DRAFT

Use of the Suggested Clinical Data Elements is Voluntary / Optional

Immunosuppressive Drug Progress Note
Suggested Clinical Data Elements (CDEs)
Version R1.0a (4/30/2018)

Note: If these CDEs are used:
1) CDEs in black Calibri are required
2) CDEs in *burnt orange Italics Calibri* are required if the condition is met
3) CDEs in blue Times New Roman are recommended but not required

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Beneficiary Information CDEs

PBD: Patient/Beneficiary Demographics

PBD1: Patient's first name, last name, and middle initial (text)

PBD2: Patient's date of birth (date: MM/DD/YYYY)

PBD3: Patient's Gender (Single selection from the value set: M, F, Other)

PBD4: Patient's Medicare ID (Medicare ID format and check digit)

Encounter CDEs

PND: Physician/NPP Demographics

If different than the signing provider

PND1: Provider first name, last name, middle initial, and suffix (text).
PND2: Provider NPI (Numeric with check digit)

ENC: Encounter

ENC4: Date of evaluation (date: MM/DD/YYYY)

Encounter Question CDEs

NEBENC: Immunosuppressive Drug Encounter

ISDENC1: Is this a Progress Note for Immunosuppressive Drug therapy? (Single selection from value set: Yes, No)

ISDENC1a: If no, describe purpose. (text)

Diagnoses CDEs

DIAG: Current patient diagnoses (repeat as necessary)

DIAG1: Diagnoses

DIAG1a: ICD10 (code) (from valid list of ICD10 codes

DIAG1b: Description (text)

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Qualification CDEs

ISDQUAL: Immunosuppressive qualifying transplants

> **ISDQUAL1**: Patient diagnoses for order (Multiple selection from value set: Kidney, Heart, Liver, Lung, Bone marrow / stem cell, Intestinal, Pancreas (whole organ), Pancreas (islet cell, partial) NIH Clinical Trial, Other)
>
> If Other, **ISDQUAL1a**: Other (text)
>
> **ISDQUAL2**: Date of transplant (MM/DD/YYYY) (date)
>
> **ISDQUAL3**: Institution where transplant was performed (text)
>
> ***ISDQUAL4:*** Transplant met Medicare coverage criteria in effect at the time*: Yes, No, Unknown)*
>
> *If answer to IDSQUAL1 is Pancreas (whole organ)*
>
>> ***ISDQUAL5:*** *Does patient meet the requirements defined in the guidance (single selection from value set: Yes, No, Unknown)*

Subjective CDEs

SUB: Subjective

> **SUB1**: Chief complaint / history of present illness and associated signs / symptoms (text)
>
> **SUB2**: Related past medical / surgical history (text)

MED: Medications (Status value set: New, Current, Modified, Discontinued)

> **MED1**: Medications (Repeat until complete: RxNorm, Description, Dose, Frequency, Route, Status)
>
> **MED2**: Other Medications (text)

ALL: Allergies (include RxNorm if Known)

> **ALL1:** Allergies (RxNorm, Description …)

Review of Systems CDEs

ROS: Review of Systems (Multiple selection from all of the following elements, ROS1-ROS21 and value set following each)

> **ROS1:** General: weight gain, weight loss, sleeping problems, fatigue, fever, chills, night sweats/diaphoresis
>
>> **ROS1a:** other: (text)
>
> **ROS2:** Skin: pressure ulcers, rashes, changes in nails/hair, eczema, pruritus
>
>> **ROS2a:** other: (text)
>
> **ROS3:** Lymphatic: swollen glands/masses (in the neck, axilla, groin)
>
>> **ROS3a:** other: (text)
>
> **ROS4:** Head: fainting, dizziness, headaches
>
>> **ROS4a:** other: (text)

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ROS5: Eyes: diplopia, glasses/contact lenses, redness/discharge, blurred vision, glaucoma, cataracts

    ROS5a: other: (text)

ROS6: Ears: tinnitus, discharge, hearing loss

    ROS6a: other: (text)

ROS7: Nose: epistaxis, sinus infections, discharge, polyps

    ROS7a: other: (text)

ROS8: Oral: dysphagia, hoarseness, teeth/dentures

    ROS8a: other: (text)

ROS9: Neck: lumps, pain on movement

    ROS9a: other: (text)

ROS10: Breast: masses/tumors, tenderness, discharge, gynecomastia

    ROS10a: other: (text)

ROS11: Pulmonary: cough, shortness of breath, pain, wheezing, hemoptysis, sputum production

    ROS11a: other: (text)

ROS12: Cardiac: chest pain, palpitations, orthopnea, murmur, syncope

    ROS12a: other: (text)

ROS13: Vascular: edema, claudication, varicose veins, thrombophlebitis, ulcers

    ROS13a: other: (text)

ROS14: Gastrointestinal: swallowing problems, abdominal pain, constipation, diarrhea, incontinence, nausea, vomiting, ulcers, melena, rectal bleeding, jaundice, heartburn, hematemesis

    ROS14a: other: (text)

ROS15: Renal: dysuria, frequency, urgency, hesitation, flank pain, hematuria, incontinence, nocturia, polyuria

    ROS15a: other: (text)

ROS16: Musculoskeletal: pain, swelling, stiffness, limitation of range of motion, arthritis, gout, cramps, myalgia, fasciculation, atrophy, fractures, deformity, weakness

    ROS16a: other: (text)

ROS17: Neurologic: seizures, poor memory, poor concentration, numbness/tingling, pins and needles sensation, hyperpathia, dysesthesia, weakness, paralysis, tremors, involuntary movements, unstable gait, falls, vertigo, headaches, stroke, speech disorders

    ROS17a: other: (text)

ROS18: Psychiatric: hallucinations, delusions, anxiety, nervous breakdown, mood changes

    ROS18a: other: (text)

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ROS19: Hematology: anemia, bruising, bleeding disorders (conditional)

    ROS19a: other: (text)

ROS20: Endocrine: heat or cold intolerance, diabetes, lipid disorders, goiter

    ROS20a: other: (text)

ROS21: Other:(text)

Objective / Physical Exam CDEs

OBJ: Objective / Physical Exam:

OBJ1: Vital Signs:

    OBJ1a: Temperature: (numeric and units)

    OBJ1b: Pulse: (numeric – beats per minute)

    OBJ1c: Respiration: (numeric – breaths per minute)

    OBJ1d: Blood Pressure:

        Systolic: (numeric – mm of mercury)

        Diastolic: (numeric – mm of mercury)

    OBJ1e: Height: (single part: numeric and units or two part with numeric and units for each)

    OBJ1f: Weight: (single part: numeric and units or two part with numeric and units for each)

OBJ: Objective / Physical Exam:

OBJ2: General Appearance: (text)

OBJ3: Head and Neck: (text)

OBJ4: Chest/lungs: (text)

OBJ5: Cardiovascular: (text)

OBJ6: Abdominal: (text)

OBJ7: Musculoskeletal / extremities: (text)

OBJ8: Neurological: (text)

OBJ9: Psychiatric: (text)

OBJ10: Visual Exam: (text)

OBJ11: Other: (text)

Immunosuppressive Drug Assessment and Plan CDEs

ASM: Assessment

ASM1: Assessment/Status (text)

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ISDPLAN: Treatment Plan

ISDORD: Immunosuppressive Drug Order (from fixed list and other)

ISDORD3: Selection (binary)

ISDORD3a: HCPCS (coded values or text entry) (see appropriate values)

ISDORD3b: Drug(Description) (text) (see appropriate values)

ISDORD3c: Route (single selection from value set: Oral, Parenteral, Injection)

ISDORD3d: Concentration (numeric in mg/ml)

ISDORD3e: Frequency (text or numeric in times per day)

ISDORD3f: Quantity (numeric)

ISDORD3g: Refills (numeric) (not used for dispense)

ISDORD4: Supplies (text)

PLAN: Treatment Plan

PLAN1: Treatment Plan (text)

ORD: Orders

ORD1: Medications (other than the immunosuppressive drugs): (text)

ORD2: Supplies: (text)

ORD3: Investigations (Diagnostic testing): (text)

ORD4: Consults: (text)

ORD5: Other: (text)

Provider Signature CDEs

SIGPNP: Physician/NPP Signature Elements

SIGPNP1: Physician/NPP Signature (image, electronic, or digital)

SIGPNP2: Physician/NPP Printed Name (text)

SIGPNP5: Date of Signature (MM/DD/YYYY)

SIGPNP4: Physician/NPP NPI (NPI format)