

What is a SmartPhrase?

A SMARTPHRASE (EPIC DOT PHRASE) IS A FEATURE WITHIN THE ELECTRONIC HEALTH RECORD (EHR) THAT INSERTS DATA OR TEXT INTO A CLINICAL NOTE.

USE OF SMARTPHRASE WITHIN THE WORKFLOW FOR MANAGING ADULTS WITH TYPE 2 DIABETES AND ESTABLISHED CARDIOVASCULAR (CV) DISEASE

WHO MAY BENEFIT FROM USE OF A SMARTPHRASE?

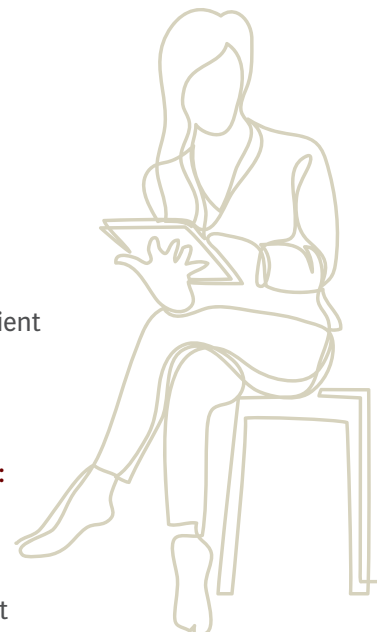
Epic clinicians who routinely use similar language or information for documentation within the EHR.

Utilizing SmartPhrases can help providers document more efficiently by pulling in frequently used text and pulling data from the chart.



HOW TO MAKE A SMARTPHRASE

- 1 Click the Epic logo and select Tools
- 2 Select Management Console and select the SmartPhrase Editor option
 - a. Select the Create tab
- 3 Choose a unique name and description
- 4 Set up the desired text (using other SmartTools if appropriate) in the General tab
 - a. Formatting may be completed in the General tab
 - b. Examples of language used can be found in this document
- 5 Select the Restrictions tab to include restrictions
 - a. For example, MR Patient Instructions type SmartPhrases can be utilized within patient education and IP Charting type SmartPhrases can be utilized within inpatient notes. Further limitations (reason for visit, user, age, etc) may be added as needed
- 6 Release the newly created SmartPhrase record by checking the release box
SmartPhrases can be used within the EHR for multiple uses such as notes and orders. An example of their use is the addition of patient education within the patient's notes:
 - a. Open a patient chart and select Patient Instructions
 - b. Search for your SmartPhrase by typing "." and its unique name to add the patient education resource
 - c. Consider printing the after-visit summary (AVS) for future reference for the patient



EXAMPLES OF USE:

DOCUMENTING CLINICAL RATIONALE

For providers interested in documenting the rationale for prescribing a sodium–glucose cotransporter 2 inhibitor (SGLT2i) for an adult patient with type 2 diabetes and established CV disease, consider using a SmartPhrase in the patient’s assessment plan.

Example of SmartPhrase-populated information:

This patient has type 2 diabetes and established CV disease. The 2020 American Diabetes Association guidelines state, “Addition of specific SGLT2is or glucagon-like peptide 1 receptor agonists (GLP-1 RA) that have demonstrated CVD benefit are recommended for use in patients with established CV disease or indicators of high risk.”

SGLT2i was added to current antihyperglycemic regimen due to demonstrated CV benefit.



Additional information can be found in the American Diabetes Association Standards of Medical Care in Diabetes – 2020: https://care.diabetesjournals.org/content/43/Supplement_1/S98

CONSULTING OTHER CLINICIANS

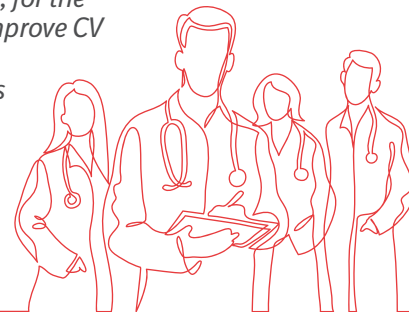
For providers interested in recommending the prescribing of an SGLT2i for an adult patient with type 2 diabetes and established CV disease to another provider, consider using a SmartPhrase in the referral.

Example of SmartPhrase-populated information:

This patient has type 2 diabetes and established CV disease. The American College of Cardiology (ACC) Expert Consensus Decision Pathway states, “Recent development of SGLT2is and GLP-1RAs has, for the first time, demonstrated that specific treatments developed for glucose lowering can directly improve CV outcomes. In large, well-conducted, randomized clinical trials, specific medications in these 2 classes have been proven to reduce rates of acute MI, stroke, and CV death in patients with T2D (most with established ASCVD).”

“The CV benefits of many SGLT2is and GLP-1RAs appear robust, creating new options to improve the CV outcomes of patients with T2D and CV disease.”

Please evaluate the patient for appropriateness for adding an SGLT2is or GLP-1RA to the current antihyperglycemic regimen to reduce CV risk.



Additional information can be found in the 2020 Expert Consensus Decision Pathway on Novel Therapies for Cardiovascular Risk Reduction in Patients With Type 2 Diabetes: <https://www.onlinejacc.org/content/early/2020/07/27/j.jacc.2020.05.037>

References: 1. American Diabetes Association. Standards of Medical Care in Diabetes–2020. *Diabetes Care*. 2020;43(Suppl 1):S1–S212. 2. Das SR, Everett BM, Birtcher KK, et al. 2020 ACC Expert Consensus Decision Pathway on Novel Therapies for Cardiovascular Risk Reduction in Patients With Type 2 Diabetes. *J Am Coll Cardiol*. <https://www.onlinejacc.org/content/early/2020/07/27/j.jacc.2020.05.037>. Accessed August 12, 2020.