

Task Order 13: Sample Chart Audit Form on Care Outcomes for (Diabetes)*

Practice:

Date of review:

Reviewer:

Form Approved OMB No. 0935-XXXX Exp. Date XX/XX/20XX

Please note: "in the past 12 months" means 12 months from the date of the chart review, not the date of the patient's last visit.

Patient Demographics:

1. Patient Number: _____
2. Patient DOB: _____
3. Patient Gender: _____
4. Patient Insurance Type: _____

Laboratory

5. Has the A1C been measured in the past 12 months? Yes No
6. Enter the patient's most recent A1C value. _____
7. Has the patient received a urine microalbuminprotein screen in the past 12 months?
 Yes No Unknown Not Applicable (gross proteinuria)
8. Has a lipid profile been performed in the past 12 months? Yes No
9. Enter the patient's most recent total cholesterol value. _____
10. Enter the patient's most recent LDL cholesterol value. _____
11. Enter the patient's most recent HDL cholesterol value. _____
12. Enter the patient's most recent triglyceride value. _____
13. Has the patient's blood pressure been measured in the past 12 months? Yes No
14. Enter the patient's most recent systolic blood pressure value. _____
15. Enter the patient's most recent diastolic blood pressure value. _____

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Preventive Care

16. Has the patient had a dilated retinal exam by an ophthalmologist or optometrist in the past 12 months? Yes No Unknown Not Applicable (blindness)

17. Has the patient had a complete foot exam (by visual inspection, monofilament and pulse exam) within the past 12 months? Yes No Not Applicable(bilateral amputee)
18. Has the patient received a flu vaccine in the past 12 months? Yes No Not Applicable (eg allergy, Hx of druginteraction, contraindication)
19. Does the chart reflect a recommendation for aspirin therapy (dose \geq 75 mg)? Yes No Not Applicable (patient is < 40 years old, potential interaction, contraindication)
20. Has the patient had a nephropathy screening test or is there evidence of nephopathy? Yes No Not Assessed
21. Is the patient a smoker? Yes No Not Assessed
22. Does the chart reflect that the patient has been counseled to stop smoking? Yes No Not Applicable (nonsmoker)

*Focus of intervention will vary by practice so audits forms appropriate to a practice's specific focus will be developed based on HEDIS indicators or other appropriate indicators recognized by field.