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Patient Reporting

Clinical Depression

Pain Assessment

Version Number : CROWNWeb 5.0.1-18534

Clinical Depression Screening and Follow-Up Reporting

Patient Selection

¹ Facility CCN

¹ Facility NPI

Go

¹ Facility DBA Name: DCI ALBANY WEST TOWN (600375456)

* Assessment Period: 01/31/2016 - 08/17/2016

* Patient: 2Merge, 2Patient (2104871784)

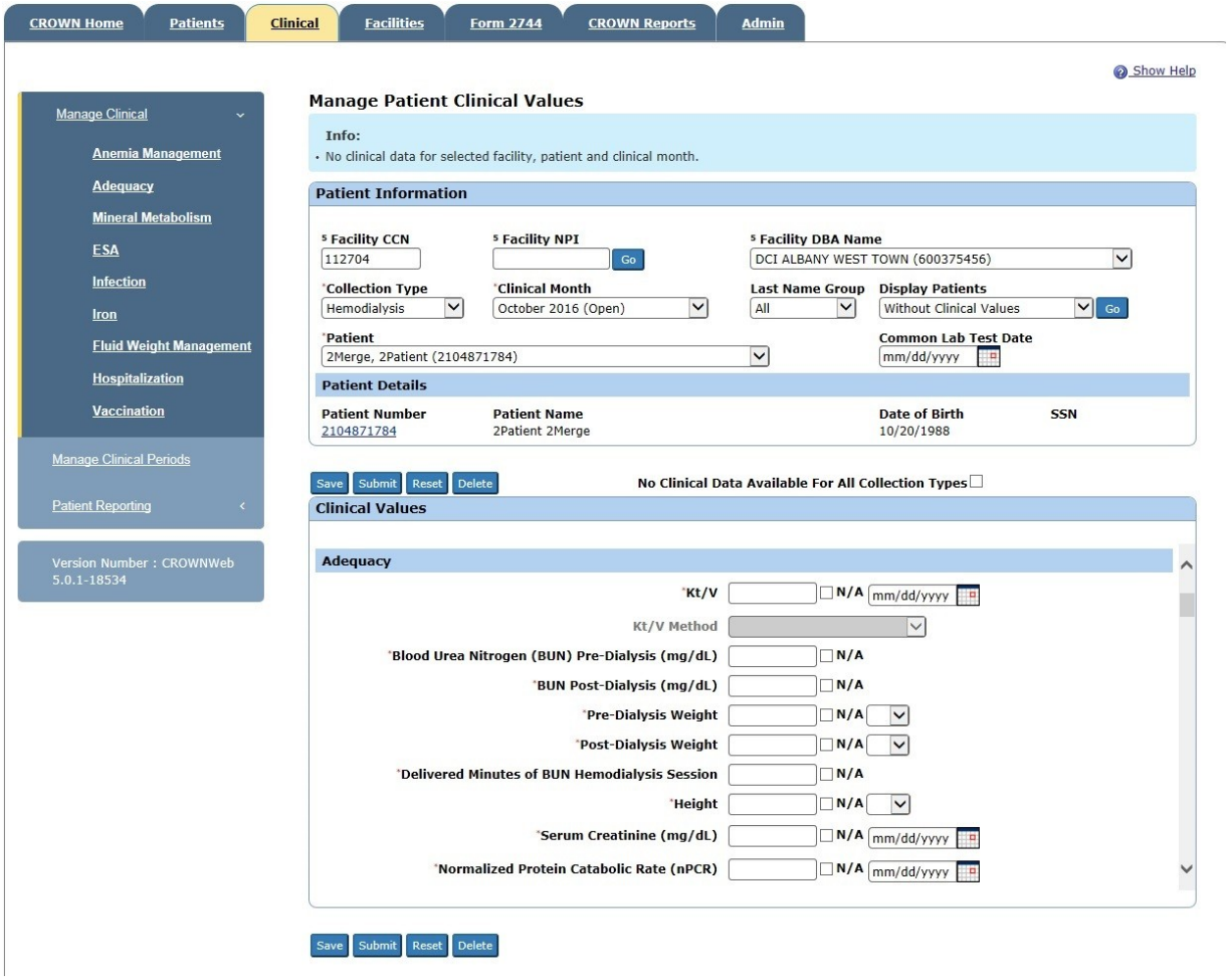
Clinical Depression Screening and Follow-Up Reporting Options

In order to comply with the requirements of the PY 2018 QIP, you must submit Clinical Depression Screening and Follow-Up Plan information for each eligible patient at least once between 1/1/2016 and 1/31/2017. This information is:

- Only required to be submitted for patients age 12 or older
- Only required to be submitted for patients treated at the facility for 90 days or longer
- Only required of facilities with at least 11 eligible patients during calendar year 2016
- Only required of facilities with a CCN open date prior to July 1, 2016

Please select one of the following options describing the clinical depression screening and (when necessary) the follow-up plan documented for the selected patient.

- Screening for clinical depression is documented as being positive, and a follow-up plan is documented
- Screening for clinical depression documented as positive, and a follow-up plan not documented, and the facility possess documentation stating the patient is not eligible
- Screening for clinical depression documented as positive, the facility possesses no documentation of a follow-up plan, and no reason is given
- Screening for clinical depression is documented as negative, and a follow-up plan is not required
- Screening for clinical depression not documented, but the facility possesses documentation stating the patient is not eligible
- Clinical depression screening not documented, and no reason is given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Patient Reporting
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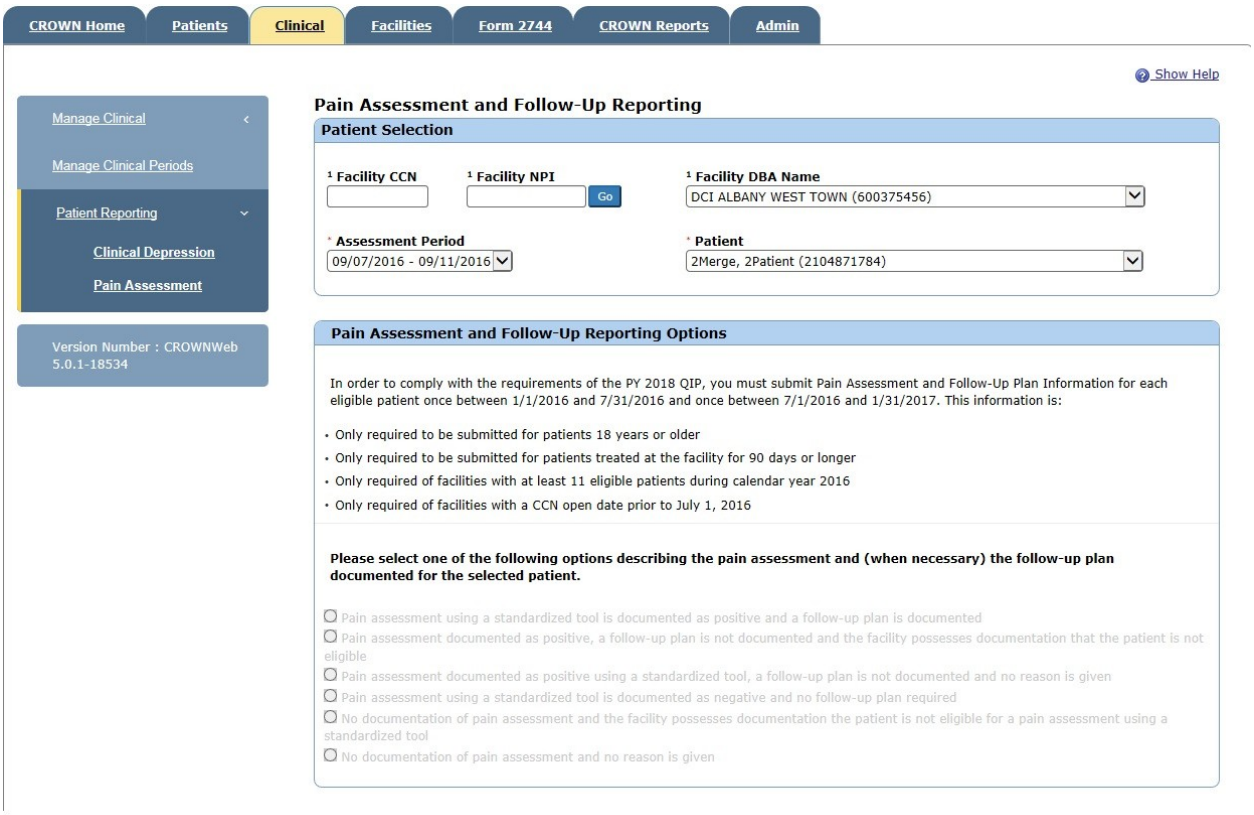
Manage Patient Clinical Values
Info:
• No clinical data for selected facility, patient and clinical month.
Patient Information
5 Facility CCN
112704
5 Facility NPI
Go
5 Facility DBA Name
DCI ALBANY WEST TOWN (600375456)
*Collection Type
Hemodialysis
*Clinical Month
October 2016 (Open)
Last Name Group
All
Display Patients
Without Clinical Values
Go
*Patient
2Merge, 2Patient (2104871784)
Common Lab Test Date
mm/dd/yyyy
Patient Details
Patient Number
2104871784
Patient Name
2Patient 2Merge
Date of Birth
10/20/1988
SSN
Save
Submit
Reset
Delete
No Clinical Data Available For All Collection Types
Clinical Values
Adequacy
*Kt/V
N/A
mm/dd/yyyy
Kt/V Method
*Blood Urea Nitrogen (BUN) Pre-Dialysis (mg/dL)
N/A
*BUN Post-Dialysis (mg/dL)
N/A
*Pre-Dialysis Weight
N/A
*Post-Dialysis Weight
N/A
*Delivered Minutes of BUN Hemodialysis Session
N/A
*Height
N/A
*Serum Creatinine (mg/dL)
N/A
mm/dd/yyyy
*Normalized Protein Catabolic Rate (nPCR)
N/A
mm/dd/yyyy
Save
Submit
Reset
Delete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Pain Assessment and Follow-Up Reporting
Patient Selection
¹ Facility CCN
¹ Facility NPI
Go
¹ Facility DBA Name
DCI ALBANY WEST TOWN (600375456)
* Assessment Period
09/07/2016 - 09/11/2016
* Patient
2Merge, 2Patient (2104871784)
Pain Assessment and Follow-Up Reporting Options
In order to comply with the requirements of the PY 2018 QIP, you must submit Pain Assessment and Follow-Up Plan Information for each eligible patient once between 1/1/2016 and 7/31/2016 and once between 7/1/2016 and 1/31/2017. This information is:
• Only required to be submitted for patients 18 years or older
• Only required to be submitted for patients treated at the facility for 90 days or longer
• Only required of facilities with at least 11 eligible patients during calendar year 2016
• Only required of facilities with a CCN open date prior to July 1, 2016
Please select one of the following options describing the pain assessment and (when necessary) the follow-up plan documented for the selected patient.
Pain assessment using a standardized tool is documented as positive and a follow-up plan is documented
Pain assessment documented as positive, a follow-up plan is not documented and the facility possesses documentation that the patient is not eligible
Pain assessment documented as positive using a standardized tool, a follow-up plan is not documented and no reason is given
Pain assessment using a standardized tool is documented as negative and no follow-up plan required
No documentation of pain assessment and the facility possesses documentation the patient is not eligible for a pain assessment using a standardized tool
No documentation of pain assessment and no reason is given