQIC Diabetes Management workflows		
Review the available CQIC Diabetes CDSS Prompts and Implement select prompts		

2. What will you change or do differently in your clinical practice?

<b>Process</b>	<b>Providers Initials</b>	<b>Anticipated Date</b>
Use the Diabetes Q&E-CCC form for all visits for patients with diabetes		
Provide a Diabetes Management Summary to all patients with diabetes		
Provide education on Diabetes Management treatment guidelines and goals to patients		

**Congratulations! You have completed Stage A of the Diabetes Management Performance Improvement.  
Be sure and self-report Category 1 CME: 5 Hours to the AMA or AAFP**

**Please keep a copy for your records.**

**CQIC Diabetes Management Learning Log B: Learning from the application of PI to patient care  
(Category 1 CME Credits = 5)**

**General Instruction:** This Diabetes Management Learning Log B form has been prepared by Clinical Content Consultants and Memorial Hermann Office of Continuing Medical Education as part of the CQIC Diabetes Management Project. The purpose of this form is to help you to learn and make changes in your practice, and to satisfy the requirements for CME credit.

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**Provider Name:** \_\_\_\_\_

**Date of Learning Log Entry:** \_\_\_\_\_

**Organization:** \_\_\_\_\_

**e-mail:** \_\_\_\_\_

**Part 1:** Please document the dates of completion of each step of the CQI Diabetes Management Process below:

<b>Process</b>	<b>Providers Initials</b>	<b>Date Completed</b>
Viewed the CQIC_56_Diabetes_Management_PI_CME.pptx and/or Video		
Trained on the Diabetes Q&E-CCC form and CQIC Diabetes Management workflows		
Implemented the Diabetes Q&E-CCC form and CQIC Diabetes Management workflows "Go-Live" Date		
Reviewed the available CQIC Diabetes CDSS Prompts and Implement select prompts		

**Part 2:** Enter the percent of time you feel you do the following CQI processes using the Diabetes Management Q&E-CCC form and document reasons why or times when not performed

Process	Percent of Time Utilized	Reasons Not Used / Times Not Performed
Use the Diabetes Q&E-CCC form for all visits for patients with diabetes		
Provide a Diabetes Management Summary to all patients with diabetes		
Provide education on Diabetes Management treatment guidelines and goals to patients		

**Part 3:** Please complete the CQIC Diabetes Management/PI CME Post-test below (circle the best answer)

1. Based on the ADA Standards of Medical Care in Diabetes, the current criteria for the diagnosis of diabetes are:
  - a.) HgbA1c > 6.5%
  - b.) FPG > 126 mg/dl
  - c.) 2hr OGTT plasma glucose > 200mg/dl
  - d.) random BS > 200mg/dl in asymptomatic patient
  - e.) a, b, & c above
  
2. Based on the ADA Standards of Medical Care in Diabetes, screening recommendations for the diagnosis of diabetes include:
  - a.) all adult patients with BMI > 25 kg/m<sup>2</sup>
  - b.) adult patients with BMI > 25 kg/m<sup>2</sup> starting at age 45 years
  - c.) all adult patients starting at age 50 years
  - d.) all adult patients with BMI > 25 kg/m<sup>2</sup> and one or more risk factors
  - e.) b, & d above

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3. According to ADA and JNC VII, BP goals for patients with diabetes are?
  - a.) SBP < 140 and DBP < 90
  - b.) SBP < 135 and DBP < 85
  - c.) SBP < 130 and DBP < 80
  - d.) SBP < 130 and DBP < 85
  
4. Based on the ADA Standards of Medical Care in Diabetes:
  - a.) HgbA1c should be measured at least two times a year
  - b.) HgbA1c should be measured at least once a year
  - c.) HgbA1c should be measured at least four times a year if not meeting goals
  - d.) HgbA1c should be measured at least four times a year
  - e.) a & c above
  
5. Based on the ADA Standards of Medical Care in Diabetes, glycemic goals for HgbA1c are:
  - a.) < 7 for non-pregnant adult patients
  - b.) < 6.5 for newly diagnosed patients
  - c.) less stringent goals (7.5-8) for Hx severe hypoglycemia or advanced microvascular or macrovascular complications
  - d.) all the above
  - e.) a & c above
  
6. Based on the ADA Standards of Medical Care in Diabetes, Dyslipidemia screening and management should include:
  - a.) fasting lipid profile at least annually
  - b.) treatment to obtain LDL < 100 mg/dl
  - c.) treatment to obtain HDL > 50 mg/dl
  - d.) treatment to obtain Triglycerides < 150mg/dl
  - e.) all of the above

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7. Based on the ADA Standards of Medical Care in Diabetes, Dyslipidemia management should include:
  - a.) Statins for all patients with CVD
  - b.) Statins for all patients with LDL > 100 mg/dl
  - c.) Statins for all patients over 40 years (with or without CVD)
  - d.) Statins for all patients with diabetes to prevent micro/macrovascular complications
  - e.) all the above
  - f.) a, b, & c
  
8. Based on the ADA Standards of Medical Care in Diabetes, Lipid goals for patients with diabetes are:
  - a.) LDL < 100 mg/dl
  - b.) LDL < 70 mg/dl if diagnosis of CVD
  - c.) HDL > 40 mg/dl in men and > 50 mg/dl in women
  - d.) Triglycerides < 150 mg/dl in men and 175 mg/dl in women
  - e.) a, b, & c
  
9. Based on the ADA Standards of Medical Care in Diabetes, antiplatelet therapy should be considered if no contraindication for:
  - a.) 10 year risk of CVD > 10%
  - b.) most men > 50 years and women > 60 years
  - c.) all patients with CVD
  - d.) combination of ASA and clopidogrel for up to 1 year after acute coronary syndrome
  - e.) all of the above

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10. Based on the ADA Standards of Medical Care in Diabetes, nephropathy screening and treatment should include:
- a.) optimize glucose and blood pressure goals
  - b.) urine albumin screening annually in all patients with diabetes
  - c.) urine albumin screening annually in all Type 2 diabetic patients and Type 1 diabetic patients for  $\geq 5$  years
  - d.) annual creatinine with eGFR with CKD staging
  - e.) a & c above
  - f.) a, c, & d above

**Congratulations! You have completed Stage B of the Diabetes Management Performance Improvement.  
Be sure and self-report Category 1 CME: 5 Hours to the AMA or AAFP**

**Please keep a copy for your records.**

**CQIC Diabetes Management Learning Log C: Learning from the evaluation of the PI effort  
(Category 1 CME Credits = 5)**

**General Instruction:** This Diabetes Management Learning Log C form has been prepared by Clinical Content Consultants and Memorial Hermann Office of Continuing Medical Education as part of the CQIC Diabetes Management Project. The purpose of this form is to help you to learn and make changes in your practice, and to satisfy the requirements for CME credit.

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Provider Name: \_\_\_\_\_

Date of Learning Log Entry: \_\_\_\_\_

Organization: \_\_\_\_\_

e-mail: \_\_\_\_\_

**Part 1:** Please review your post-Diabetes Management CQIC/PI CME quality performance data, enter results below, and document if your Performance Improvement Goals were “Met” or “Not Met”. Performance measures are based on current evidence-based Diabetes management guidelines from AHA/ACC and clinical quality measures for Stage 1 Meaningful Use.

Performance Measure	Best Practice	Baseline		Performance Improvement Goals (“Met” or “Not Met”)	
		Group	Provider	Group	Provider
DM HgbA1c < 7	Close to 100%				
DM HgbA1c < 7-9	NA				
DM HgbA1c > 9	NA				
DM HgbA1c > 9 NO Insulin	NA				
DM HgbA1c > 9 on Insulin	NA				

DM and NO HgbA1c in last 12 months	Close to 0%				
DM and NO HgbA1c in last 6 months	Close to 0%				
DM: SBP<130	Close to 100%				
DM: DBP<80	Close to 100%				
DM and NO LDL in last 12 months	Close to 0%				
DM: LDL >100	Close to 0%				
DM: LDL <100	Close to 100%				
DM: LDL <70	Close to 100%				
DM: on Statin	NA				
DM: NOT on Statin	NA				
DM: on ASA	Close to 100%				
DM: on ACE-I or ARB	Close to 100%				
DM: NOT on ACE-I or ARB	Close to 0%				
DM: Pneumovax or contraindication	Close to 100%				
DM: Flu Vax last 12 months or contraindication	Close to 100%				
DM: Dilated Eye Exam last 12 months	Close to 100%				
DM: Foot Exam last 12 months	Close to 100%				
DM: Renal Assessment (microalbumin, EGFR)	Close to 100%				

**Part 2:** Please answer the questions, in detail, below:

1. Identify at least one area for future improvement in the current or future process of Diabetes Management CQI:

2. Identify at least one additional “gap” in patient care of patients with Diabetes Management for future improvement:

**Part 3:** Please complete the questions below:

1. After completing the Diabetes Management PI CME, the likelihood that you would participate in an additional CQIC PI CME (if available) is:  
a.) unlikely      b.) somewhat likely      c.) very likely      d.) definitely
2. List other CQIC Performance Improvement CME programs that you are aware of :
3. List other CQIC Performance Improvement CME programs that you plan to participate in:
4. List other CQIC Performance Improvement CME programs that you would like to see:

**Congratulations! You have completed Stage C of the Diabetes Management Performance Improvement.  
Be sure and self-report Category 1 CME: 5 Hours to the AMA or AAFP  
Please keep a copy for your records.**

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**Part 4:** Please initial to confirm submission of Stages A, B, and C of the Diabetes Management Performance Improvement below to qualify for an additional 5 Category 1 CME Credits:

<b>Stage</b>	<b>Category 1 CME Credits</b>	<b>Completed &amp; Submitted</b>
A: Learning from practice performance assessment	5	
B: Learning from the application of PI to patient care	5	
C: Learning from the evaluation of the PI effort	5	
Successfully completed Stages A, B, and C	5	
<b>Total Category 1 CME Credits Earned:</b>	<b>20</b>	

**Congratulations! You have completed Stages A, B, & C of the Diabetes Management Performance Improvement.**

**Be sure and self-report additional Category 1 CME: 5 Hours to the AMA or AAFP  
(Total = 20 Hours)**

**Please keep a copy for your records.**