

# Clinical e-audit: Optimising management of type 2 diabetes

Improving clinical practice for better patient health

## How are you managing your patients with type 2 diabetes?

This clinical audit will assist you to review, the management of your patients with type 2 diabetes, including use of antidiabetic agents, frequency of monitoring and the management of coexisting dyslipidaemia and hypertension to minimise cardiovascular risk.

Identify 20 patients who:

- have been diagnosed with type 2 diabetes
- are currently being treated with an oral antidiabetic agent(s) or insulin
- are older than 16 years of age.

This clinical audit has been approved by the RACGP QA&CPD Program, total points: 40 (category 1), in the 2008–2010 triennium and the ACRRM PD Program, 30 points (extended skills). Points are awarded only to participants who complete the review phase.

This audit is recognised for the Quality Prescribing Initiative of the Practice Incentives Program (up to 30 April 2011).

## Best practice in type 2 diabetes management

1. Use best practice guidelines

### Review frequency of monitoring

Plan regular follow-up visits. Guidelines recommend both a quarterly and annual review.

- 'Have I assessed blood pressure within the last 3 months?'
- 'Do I review HbA<sub>1c</sub> at least six monthly?'
- 'Have I assessed renal function and lipid levels within the last 12 months?'

### Achieve target HbA<sub>1c</sub>

Identify and achieve patient's individual target HbA<sub>1c</sub>. The recommended target for overall glycemic control is HbA<sub>1c</sub> ≤ 7%.

- 'Are my patients achieving the target HbA<sub>1c</sub> ≤ 7%?'
- 'How long has the HbA<sub>1c</sub> been greater than 7%?'

### Review and alter drug therapy to achieve optimal control of blood glucose

Maintain tight blood glucose control to reduce the risk of microvascular and macrovascular complications.

- 'Is metformin my drug of first choice in type 2 diabetes?'
- 'Have I assessed patient adherence to antidiabetic medications?'
- 'Have I considered initiation of insulin in patients using multiple oral antidiabetic agents and with a HbA<sub>1c</sub> > 7%?'
- 'Could my patients benefit from a HMR?'

### Assess coexisting dyslipidaemia and hypertension to minimise cardiovascular risk.

Treat all cardiovascular risk factors aggressively and concomitantly to reduce the risk of macrovascular disease.

- 'Which patients with diabetes have a total cholesterol ≥ 4 mmol/L and are not using a statin?'
- 'Do I use ACE inhibitors or angiotensin II-receptor antagonists in all patients with diabetes and renal disease?'
- 'Have I considered the use of aspirin in patients with type 2 diabetes who are aged > 50 years and/or have established ischaemic heart disease or cerebrovascular disease and/or microalbuminuria?'

2. Review current practice

3. Implement change

5. Monitor progress

4. Review and reflect





Enrol now

# Optimising management of type 2 diabetes

## Why participate in Clinical e-Audit?

- Improves clinical management of patients with type 2 diabetes by reviewing drug therapy and achievement of targets.
- Promotes time effective work practices; systematically identifies patients for review.
- Enables improvement in practice in a continuing process of quality improvement with peer review.

## Features of Clinical e-Audit

- NEW intuitive design and feedback functions.
- Real time patient-specific feedback, using best practice clinical indicators.
- Snapshot of action planned for each patient.
- Stand-alone and independent of prescribing software; data submitted securely online.

Technical requirements: Windows 2000 or above. Submission requires an Internet connection.

## Enrol **NOW** for your FREE Clinical e-Audit for GPs

✓ Visit [www.nps.org.au/healthpro](http://www.nps.org.au/healthpro) to ENROL and for more information on the Clinical e-Audit

OR

✓ Fill in your details below and return to NPS before **Friday 21 January 2011** to enable completion of the audit in the current QPI cycle

**Fax this form to: 02 9283 2028 OR Post to: PO Box 1147, Strawberry Hills NSW 2012**

Email: [info@nps.org.au](mailto:info@nps.org.au) OR Telephone: 02 8217 8700 for more information

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Please use BLOCK LETTERS

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State or Territory      Postcode

Phone no.      (      )      ▶ Prescriber no.

Fax no.      (      )      ▶ Provider no. (required for participation)

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(Please print clearly, for notification of future Clinical e-Audits, reminders and further correspondence about the Clinical e-Audit.)

NPS consults widely with general practitioners in the development of quality assurance activities.

Yes, I am interested in participating in the development of NPS quality assurance activities.

NPS adheres to the National Privacy Principles contained in the Privacy Act 1988 (Cwth). All personal information collected by NPS will be used only for mailing of NPS materials relating to this audit and/or evaluation purposes.

See over for more details

NPS is an independent, non-profit organisation for Quality Use of Medicines, funded by the Australian Government Department of Health and Ageing.

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