**PGY2 BUMC -P Ambulatory Rotation**

Resident Name: Month/year:

Patient Panel Population Management

Instructions: Review your patient panel and that of your practice partner and ACO reports with the population manager (Perla Gonzalez or Roxann Gonzales).

Consider:

How many patients are in your panel? Your practice partner’s?

Do you notice any trends in your patient panel/ACO? Age, sex, health problems? Do you recognize them all?

You may need to look at a few of your patient’s charts.

Establish 2 SMART (specific, measurable, achievable, realistic, time-bound) goals to improve your patient panel management for this month, 6 months, by end of year.

How can your practice team help or what other assistance will you need to accomplish these goals? Indicate here:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|   | ACO/Clinical Objective  | Strategy or plan  | Current |  1 month goal | End of year goal |
| 1 |   |   |   |   |   |
| 2 |   |   |   |   |   |

Home Visit:

Instructions:

1. Identify a patient in your or your practice partner’s panel that you would like to do a home visit on. Typical reasons for home visit: recent falls for patient safety evaluation; complicated medication list with concerns with compliance or other elderly person with issues coming to office. Confirm with the patient the date and time and send information to Dr. Peterson and Tracie Crater (social worker)

Would it be helpful to have clinical pharmacist join us on the visit? If yes – invite them as well.

Patient’s name and why you chose them:

1. Have Front desk schedule appointment in your schedule
2. Input the patient’s address into Google Maps & Identify:
* Closest Grocery Store
* Green spaces/parks/senior centers if applicable/local schools
* Public transportation stops
* Distance to our practice
* Check raidonline.com for your patient’s address

Describe what you have found:

1. After visit:
* Where you able to bill for the visit using home visit code, office code, advance directive code?
* What did you learn about your patient that you did not know prior to doing the home visit? Please describe:

Review plan with Dr. Peterson and with your continuity clinic attending and email this form electronically with your initial results to Dr. Peterson by last day of the rotation.