

## **ADPH Follow Up Protocol & F/U Management Process**

**Satellite Conference and Live Webcast  
Thursday, November 15, 2018  
9:00 – 11:00 a.m. Central Time**

**Produced by the Alabama Department of Public Health  
Video Communications and Distance Learning Division**

### **Faculty**

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### **Objective**

- **Discuss ADPH requirements of EHR follow-up process by:**
  - Listing the six steps in the follow-up process & demonstrate documentation and completion of follow-up**

### **Purpose of Follow-up?**

- **To outline the steps ensuring patients receive timely evidenced-based education and care**
- **The recommended therapeutic plan of care is done**
- **Confirm completion of the process**

### **Purpose of Tracking**

- **To make sure all results are received, results are followed-up, and all abnormal findings are followed through to completion**
  - Labs Tests; such as Thyroid function, paps, etc. Procedures; such as colposcopy biopsy, etc. Referrals; such as AUB, HTN, etc.**

**ADPH Protocol**

**Framework of ADPH**

Follow-up that is the recommended  
“Standard of Care”

**ADPH Protocol**

After a referral, records need to be obtained – so there are no gaps in care

1. Technical expertise outside our scope of practice
2. Correct diagnosis
3. Recommend a course of action best for patient

ACOG Committee Opinion #365, May 2007 Reaffirmed 2016

**Safe Practice**

To improve the safety/efficacy in patient care and our clinical practice and avoid bad outcomes

**ADPH Follow-Up/Tracking Steps:**

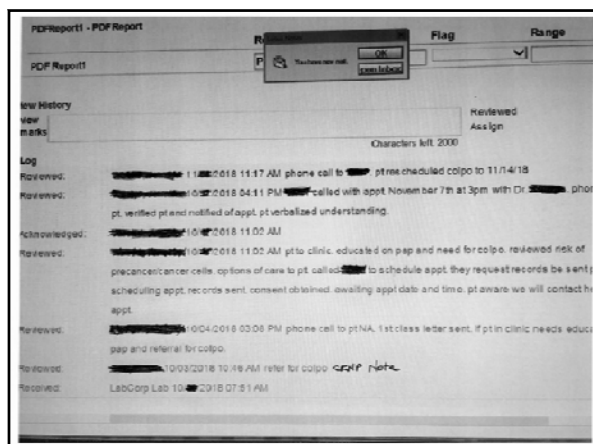
1. All abnormal results received  
Require review & signature by the RN/NP  
Initiate the tickler tracking system  
(A) To follow all abnormal results  
(B) Referrals given on the day of exam

**ADPH Follow-Up/Tracking Steps:**

2. (A) After RN/NP reviews abnormal lab results – Electronic signature done and date will be on the lab test

**Abnormal Follow-up Tracking Steps**

- (B) If the NP receives the abnormal test the NP can initiate a referral note and document dispensation notes for further care and assign to follow-up RN.
- If the RN receives the abnormal test, the RN can initiate a referral note and assign to the NP to write the NP dispensation notes.



### Abnormal Follow-Up/Tracking Steps:

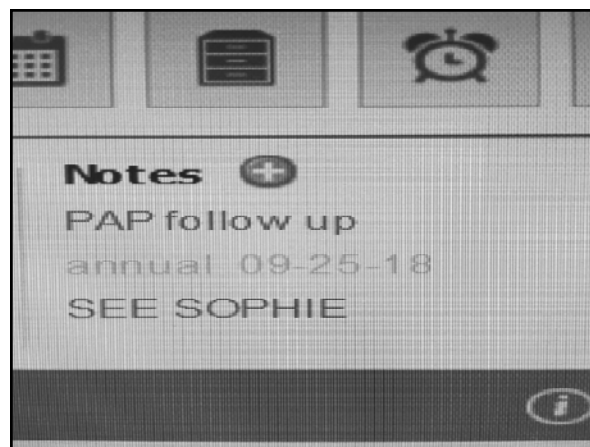
3. Within 5-7 business days of receipt of abnormal results: Initiate notifying patient

(A) Phone call where patient is reached OR send Notification letter #1

(B) If no response in 2 weeks send Notification letter #2 (certified letter)

### Abnormal Follow-Up/Tracking Steps:

- If no response from second (certified) letter within 2 weeks, no further follow-up is required. Document clearly all attempts to contact patient!
- Notation will be added to the EHR notes section of the Banner as "high priority"
- The follow-up abnormal results should be addressed & documented at every clinic visit



### Follow up note example:

Patient in clinic for supply today. She has history of HGSIL HPV + pap which requires colposcopy. Patient was counseled on 0/0/2018 and could not go to colpo due to lack of insurance. Patient is counseled today regarding need for further evaluation of abnormal pap smear. She was counseled that the recommended plan of care is colposcopy and probable biopsy to determine specific information about the abnormal cells on the cervix. A f/u appointment has been scheduled at UAB colpo clinic 12/1/2018. She has been counseled the consequences of not following up on this abnormal test could result in progression of the disease to possible cervical cancer and result in death if not treated appropriately. Patient verbalized her understanding of counseling.

### Abnormal Follow-up/Tracking Steps:

4. When the patient is reached, the patient will be educated on the abnormal result, appropriate appointments made, and referral given

**Abnormal Follow-Up/Tracking Steps:**

- 5. Assure follow-up appointments are kept and all records received within 30 days after appointment

Records should include colposcopy notes, colposcopy biopsies, ECC with pathology reports, and procedure notes (LEEP, CKC, & Plan of Care)

**Abnormal Follow-Up/Tracking Steps:**

- 6. The follow-up is not completed until post procedure (ex: Colpo) results are received and disposition made

Consult collaborating physician if general management is outside ADPH or ASCCP guidelines

Follow patient until she returns to routine screening

**Abnormal Follow-up/Tracking Steps:**

- Document all pertinent information on Referral form (can be attached to provider note)
- Tickler cards should be made for all abnormal results (when follow-up returns to routine, the tickler card should be scanned in and uploaded to the documents)

**Tickler Card**

ABNORMAL FINDINGS FOLLOW UP TICKLER CARD

PINALCON LABEL		Additional Information	
Name	Julie Dea		
Phone of home	603-1000		
City	CLIFTON		
State	NH		
Date	Result/Finding	Action Taken (i.e., appt. made; phone call; first class letter, certified letter, home visit)	Comments/Follow-Up Date
4/15/17	ASCUS	phone call attempted x 1 1st class letter	Repeat cytology 12/26/17

PINALCON LABEL		Additional Information	
Name			
Date			
CHRF			
DOB			
Date	Result/Finding	Action Taken (i.e., appt. made; phone call; first class letter, certified letter, home visit)	Comments/Follow-Up Date
4/15/17	Pap 140115 ASCUS	Repeat pap in lap done 4/20/16	Return Routine Screening
		4/11/16 04/21/16 pap Nsg Repeat pap in 12/26/17 done 4/20/17	
		04/25/17 FPA	
		5/1/17 04/28/17 Pap Nsg	

**Phone Contact**

- The patient or guardian is successfully contacted and the importance of the recommended f/u for abnormal finding is discussed.
- Education/counseling & referral given

### First Class Letter

- 1<sup>st</sup> class letter notifies the patient to contact the health department. Do not educate/counsel in letter.
- Unless insufficient postage or some other technical reason, if 1<sup>st</sup> class letter is returned undeliverable, skip the 2<sup>nd</sup> letter step

### Letter with Receipt

- Certified letter is one that the post office requires a signed receipt upon delivery
- Any one can sign for the certified letter; may not be the patient

### Escalating Attempts

Two step letter process – progressive with better chance of success

1. Phone call/1<sup>st</sup> class letter within 5-7 days of receiving abnormal finding
2. If no response within 2 wks, 2<sup>nd</sup> letter certified

### Documentation

- Who was counseled (patient or guardian)
- Where/how counseling occurred (phone or clinic visit)
- Description of abnormal finding
- Treatment recommendations
- F/U appointments
- Consequences of not following recommendations

### Documentation

“If it’s not written, it didn’t happen”

### Follow-up

- Document risks & counseling every clinic visit!!! Flag her banner in red as high priority
- Any person lost to previous follow-up attempts should not be denied future ADPH services

### Pap Smear Follow-up

- Routine post colposcopy management
  - If the patient is referred back to the health department, the health department will follow UAB (ASCCP) guidelines

### Abnormal Breast Follow-up

Mammogram f/u nurse will need to send information for review to collaborating MD via the abnormal breast template

- A. Mammogram results Birad 0 with f/u study results of Birad 3, 4, or 5
- B. Abnormal CBE

### Abnormal Breast Follow-up

#### Family history of breast cancer

### Abnormal Breast Case Study

- Case Study – 45 y/o with palpable breast lump
- A diagnostic mammogram is ordered and the patient missed her appointment
- What is the next recommended step for the follow-up nurse?

### Abnormal Breast Follow-up

- 45 year old with palpable breast lump, missed her diagnostic mammogram. The collaborating MD received the medical records for review via the abnormal breast consult template. Records indicate:
  - (1) the clinical breast exam was done
  - (2) the diagnostic mammogram was scheduled
  - (3) the patient missed her appointment
  - (4) a certified letter was sent four months later

There was no other documentation

### Abnormal Breast Follow-up

- The patient showed up at the imaging center five months after her appointment was originally set and said her car broke down
- Mammogram and ultrasound was done

### Abnormal Breast Follow-up

- The patient's diagnostic mammogram and follow-up ultrasound was Birads 4 – biopsy was recommended

### Abnormal Breast Follow-up

- The patient had a excisional biopsy which showed adenocarcinoma and the surgeon referred her to the oncologist for plan of care
- Is follow-up complete?

### Routine Screening Mammogram

- A Routine Screening Mammogram with a negative CBE – call to verify the appointment was kept
- Results received and documented
- If appointment not kept, no further f/u needed



### Faculty

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