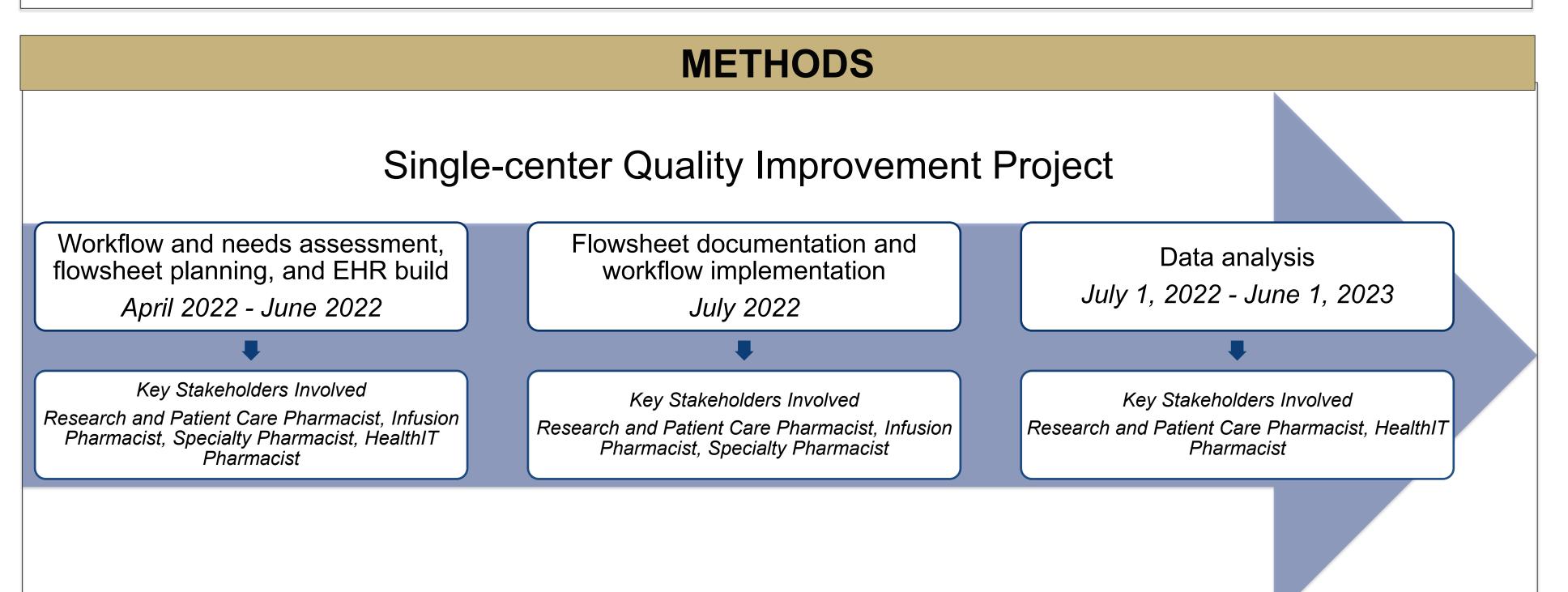


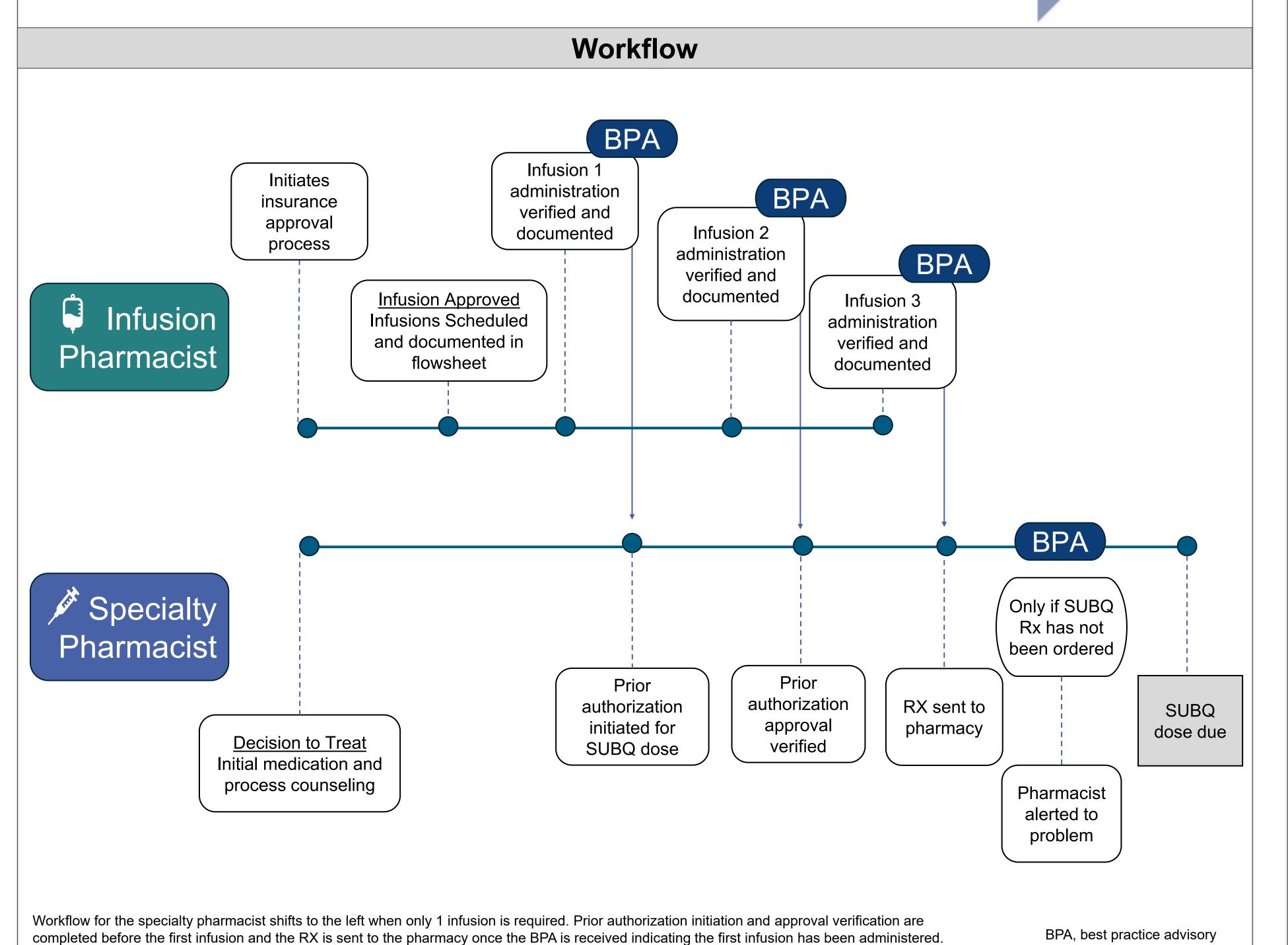
CONCLUSION

Using an EHR flowsheet to manage patients with IBD treated with biologic medications requiring an induction IV dose(s) before starting SubQ maintenance injections provided a streamlined approach to patient management and care coordination between infusion and specialty pharmacy staff.

PURPOSE

To implement a transparent, streamlined process of managing patients with IBD receiving specialty medications that have complex dosing regimens with IV to SubQ routes of administration.





Patient Characteristics (n=230)		
	n (%)	
Age, years (median (IQR))	43 (30, 53)	
Gender		
Female	135 (59)	
Male	95 (41)	
Race		
White	202 (88)	
Black	16 (7)	
Unknown	8 (3)	
Other	4 (2)	
Insurance		
Commercial	185 (80)	
Medicare	25 (11)	
Medicaid	14 (6)	
Other	6 (3)	
Medication		
risankizumab-rzaa	129 (56)	
ustekinumab	101 (44)	

Infusion Phar		
BPA trigger	BPA timing**	Purpose
Date 1 st infusion received is documented in the flowsheet	2 weeks after event	Prompts follow-up with patient about infusion tolerability

Best Practice Alerts (BPA)

flowsheet	event	tolerability			
Specialty Pharmacist					
*Date 1 st or 2 nd infusion received is documented in the flowsheet	`	Prompts initiation of SubQ PA process			
*Date 3 rd infusion received is documented in the flowsheet	Immediately (4 weeks until first SubQ dose is due)	Prompts SubQ RX request			
* Date 1 st or 2 nd infusion received is documented in the flowsheet	6 weeks after event only if a SubQ RX has not been ordered (2 weeks until first SubQ dose is due)	Prompts investigation into SubQ PA approval status and SubQ RX request			
*BPA occur based on medication		1	l		

**BPAs are sent through Inbasket messaging in the EHR

RESULTS

Flowsheet						
Infu	sion to Injection					
General	Medication	8/21/23	Medication name			
	Provider	8/15/23	VUMC Provider			
	Referral date	8/15/23	8/15/23			
	Medication counseling date	8/15/23	8/15/23			
Infusion	Infusion status update	9/21/23	Administered			
	Infusion counseling date	8/21/23	8/15/23			
	Infusion approval date	9/1/23	9/1/23			
	Number of infusions	8/15/23	3			
	Infusion center 1	9/1/23	VUMC			
	Infusion 1 scheduled date	9/1/23	9/21/23			
	Infusion 1 administered date	9/21/23	9/21/23			
	Infusion center 2	9/1/23	VUMC			
	Infusion 2 scheduled date	9/1/23	10/21/23			
	Infusion 2 administered date	10/21/23	10/21/26			
	Infusion center 3	9/1/23	VUMC			
	Infusion 3 scheduled date	9/1/23	11/22/23			
	Infusion 3 administered date	11/22/23	11/22/23			
	Non-VUMC infusion reason	9/1/23	N/A			
SUBQ	Specialty pharmacy	9/21/23	VSP			
	Injection PA approval date	11/1/23	11/1/23			
	Injection PA expiration date	11/1/23	11/1/24			
	Injection RX sent date	12/15/23	12/15/23			
	Due date of first injection	9/21/23	12/22/23			
	Injection RX copay cared obtained	11/15/23	Yes			
	Pharmacist Satisfaction (n=5)	$\stackrel{\bigcirc}{\sim}$ = 1 respo	ondent			

Flowsheet

Pharmacist Satisfaction (n=5) = 1 respondent

Overall satisfaction



Ease of use satisfaction



Pharmacist Quotes



"The flowsheet reduces gaps in care and streamlines the workflow."

"It has helped prevent any patient from slipping through the cracks and ensures they obtain their medication on time."

EHR, electronic health record; IBD, inflammatory bowel disease; IQR, interquartile range; IV, intravenous; PA, prior authorization; Rx, prescription; SubQ, subcutaneous; VSP, Vanderbilt Specialty Pharmacy; VUMC, Vanderbilt University Medical Center