

## BACKGROUND

In patients with stable ischemic heart disease (SIHD) there is a need for cardiology quality decision making applied in the outpatient clinic at the point of patient care.

The Florida Cardiovascular Quality Network (FCQN) is a quality outcomes registry. In a diverse group of clinical sites in Florida, a large number of patients with suspected or known SIHD referred for cardiovascular evaluation were enrolled in this pilot state-wide quality registry . The FCQN utilizes mobile systems to provide clinicians with multiple clinical decision support (CDS) tools at the point of care. The FCQN is based on the hypothesis that point of care documentation of angina symptoms, appropriate use criteria (AUC), as well as risk factor education, will assist the provider to improve clinical decisions and improve quality of care.

## OBJECTIVES

The Florida Cardiovascular Quality Network is based on the following objectives:

- (1) Utilization of clinical decision support applications at the point of care will improve angina symptom documentation, use of AUC, and aid guideline based clinical decision making.
- (2) Utilization of highly interactive visual patient education software at the point of care will improve awareness of cardiovascular disease, patient adherence to medical treatment, and improve cardiovascular risk profile.

## METHODS

### FCQN Clinical Sites

Statewide Quality Registry  
IRB and Florida Chapter ACC oversight

### Patients

n = 252 patients with symptomatic angina

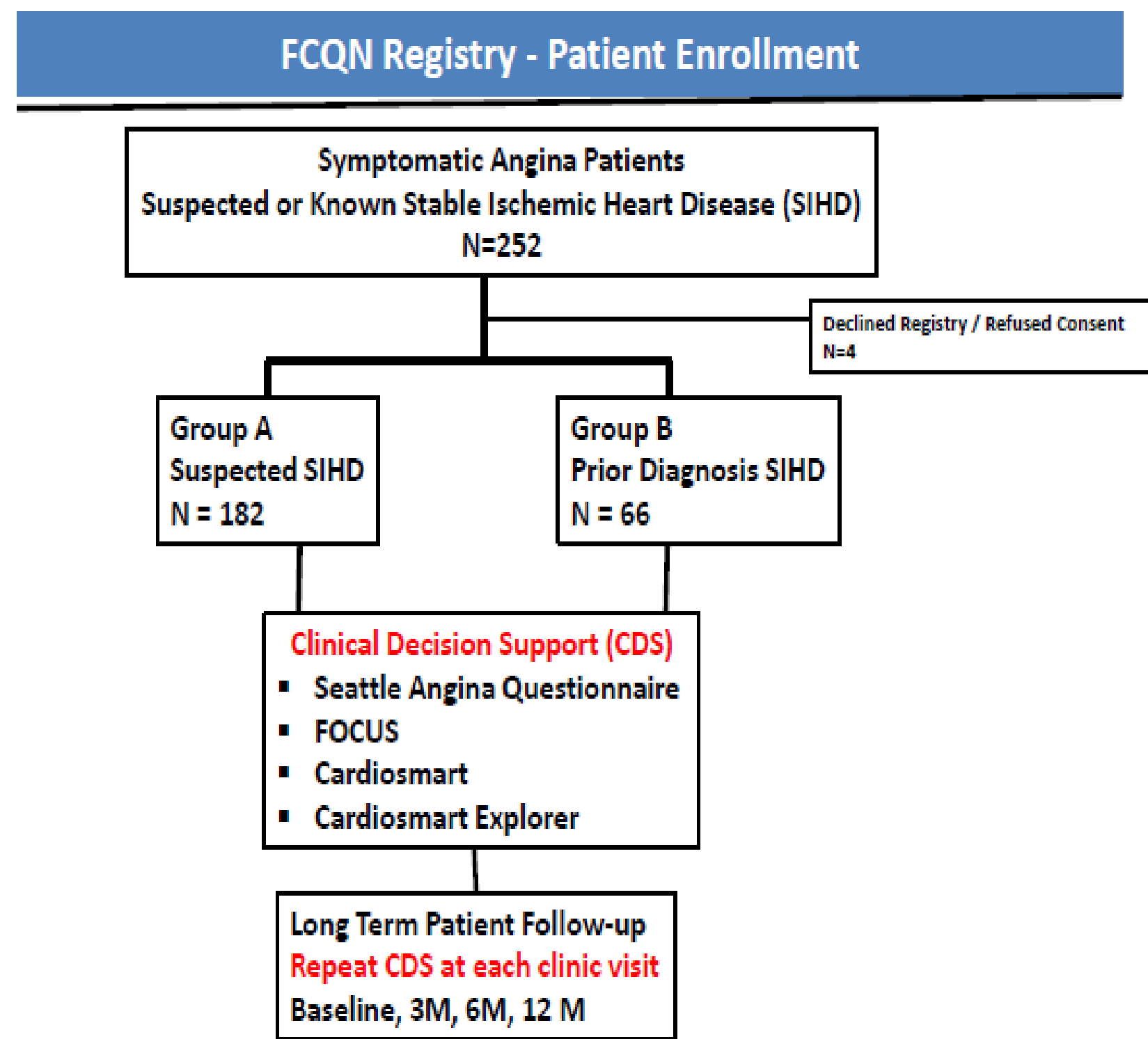
Group A = without pre-existing SIHD

Group B = with pre-existing SIHD

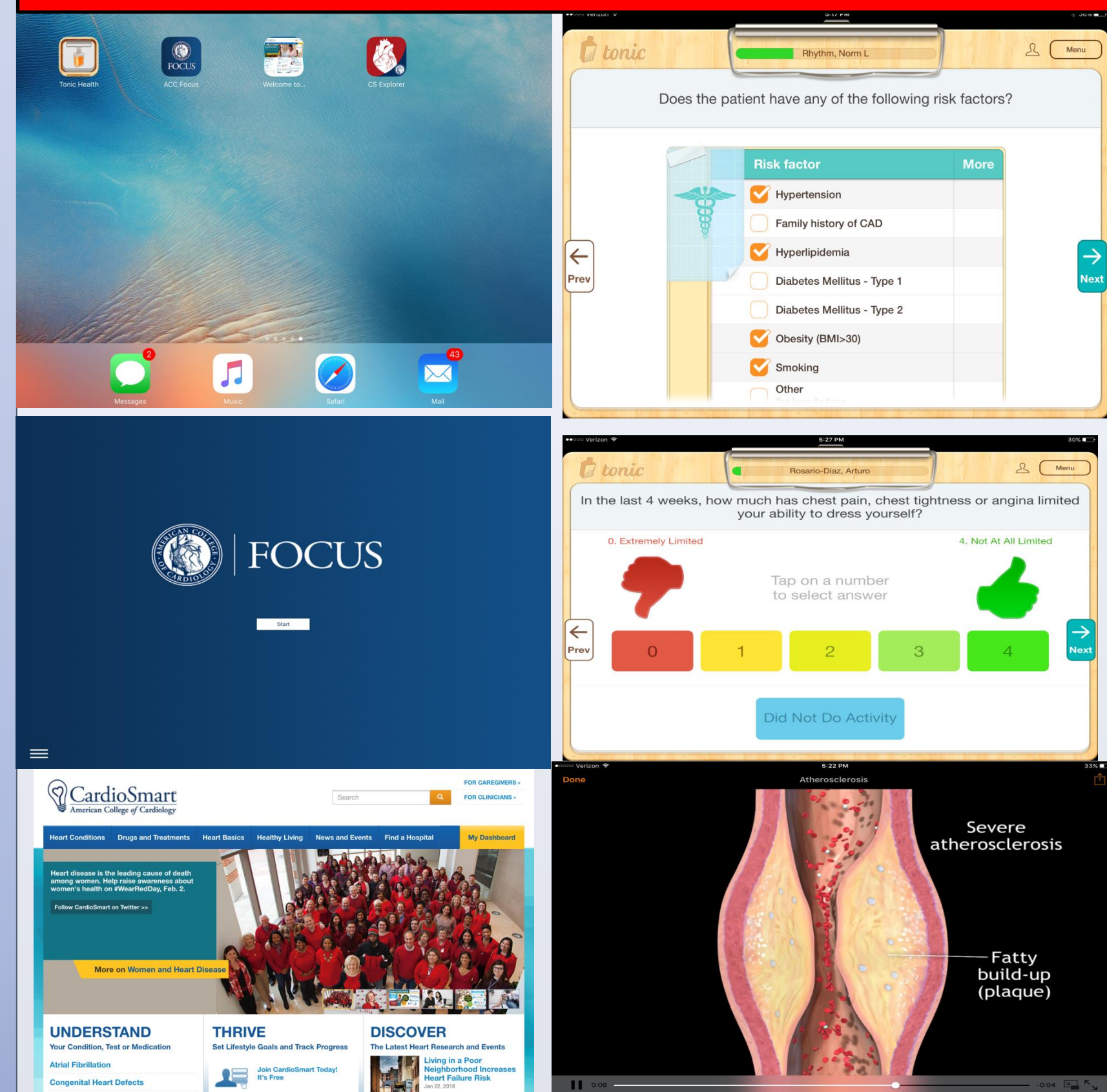
### Point of Care Clinical Decision Support (CDS)

- Seattle Angina Questionnaire
- FOCUS
- Cardiosmart
- Cardiosmart Explorer

Clinic Visits: Baseline, 3 M, 6 M, 12 M



## iPAD Point of Care CDS



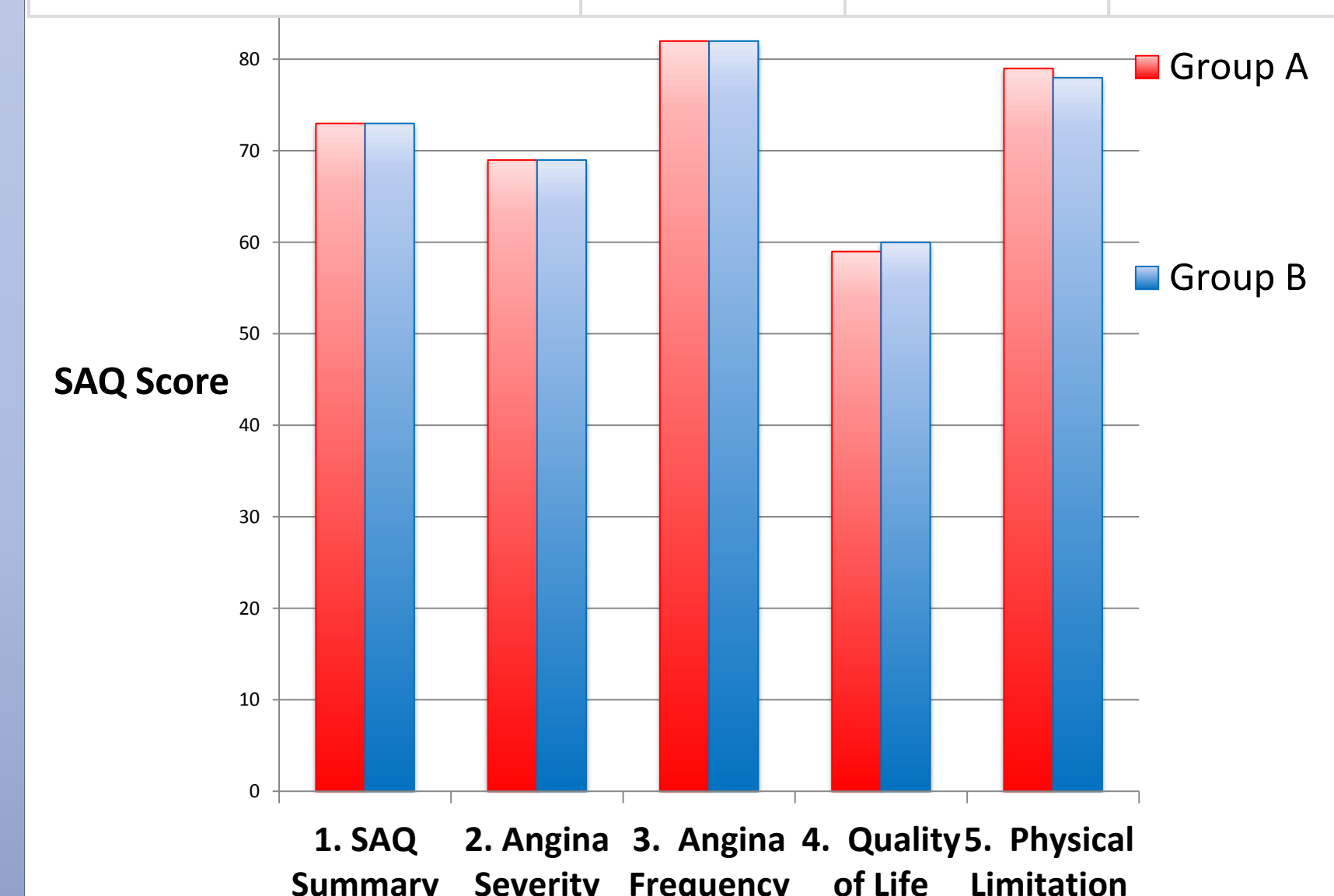
## BASELINE RESULTS

Baseline Demographics				
	Group A n=182	Group B n=66		p
Age (mean)	63+/-13	70+/-10		<.001
Gender n (%)				
Male	72 (39)	44 (67)		<.01
Female	110 (61)	22 (33)		<.01
Ethnicity n (%)				
White	139 (76)	56 (85)		<.02
Black	25 (14)	4 (6)		<.01
Hispanic	11 (6)	4 (6)		ns
Other	7 (4)	2 (3)		ns
Risk Factors n (%)				
Hypertension	121 (66)	57 (86)		<.001
Hyperlipids	103 (57)	57 (86)		<.001
Diabetes	31 (17)	28 (42)		<.001
Smoking	28 (15)	11 (16)		ns
Obesity BMI > 30	86 (47)	35 (53)		ns
Cardiosmart n (%)	153 (84)	49 (74)		<.05

## BASELINE RESULTS

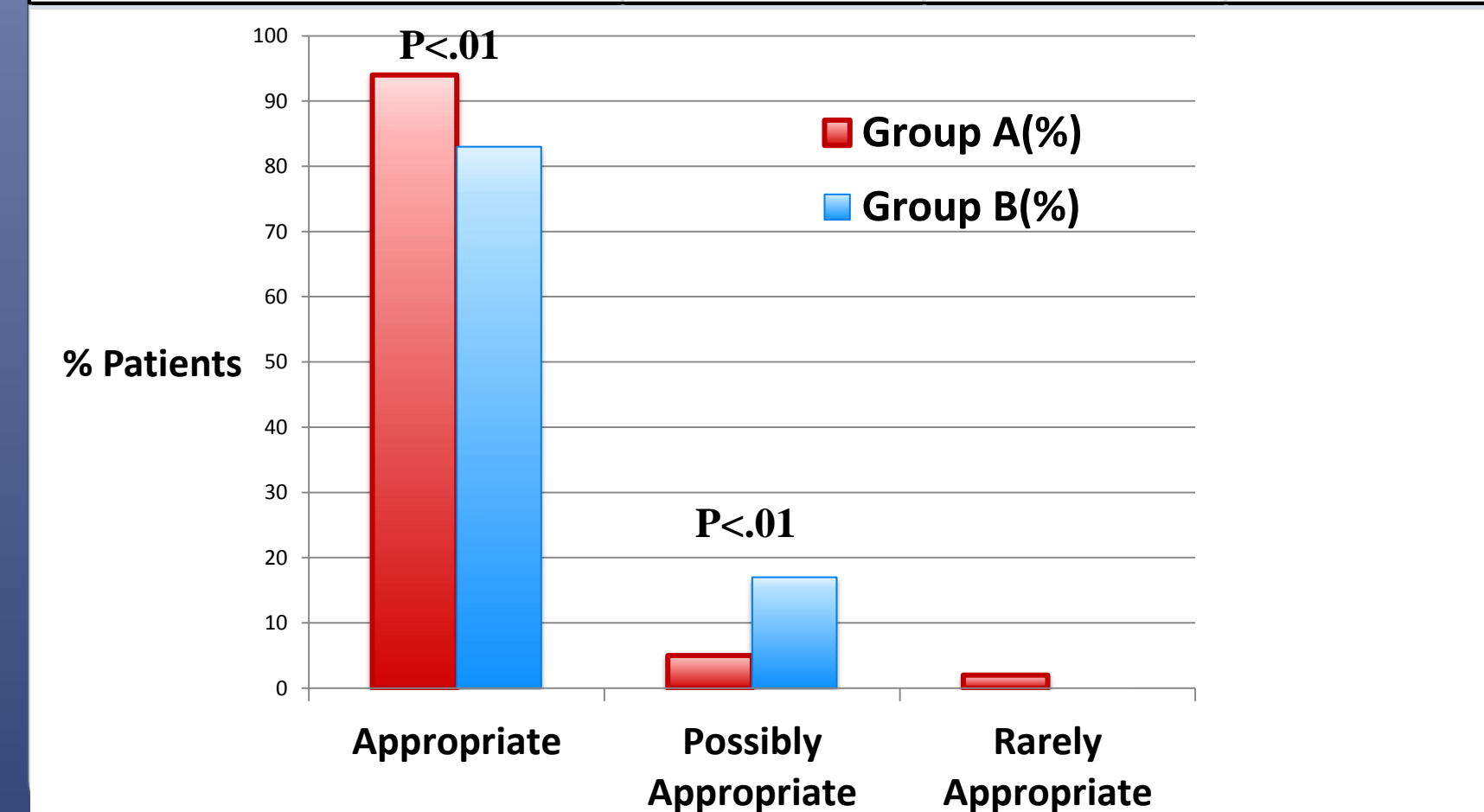
### Seattle Angina Questionnaire

Seattle Angina Questionnaire	Group A	Group B	p
1. SAQ Summary	73+/-19	73+/-21	ns
2. Angina Severity	69+/-20	69+/-21	ns
3. Angina Frequency	82+/-16	82+/-17	ns
4. Quality of Life	59+/-28	60+/-28	ns
5. Physical Limitation	79+/-27	78+/-27	ns



### FOCUS – Appropriate Use Criteria

Appropriate Use Criteria			
	Group A n (%)	Group B n (%)	p
Appropriate	171 (94)	55 (83)	<.01
Possibly Appropriate	9 (5)	11 (17)	<.01
Rarely Appropriate	2 (1)	0 (0)	ns



## CONCLUSIONS

The FCQN results support the following conclusions:

- (1) In diverse clinical sites, utilization of multiple clinical decision support and patient education tools in a tablet format at the point of care has proven clinically feasible.
- (2) In both subgroups of SIHD pts (both with and without known CAD), baseline SAQ scores identify symptomatic angina pts with high angina frequency and a low quality of life.
- (3) As applied in this registry, clinical decision support documented more appropriate utilization of stress testing in pts without known CAD, but with a very low number of pts identified as rarely appropriate.
- (4) ACC CardioSmart teaching was effectively used in majority of all angina pts, with a trend toward more frequent use of patient education in pts without prior history of SIHD.
- (5) In SIHD pts, the FCQN registry demonstrates a clinically applicable and innovative system utilizing angina symptom documentation (SAQ), AUC decision support (FOCUS), and patient education (Cardiosmart) to improve quality of care.

## DISCLOSURES

The authors (Seals, David, St. Clair, Klein, Rama, Campbell, Cox, Khatib) have all reported that they have no relationships relevant to the contents of this poster to disclose. The FCQN is sponsored by grants from Gilead, Sciences and Philips – Volcano.