

Implementation of Patient Reported Outcomes in a Burn Outpatient Clinic

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PROGRESS TO DATE

- Since implementing in October 2016, PRO have proven to be an effective way to assess & treat the individual needs of burn patients
- Results guide interdisciplinary care and promote early intervention

LIMITATIONS & BARRIERS

- Refusal reports are diluted with ineligible patients (<16 years old)
- Automated EMR integration is limited with burn-specific 5D Itch & PTSD-CL results
- Ongoing collaboration with mEVAL data team to resolve identified issues

VALUABLE LESSONS LEARNED

- Ongoing education with patients & staff improves completion results

PROJECT INTRODUCTION

Patient Reported Outcomes (PRO) quantify symptoms, function and quality of life from a patient's perspective. Burn patients have unique needs related to **pain, itching, physical function, social activity, depression and post-traumatic stress disorder**. Our clinic set out to implement an outpatient PRO assessment that would provide burn-related information for real-time intervention without disrupting clinic workflow.

METHODS

DEFINING THE APPLICABLE PRO QUESTIONS FOR BURN PATIENTS

- **General PRO:** Patient Reported Measurement Information System (PROMIS) instruments for pain, social activity, depression, and physical function
- **Burn-specific PRO:** 5D Itch & Post-Traumatic Stress Disorder (PTSD-CL) tools

Patient Feedback

- Early pilot feedback reported survey felt too long with repetitive questions; removed PROMIS instruments for sleep and anxiety, as these are included in the PTSD-CL tool

PRO TOOLS & RESOURCES

PROMIS Measurement System

- www.healthmeasures.net

PTSD-CL Tool

- www.mirecc.va.gov/docs/visn6/3_ptsd_checklist_and_scoring.pdf

5D Itch Scale

- www.ncbi.nlm.nih.gov/pubmed/19995367

mEVAL – PRO System linked to EMR

- <https://healthcare.utah.edu/meval/>

IMPLEMENTING THE NEW PRO PROCESS

- **Education & training** provided to staff and patients on new process for patient reported outcomes
- **Redesigned workflow** to incorporate PRO assessment (figure 1)
- **Tip sheet** to guide staff on assessments & action (figure 2)
- **Personalized results** used to guide interdisciplinary care (figure 3)
- Availability of most **results in the Electronic Medical Record (EMR)**

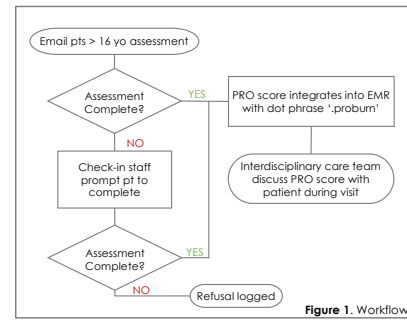
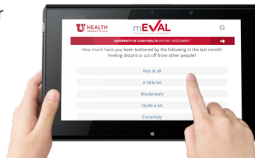


Figure 1. Workflow

Symptom Domain	Screen Used	Score Interpretation	Action	Interval
Pain	PROMIS Pain (v1.1)	See PROMIS Interpretation	Score > 65 APC addresses	Every Visit
Itching	5D Itch Scale	Score out of 35 (Likert scale 1-5)	APC to monitor trend & intervene	Every visit
Social Activity	PROMIS Satisfaction with Social Roles (v2.0)	See PROMIS interpretation*	Score ≤ 40 APC addresses	2 months
Depression	PROMIS Depression (v1.0)	See PROMIS interpretation*	Score ≥ 65 referral to social work	3 months
Physical Function	PROMIS Physical Function (v2.0)	See PROMIS interpretation*	Score ≤ 40 referral to physical therapy	3 months
PTSD	PTSD-CL	Scored out of 85 (Likert scale 1-5)	Score ≥ 30 referral to social work	4 months

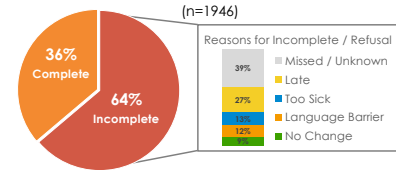
*www.healthmeasures.net/score-and-interpret/interpret-scores/promis

Figure 2. Interdisciplinary Tip Sheet

RESULTS

10/10/2016 – 2/28/2018

PRO ELIGIBLE* ASSESSMENT COMPLETIONS



*Patients ≤ 16 yo are not eligible and excluded from this report

AVERAGE RESULTS PER INSTRUMENT

Instrument Used	Mean Score
PROMIS Pain	63.20 (S.D. ± 07.04)
5D Itch	15.52 (S.D. ± 05.52)
PROMIS Satisfaction with Social Roles	46.42 (S.D. ± 10.10)
PROMIS Depression	52.04 (S.D. ± 09.72)
PROMIS Physical Function	41.57 (S.D. ± 09.94)
PTSD-CL	28.79 (S.D. ± 12.92)

UTILIZING THE RESULTS WITH PATIENTS

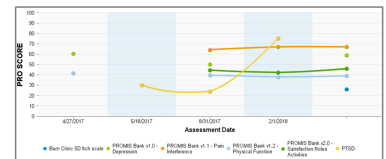


Figure 3. Trending Patient Scores

Action taken

Instrument	Social Work Referrals*
Depression ≥ 65	34
PTSD ≥ 30	172

*Unique patients treated

