

Performance Improvement Strategies: Osteoporosis Patient Data Form

Instructions: Complete a separate performance improvement (PI) patient data form for each of the 10 patients you have selected. These forms can be completed by the participating healthcare professional or by an office staff member. If the information is not found in the chart, please select the "No" box. Fax your completed forms (toll-free) to **866 419 5789**. You may also complete the forms online at www.pi-iq.com/osteoporosis.

Clinician Name: _____

Date of Data Collection: _____

Form completed by: Clinician Designee

Inclusion Criteria:

- This patient has been in the practice for at least one year AND
- He or she has been seen in the practice within the past 12 months AND
- He or she has at least one of the following risk factors for future osteoporosis-related fractures (Select all that apply):
 - Woman aged ≥ 65 years
 - Man aged ≥ 70 years
 - Prior low-impact fracture or any fracture after age 50
 - Chronic oral or parenteral corticosteroid therapy (≥ 5 mg/day prednisone for ≥ 30 days)
 - Perimenopausal woman with specific high-risk factor (eg, low body weight, prior low-trauma fracture, high-risk medication)
 - Taking other medications associated with secondary osteoporosis (eg, antiseizure medications, aromatase inhibitors [for breast cancer], androgen deprivation therapy / GnRH agonists [for prostate cancer], barbiturates, depomedroxyprogesterone, lithium, thiazolidinediones)
 - Transplant recipient
 - Presence of other conditions associated with an increased risk of osteoporosis (eg, smoking, rheumatoid arthritis, hyperthyroidism, hypogonadism, malabsorption, alcoholism, vitamin D deficiency, diabetes)
 - Other risk factor(s) for osteoporosis; please specify: _____

Performance Improvement Strategies: Osteoporosis Patient Data Form

Clinician Name: _____

Benchmark Area 1: Fracture Risk Assessment

1. Does this patient have a diagnosis of osteoporosis noted in the chart? Yes No
2. Is there a bone mineral density (BMD) measurement recorded in the chart? Yes No
 - 2a. If yes, was the BMD measurement determined by central dual x-ray absorptiometry (DXA)?
 Yes, BMD measured by central DXA No, BMD measured by a test other than central DXA
 - 2b. When was the last time the DXA was performed? Date: _____ N/A, DXA not performed
Is this date? ≤ 12 months ago 13 to 24 months ago > 24 months ago
 - 2c. What was the result of the most recent BMD testing by DXA? (Report the lowest T-score.)
 Normal: T-score ≥ -1.0 Low bone mass: T-score between -1.0 and -2.5
 Osteoporosis: T-score ≤ -2.5 Not documented
3. Was future osteoporosis-related fracture risk assessed with the FRAX® tool and noted in the patient chart?
 Yes No N/A, patient is already on pharmacologic treatment I am unfamiliar with the FRAX® assessment tool

Benchmark Area 2: Nonpharmacologic Interventions

4. Is the patient's current estimated dietary calcium intake documented?
Dietary calcium: Yes No I don't know how to estimate dietary calcium
5. Is the patient currently getting adequate calcium and/or vitamin D through diet and/or supplements?
Calcium (at least 1,200 mg/day): Yes No Not documented
Vitamin D (800 to 1,000 IU/day) Yes No Not documented
6. Is there documentation of patient counseling about appropriate calcium and/or vitamin D intake?
Calcium intake: Yes No
Vitamin D intake: Yes No
7. Is the patient's vitamin D level documented in the medical record? Yes No
8. If the patient smokes, was a cessation plan discussed in the past 12 months?
 Yes No N/A, patient does not smoke Smoking status not recorded in chart
9. Is there documentation of counseling to start, increase, or maintain participation in a weight-bearing exercise program within the last 6 months? Yes No
10. Is there documentation of the patient's current level of alcohol use? Yes No
11. Is there documentation of a falls-risk screen in the past 12 months? Yes No

Benchmark Area 3: Pharmacologic Interventions

12. Does the chart indicate that the patient has been evaluated for secondary causes of osteoporosis or low bone mass?
 Yes No N/A, patient does not have osteoporosis or low bone mass
 I do not know how to evaluate for secondary causes of osteoporosis or low bone mass
13. Are any of the following characteristics documented for this patient? (Select all that apply)
 Prior hip or vertebral fracture
 Other prior fracture in the presence of low bone mass (T-score between -1.0 and -2.5)
 T-score < -2.5
 Low bone mass and secondary causes associated with a high risk of fracture (eg, corticosteroid use, total immobilization)
 Low bone mass and a FRAX® 10-year probability of hip fracture ≥ 3%
 Low bone mass and a FRAX® 10-year probability of any major osteoporosis-related fracture ≥ 20%
 None of the above
14. Does the chart indicate that the patient has been prescribed antiresorptive therapy and/or anabolic therapy? Yes No
 - 14a. If yes, which of the following is the patient currently taking? (Check all that apply)
 A bisphosphonate (ie, alendronate [Fosamax®], ibandronate [Boniva®], risedronate [Actonel®], zoledronic acid [Reclast®])
 Calcitonin (ie, Miacalcin®, Fortical®)
 Estrogen
 Parathyroid hormone (ie, teriparatide [Forteo®])
 Estrogen agonist/antagonist (ie, raloxifene [Evista®])
 Other: _____
15. Does the chart indicate that the patient's adherence to his or her osteoporosis-related medications was assessed within the last 6 months? Yes No N/A, patient not on medication