Optimizing Quick Text and Templates

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http://tinyurl.com/QT-Temp

Introduction

- I have been a PP user since 2001, and have spoken at most UGMs since 2002, introducing concepts like conditional logic, disease-aware templates, and use of clinical elements to save patient information.
- I have taught Advanced Template classes at the UGM for several years, and have worked with MPP on template development for several years.
- The last couple of years, I have worked as a workflow consultant and troubleshooter for groups who were trying to use PP more efficiently.
- I see patients about 20 hours a week in my home office.

Quick Text

- Quick text can be embedded into templates as "clickable" objects, or can be called from the Quick Text menu by the provider, as needed.
- The initial loading of Quick Text in a Practice
 Partner session can take quite a while, but the
 menu comes up quickly in subsequent loads.

Quick Text

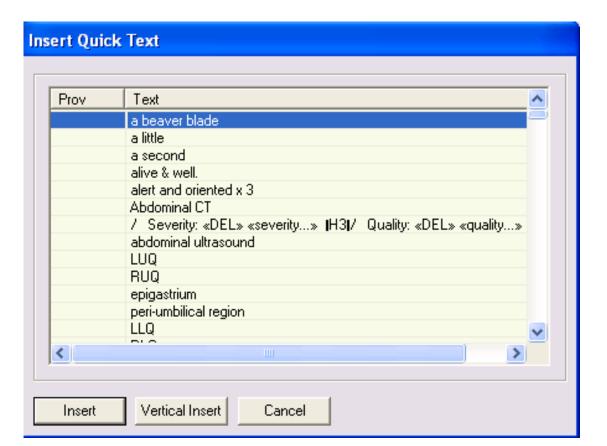
- Quick Text has a limited number of characters, depending on which version of PP you are on.
 9.5.2 seems to allow 1499 characters.
- The name of a quick text can contain up to 30 characters, not case sensitive
- The final character in quick text name cannot be an underscore ("_")
- In a note, quick text enclosed in label markers
 ** will expand automatically if clicked.

Quick Text - Pick Lists

- You can create a pick list of quick text by naming the items of the list with the same starting characters, such as "answerYes" "answerNo" and "answerMaybe"
- If you put the initial characters between the label markers, your get a pick list:
 - «Answer»
 - «Answer…» (the ellipsis at the end turns the quick text red)

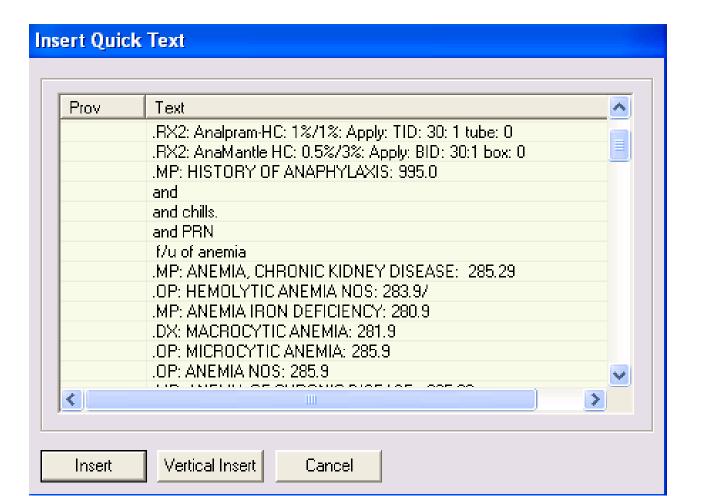
Quick Text- Pick List - Inconsistencies

 The pick list behavior is not totally consistent, especially with small numbers of characters.
 If you just use one character «A» you get:



Quick Text- Pick List - Inconsistencies

If you use «An» you get a list like this:



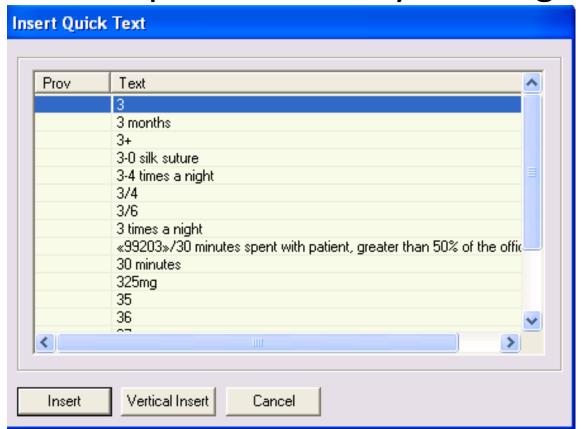
Quick Text- Pick List - Inconsistencies

 When you get up to three characters, «Ans» the matches get to be what you would expect:

sert Quick Text						
Prov	Text					
	maybe					
	no					
	yes					
<	>					
Insert	Vertical Insert Cancel					

Quick Text – Pick List Inconsistencies

- If you create a quick text named «3», it will just resolve to 3.
- If you create a pick list «3…» you will get:



The Point: Test, Test, Test

- Short quick text is treated differently than long quick text, numbers are treated different than letters, adding an ellipsis sometimes makes a difference, beyond creating the red color.
- You will not know what result you will get unless you test what you create. This is the number 1 rule for those making templates and quick text.
- Test, Test, Test

Quick Text and Formatting

- Quick Text does not contain any formatting, but it will inherit the formatting in any template it is brought into.
- If you put a Quick Text marker in a template that can be clicked on to expand it in the template, the contents of the quick text will inherit the formatting of the marker.

Special Cases of Quick Text: Comments

- You can make comments in quick text by putting the comment between label markers.
- It is good form to make your comments look different from standard quick text, so the user is not confused and does not try to click on a comment. I use ** ** to set off comments:

«** Two Asterisks at the start and end **»

Examples of Comments

- Flagging abnormal lab results:
 - «** | | IF LAB<HgbA1c> > "6.9" {A1c Not To Goal of < 7} | | | | **...»</p>
- Reminding providers of keyboard shortcuts:
 - «** Press Shift-F8 to bring up Dx Codes **»
- Reminding providers of previous plans:
 - «** Self Management Goal was | CE<Self Management Goal>[-Date]||**»

Special Cases of QT: Chained

- If you have a quick text longer than 1499 characters, you need to break it into two or more quick texts. Place the name of the second quick text in label markers at the end of the first quick text, following a <u>«REQ»</u> marker:
- "... this is the end of a very long quick text called quick text 1 <u>«REQ» «QuickText2»</u> "

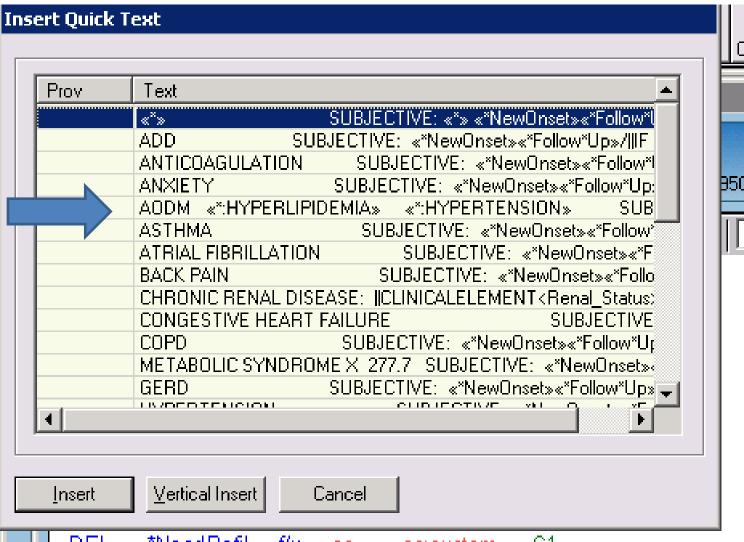
Special Cases of QT: Recursive

 If the contents of a quick text end with the quick text name itself in between label markers, this is called a "recursive" quick text. It is very good form to make the choices on pick lists recursive when the provider might want to select additional choices on the list at a later time. For example, if you have a pick list of subjective problems, and patients who say "by the way, . . . "

Example: Recursive Quick Text

<u>«*NextProblem»</u>

```
Problem: <u>«*FUof..»</u> <u>«S-...»</u>
<u>«*NextProblem»</u>
```



«DEL» «*NeedRefil» «f/u» «cc...» «cc:system...» C1.

Problem: «*FUof...» «S-...»

<u>«*NextProblem»</u>

```
Problem: AODM <u>«*:HYPERLIPIDEMIA»</u>
                                                                                                                               «*:HYPERTENSION»
                                                                                                                                                                                                               SUBJECTIVE:
«*NewOnset» «*Follow*Up»
Diabetes Dx date: 1978 <a href="mailto:chicken;">c*Edit Dx Date Diabetes</a>»
Most recent formal diabetes education: 1998 «*Edit Edu Date Diabetes»
Endocrinologist: Wallum <u>«*EditEndocrinologist»</u>
Frequency of home glucose monitoring: less than 4 / week <a href="mailto:k*Edit_HGM_Frequency">k*Edit_HGM_Frequency</a>»
Home FBS: 132 «*EditHomeFBS»
2HourPPGlucose: 175 <a href="mailto:tel-equal-representation-">tel-equal-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-representation-represen
«*insulin»
HTN Dx Date: <u>«DEL»</u> 2005 <u>«*EditHTNDxDate»</u>
Frequency of home BP checks: <u>«DEL»</u> 3 x a day <u>«*EditChecks BP?»</u>
Home BP readings: <u>«DEL»</u> none <u>«*EditHomeBPReadings»</u>
«REQ» «*CardiacData»
Date of last eye exam: <u>«DEL»</u> 10/12/10 <u>«*EditLastEyeExam»</u>
Eye Professional: <u>«DEL»</u> Lk Jane <u>«*EditOphthalmologist»</u>
Retinopathy: <u>«DEL»</u> <u>«*EditRetinopathy»</u>
Patient taking aspirin: <u>«DEL»</u> 81 mg QD <u>«*EditTakesAspirin?»</u>
Recent Lah Tests:
«REQ» «*CVLabs»
** today"s labs: **» <*DiabLabs»</p>
«REQ» «*DiabROS»
He denies chest pain with exercise, claudication, or TIA.
«REQ» «*HabitEntr»
«REQ» «*HCMEntry»
«REQ» «*Diabetes 2» «S-...»
«*NextProblem»
```

Additional Quick Text Tricks

- Practice Partner does not allow you to put quick text "back to back" in templates, always enforcing a space between.
- This means that if you have several quick texts in a row, and so he are not clicked, there will be extra spaces the result.
 - Carotids: <u>«Right»</u> <u>«Left»</u> <u>«Bilateral»</u> <u>«#+...»</u> <u>«no audible»</u> bruits
 - Carotids: right 2+ bruits
 3 spaces 2 spaces

Eliminating Spaces

- You can get rid of the extra spaces by making pick lists and by chaining quick text.
- Carotids: <u>«Right» «Left» «Bilateral» «#+...»</u> <u>«no audible»</u>
 bruits
- Carotids: <u>«BruitLocation…»</u> bruits
- BruitLocation is a pick list of the following:
 - no audible
 - right <u>«#+...»</u>
 - left «#+...»
 - bilateral <u>«#+...»</u>
- This is better, but there are still extra spaces if <u>«#+...»</u> isn't clicked
- We can fix this by modifying the contents of: <u>«#+...»</u>

Eliminating Spaces

- Originally, <u>«#+...»</u> contained "1+", "2+", "3+", and so on.
- if you change the elements in #"1+", " 2+", " 2+", " 3+" by putting a space in front of them, then you can change the BruitLocation...» elements to:
 - no audible
 - right«#+...»
 - left<u>«#+...»</u>
 - bilateral<u>«#+...»</u>
- This will eliminate the unnecessary spaces, whether or not «#+...» is selected.

More Spaces Issues

- You can put quick text right next to regular text in a template, and you can also do this in quick text itself.
- So, you can create phrases like:
 - Hand<u>«s»</u>
 - (No extra spaces whether or not the "s" is clicked)
 - The uterus was <u>«not-»</u>enlarged
 - (where <u>«not-»</u> expands to "not ")

Space Solution Using AutoHotKey

- One of the Edit Tools available with AutoHotKey allows you to highlight a section of text, press Alt-Shift-c, and extra spaces (and extra commas) will be removed.
- See my AutoHotKey talk or go to EMR Village to get the Edit Tools macro.
- - SKIN: good turgor, normal color, few flesh colored papule(s) on the face, no rash, no obvious tattoos.
- SKIN: good turgor, normal color, few flesh colored papule(s) on the face, no rash, no obvious tattoos.

Special Quick Text:

- «REQ» will not let you close a note unless there is something to the right of it
- «DEL» will delete the entire line unless there is something to the right of it.
- «NoDEL» (which you have to create) resolves to a carriage return. If placed before a «DEL» will move the «DEL» to the next line, thus negating it.
- «DelLine» (which you have to create) resolves to DEL and is good for putting at the end of lines that some providers might want to click on to delete.

«NoDEL» and «DelLine»

He denies chest pain, claudication, or TIA «DelLine»

He denies chest pain, claudication, or TIA «DEL»

He denies chest pain, claudication, or TIA «NoDEL» «DEL»

He denies chest pain, claudication, or TIA

«DEL»

Templates

- Templates in Practice Partner are quite powerful. They are virtually unlimited in size, and can contain formatting, complex and long conditional logic, tables, and even images. They load very quickly, almost instantly.
- The problem with templates is that the system ships with many more templates than any individual provider will use, and the average provider will want a very limited number to use on a day to day basis. Customizing them takes time, but is worth it because it increases provider productivity.

Template Suggestions

- Try to make the templates clean.
- Limited font sizes, Rare bold,
- Stick to one font
- Automatically bring into the template what the provider usually does, and this may be different for every provider
- "DelLine" or an "EditLinexxx" quick text should be at the end of every line that is automatically populated.

Example of An Exam

- DESCRIPTION: well developed, well nourished male, with a throat clearing cough, ambulating without difficulty. «*DelLine»
- -SKIN: good turgor, normal color, few flesh colored papule(s) on the face, no rash, no obvious tattoos. <a href="mailto:«*Edit Skin» (**DelLine»
- HAIR/NAILS: «DEL»nl hair except occipital thinning/ba normal nail color, no deformities «*Edit HairNails» «*DelLine»
- HEAD/EYES: Head AT/NC. Eyelids, sclerae, and conjunctivae were normal <a href="mailto:«*ExceptFor» «*ExceptEyes...» «*DelLine»
- EARS/NOSE/THROAT: Pinnae were NL. <u>«*WhichSide?...»</u> <u>«*TM Normal»</u> <u>«*WhichSide?...»</u> <u>«*TM Abn»</u>. Nose was unremarkable. <u>«*NoseMMNormal»</u> <u>«*NasalMM»</u>. <u>«*Phar Nl»</u> <u>«*Phar Ab»</u>. Lips NL. <u>«*DelLine»</u>
- NECK/NODES: <u>«DEL»</u> <u>«*FNeckFindings»</u>
- CHEST: <u>«*ChestNormal»</u> Ribs & sternum nontender<u>«*ExcpTendr»</u>. <u>«*DelLine»</u>
- LUNGS: <u>«DEL» «*ClearLung»</u> <u>«Lungs...» «*DelLine»</u>
- CARDIAC: <u>«DEL»</u> <u>«*CardiacExam»</u> <u>«*DelLine»</u>

«DEL» «*BreastExa»

Description

- DESCRIPTION: well developed, well nourished male, with a throat clearing cough, ambulating without difficulty.
 <u>Nescription</u>
 <u>Nescription</u>
- The code for the above description is:

```
-DESCRIPTION:
```

```
||CLINICALELEMENT<*General_Appearance>IF
CLINICALELEMENT<*General_Appearance> <> "" {, }
CLINICALELEMENT<*General_Distress>IF
CLINICALELEMENT<*General_Distress> <> "" {,
}CLINICALELEMENT<*General_Mobility>||.«*Edit
Description»«*DelLine»
```

The Code for . <u>«*Edit Description»</u>

```
«DEL»

    DESCRIPTION: «*DELline»

 General: | | CLINICALELEMENT<*General Appearance>
IF PAT SEX = "male" {man} ELSE {woman}|| «*Edit
GenDesc»
 Distress: | CLINICALELEMENT<*General Distress>||
«*Edit GenDistress»
 Mobility: ||CLINICALELEMENT<*General Mobility>||
«*Edit GenMobility»
```

The Code for ***Edit GenDesc**

«DEL»

```
.CE: *General_Appearance: | | IF BODY MASS INDEX
>= "50" {super obese} ELSE {IF BODY MASS INDEX
>= "40" {morbidly obese} ELSE {IF
BODY MASS INDEX >= "35" {moderately obese}
ELSE {IF BODY MASS INDEX >= "30" {mildly obese}
ELSE {IF BODY MASS INDEX >= "25" {mildly
overweight} ELSE {IF BODY MASS INDEX >= "20"
{normal weight} ELSE {IF BODY MASS INDEX < "20"
{underweight} }}}}}|||
```

Bringing Templates into Notes with Clicks

- PPCalcode is an AutoHotKey macro that adds numerous features to Practice Partner. One of these features is the ability to embed a marker in a template or quicktext that, when clicked, pulls a specific template into your note.
- This is especially helpful if you have templates with tables or other formatting in them that you want to be able to pull into a template at will.

Template

«DEL»||IF PAT_SEX = "male" { toalc template: *USPSTF Male‡} ELSE {†calc~template:*USPSTF Female‡}||

USPSTF A and B Recommendations for Male Medicare Patients

Topic	Description	Grade	? For You?
AAA Screen	1 time US screen for AAA in men 65-75 who have ever smoked	В	<u>«yes» «no»</u> «done»
Alcohol counseling	Behavioral counseling interventions to reduce alcohol misuse in adults	В	«yes» «no»
Aspirin to prevent CVD	Men: age 45 to 79 years when the potential benefit due to a reduction in myocardial infarctions outweighs the potential harm due to an increase in gastrointestinal hemorrhage.	А	«yes» «no»
BP Screening	Screening for high blood pressure in adults aged 18 and older.	А	yes - every 1 - 2 years
Cholesterol screening	For men and women of Medicare age, every 5 years	A	«yes» «no»
Colorectal cancer screening	In adults, beginning at age 50 years and continuing until age 75 years. (every 10 years for colonoscopy)	A	«yes» «no»
Depression screening	In adults when support for diagnosis, treatment, and follow-up are available	В	«yes» «no»
Diabetes screening	In adults with sustained BP greater than 135/80 (interval of every 3 years suggested)	В	«yes» «no»
Diet counseling	Intensive behavioral dietary counseling for adult patients with hyperlipidemia and other known risk factors for cardiovascular and diet-related chronic disease	В	«yes» «no»
Tobacco counseling	Ask all adults about tobacco use and provide tobacco cessation interventions for those who use tobacco products	Α	«yes» «no»
HIV / syphilis screening	The USPSTF strongly recommends that clinicians screen for (HIV) all adults at increased risk for HIV infection and screen persons at increased risk for syphilis infection.	А	«yes» «no»
Obesity screening	Screen all adult patients for obesity and offer intensive counseling and behavioral interventions to promote sustained weight loss for obese adults.	В	«yes» «no»
STI counselling	High-intensity behavioral counseling to prevent sexually transmitted infections (STIs) for all adults at increased risk for STIs.	В	«yes» «no»

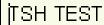
Bringing Previous Lab Data into Templates

- Since the current version of PP will only pull the most recent lab data into a note, it is frustrating for providers who would like to bring several of the previous values into the note
- Although this can be done with add-on Screen OCR utilities, it can also be done using Clinical Elements
- Imagine the provider wants to bring the last few TSH values into a note.

The Solution

- Create several CE's: TSH, TSH -0, TSH -1, TSH 2, TSH -3
- Put them in a table in a template (shown next)
- Add code that updates the CE's when the note is saved
- Workflow Issue: The MA needs to enter the most recent Lab TSH value as a CE value before the note is started

The Actual Template



Displays TSH's over time

Most Recent TSH	TSH Prior 0	TSH Prior 1	TSH Prior 2	TSH Prior 3
CE <tsh> </tsh>	CE <tsh-0> </tsh-0>	CE <tsh -1=""> </tsh>	CE <tsh-2> </tsh-2>	CE <tsh-3> </tsh-3>

Something goes in here. . .

```
** End Template ---- update the Clinical Elements **>
```

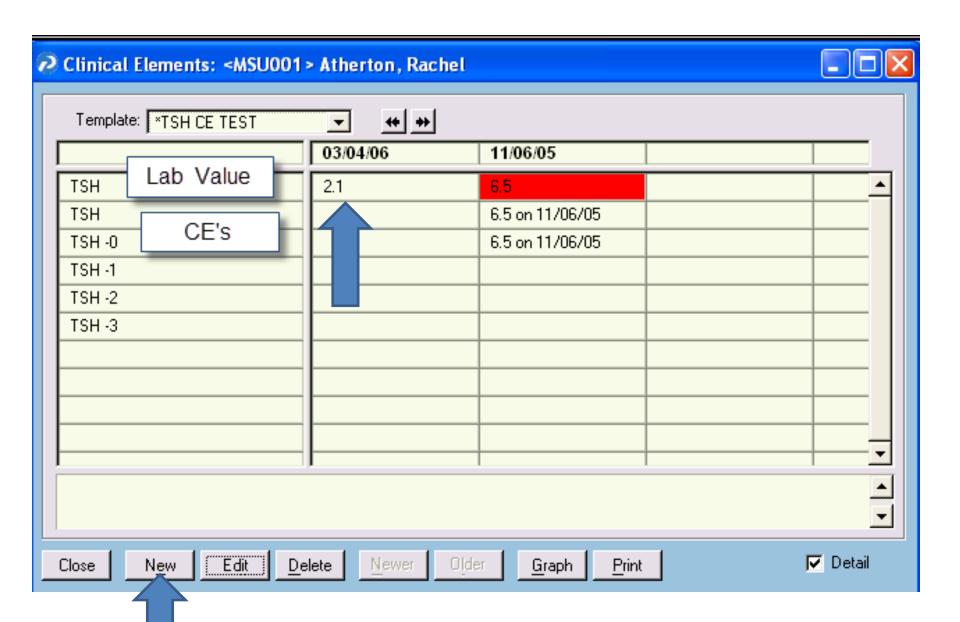
.CE: TSH -3: «DEL» ||CE<TSH -2>||

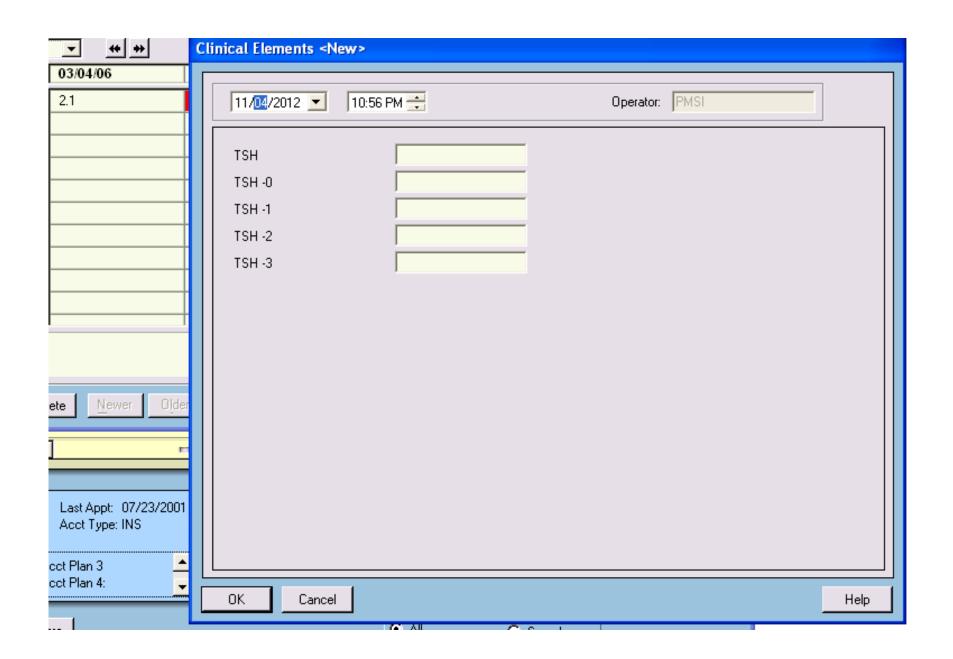
.CE: TSH -2: «DEL»||CE<TSH -1>||

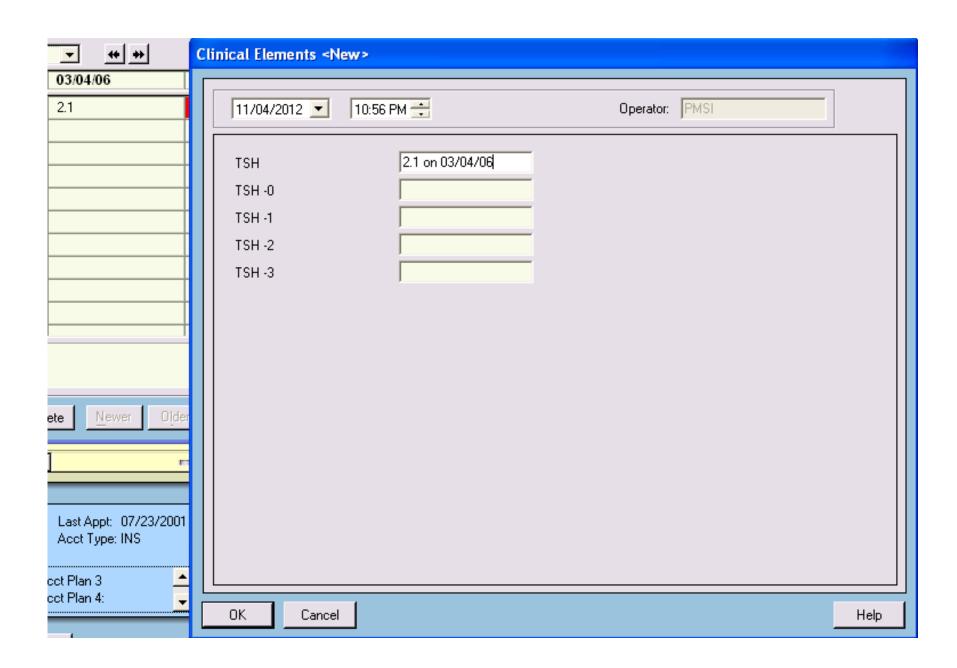
.CE: TSH -1: «DEL»||CE<TSH -0>||

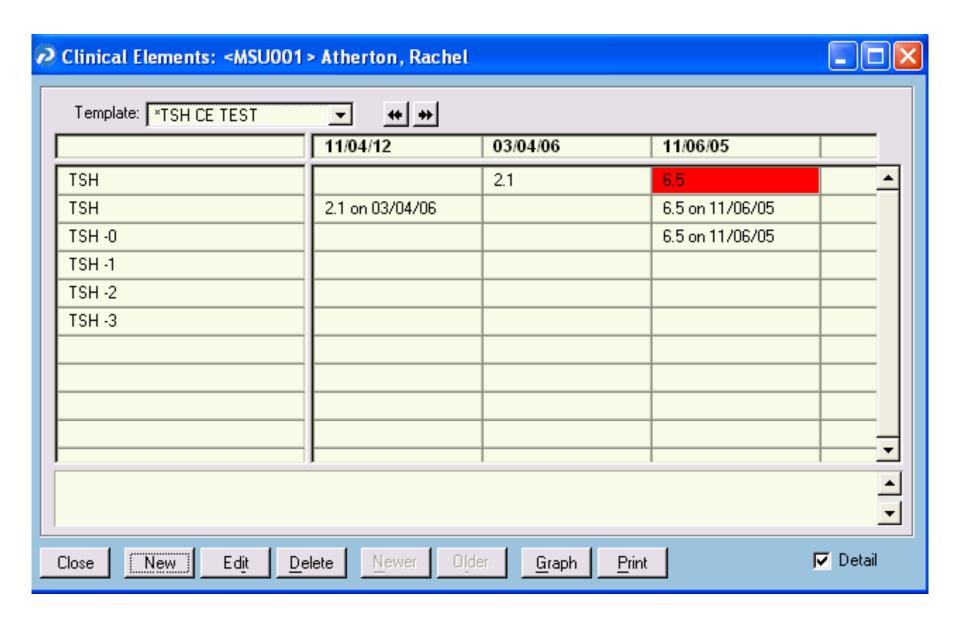
.CE: TSH -0: «DEL»||CE<TSH>||

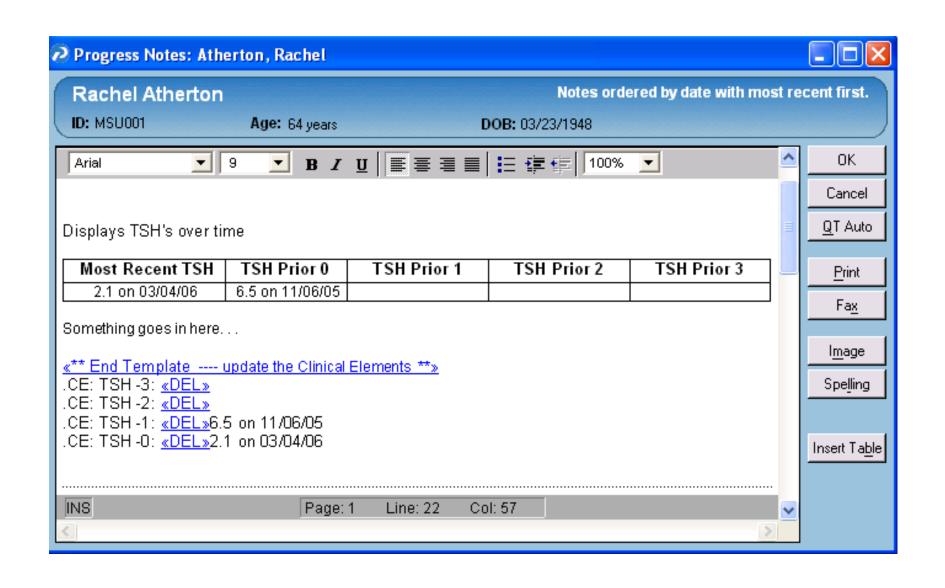






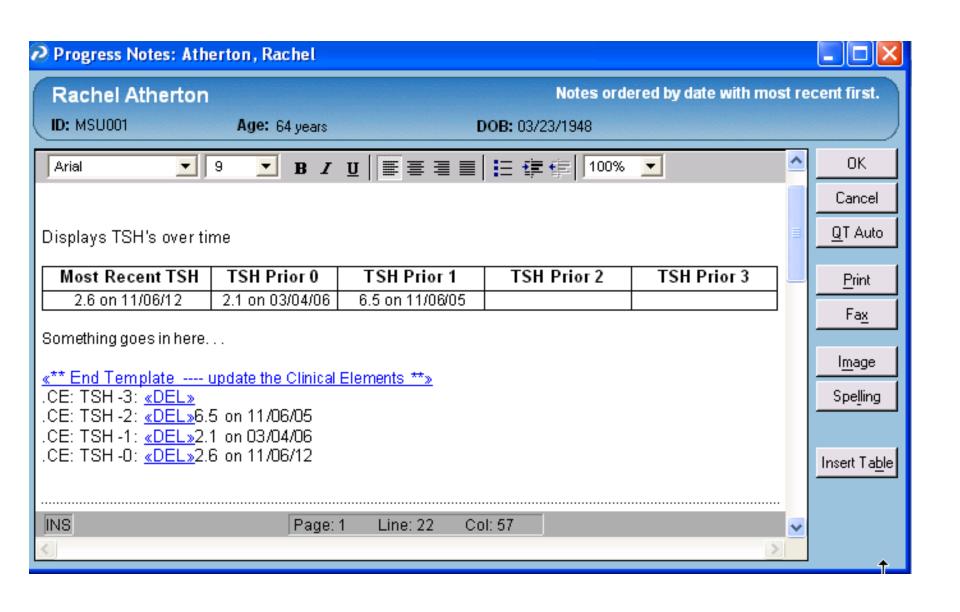




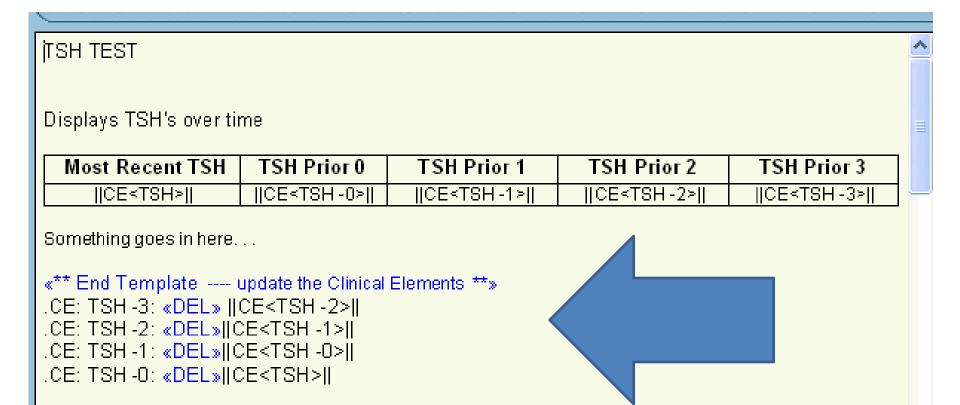


Bringing in Previous Lab Data

- Each time a new TSH is drawn in the lab, and the patient is seen for follow-up, the CE TSH values are automatically "aged"
- After another visit, the note looks like this:



The Actual Template



Hiding Stuff

- Practice Partner is a note-centric EMR, meaning that data is pulled into and pushed out of notes.
- Sometimes, the dot codes that push things out make the note messy.
- For example, say you wanted to save the following:

```
.L: LastVisitDate: ||DATE||
    .L: Last Weight: «DEL»|| VITAL_WGT[=TodaysDate] ||
    .L: Last Estimated GFR: «DEL» ||EST_CREATININE_CLEARANCE||
so you could bring these values into a future note?
```

- Two strategies to fix this:
 - Tiny fonts
 - Invisible fonts

Tiny Fonts

- You can make any text in a note as small as the system will allow by highlighting it and entering the font size. Size 1 is pretty good – it just leaves a few specks on the page.
- The system can understand and act on the dot codes no matter what size the font is, even down to font size 0.1, which is virtually invisible.

9 point font

.L: LastVisitDate: 10/16/12

.L: Last Weight: <u>«DEL»</u> 162 lbs .L: Last Estimated GFR: <u>«DEL»</u> 61 mL/min

1 point font

```
<u>«*Proc»</u>
«*E-Rx»
```



0.1 point font

```
<u>«*Proc»</u>
«*E-Rx»
```

Tiny Fonts

- So, you can write the code in your templates, then simply shrink the font in the template so you hardly see it in the actual note.
- Or, if you have some stuff you want to be able to see while writing the note, you can leave it a reasonable size, and let your providers use the AHK Edit Tools to highlight the text and shrink it once they have entered the values, if it is something that does not need to be seen in the note.

Invisible Fonts

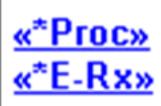
- You can install invisible fonts on your system with
 - http://www.angelfire.com/pr/pgpf/if.html
- Copy the text into WordPad
- Highlight it and change the font to invisible
- Paste it back into your note.
- Practice Partner acts on invisible dot codes just like it acts on tiny dot codes.

9 point font

.L: LastVisitDate: 10/16/12

.L: Last Weight: <u>«DEL»</u> 162 lbs .L: Last Estimated GFR: <u>«DEL»</u> 61 mL/min

Invisible Fonts



Making Templates Disease-Aware

• You can make your templates disease-aware by creating clinical elements for the diseases in question, and then using conditional logic to test these clinical elements and modify what your note Says. Clinical Elements: <DUCKDONALD> Duck, Donald

Clinical Elements: <DUCKDONALD> Duck, Donald Template: Chronic Disease 10/24/12 DxDM1 Ν Υ DxDM2 Υ DxHL Υ DxHTN DxAFΝ DxLVH Ν DxCAD Ν

Conditional Logic Examples

- ||IF CE<DxDM2> = "Y" {Recent Labs: LAB<Hgb A1c>[-Date]}||
- ||IF CE<DxDM2> = "Y" {Foot Exam: «REQ» }||
- ||IF CE<DxAF> = "Y" {CHADS Score was CE<CHADS>[-Date]}||
- ||IF CE<DxLVH> = "Y" {Left Ventricular Wall thickness was CE<LVWT>[-Date]}||

A Final Note

- Sometimes things do not work as they should.
- A note gets saved with the wrong font, or with extra spaces that you do not think should be there.
- You may be right.
- The problem may be "hidden characters" in the template.
- Copy the template into Notepad, and then paste it back into a new template. This may fix it.

Questions?

• (and, thank you for your attention)