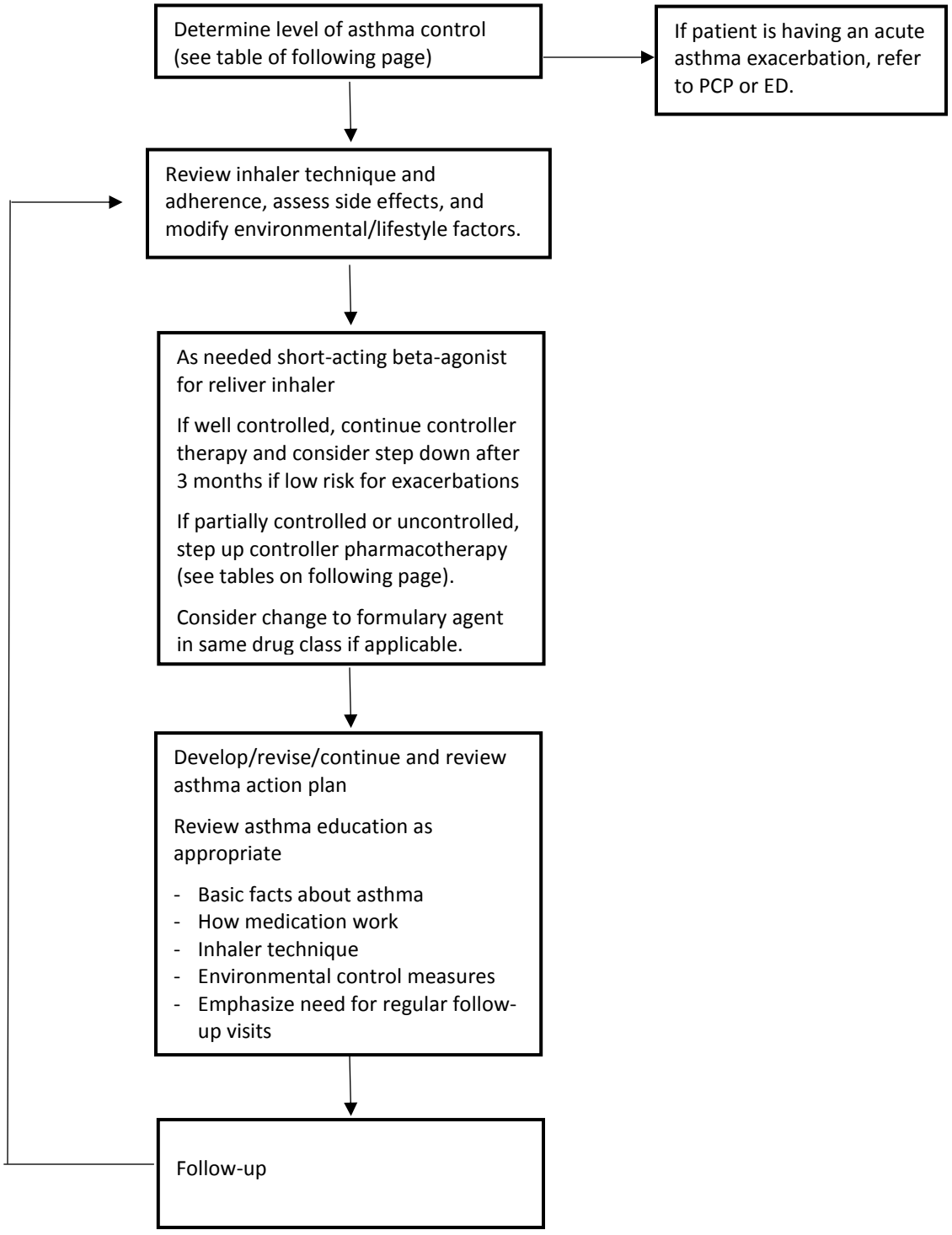
Appendix A: Protocol for Asthma Management

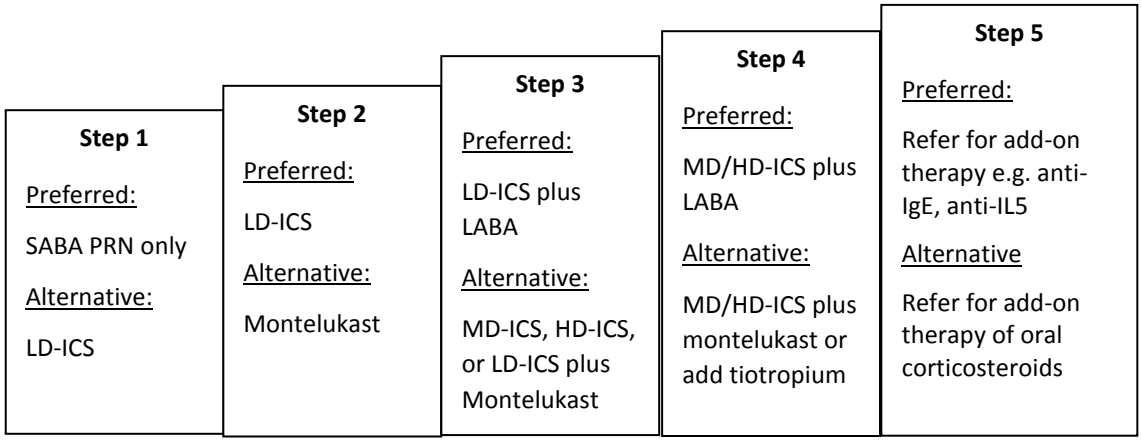


Appendix A: Protocol for Asthma Management

Assessment of Asthma Symptom Control for Ages 6 years Through Adult

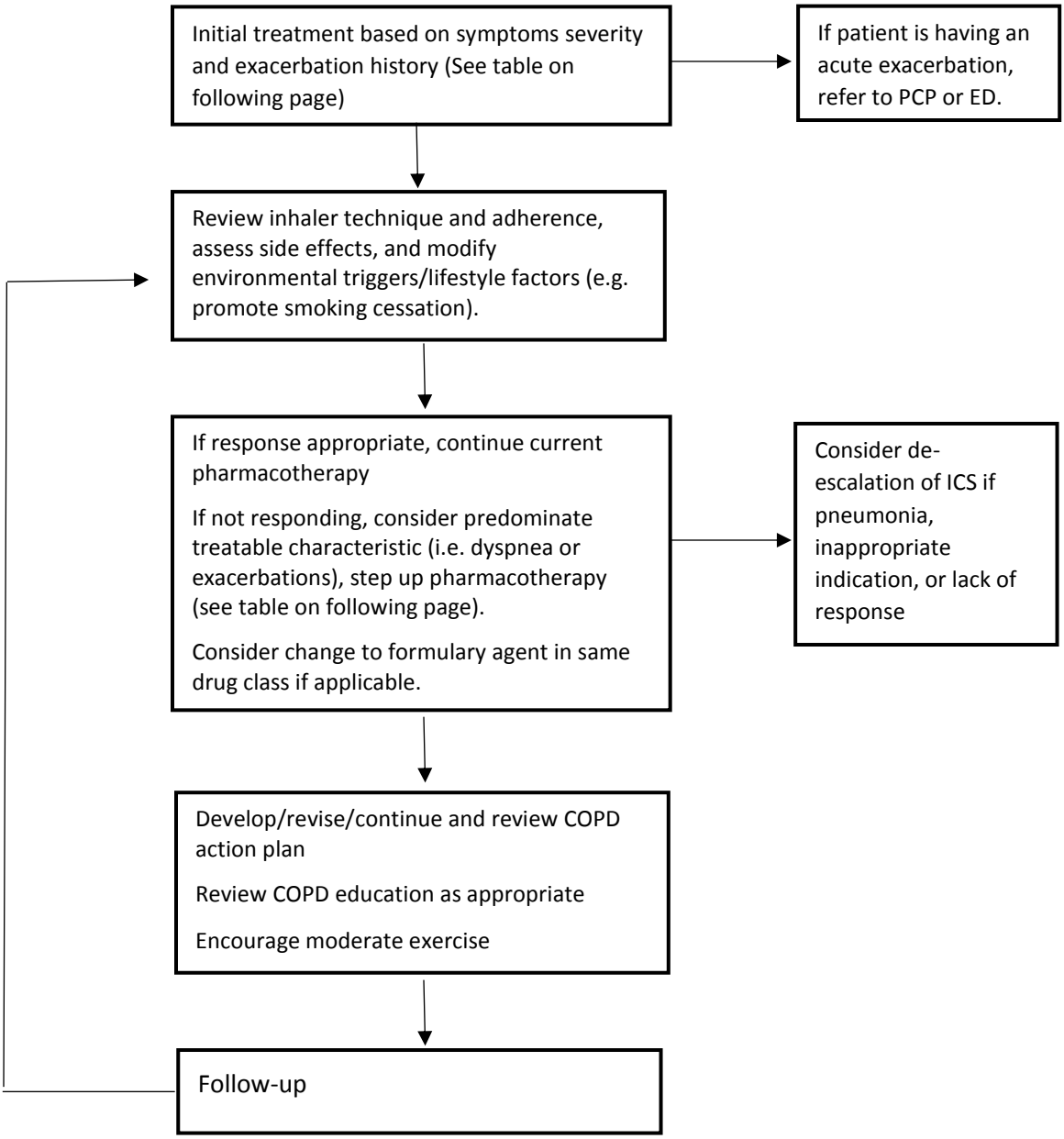
In the past 4 weeks, has the patient had:	Well controlled	Partially controlled	Uncontrolled
• Daytime asthma symptoms more than twice/week?	None of these	1-2 of these	3-4 of these
• Any night waking due to asthma?			
• Reliver needed for symptoms more than twice/week?			
• Any activity limitation due to asthma			

Stepwise Approach to Controller Medications for Managing Asthma for Ages 6 years Through Adult



Abbreviations: HD-ICS=high-dose inhaled corticosteroids; LABA=long-acting beta-agonist; LD-ICS=low-dose inhaled corticosteroids; MD-ICS=medium-dose inhaled corticosteroids; SABA=short-acting beta agonist

Appendix B: Protocol for COPD Management



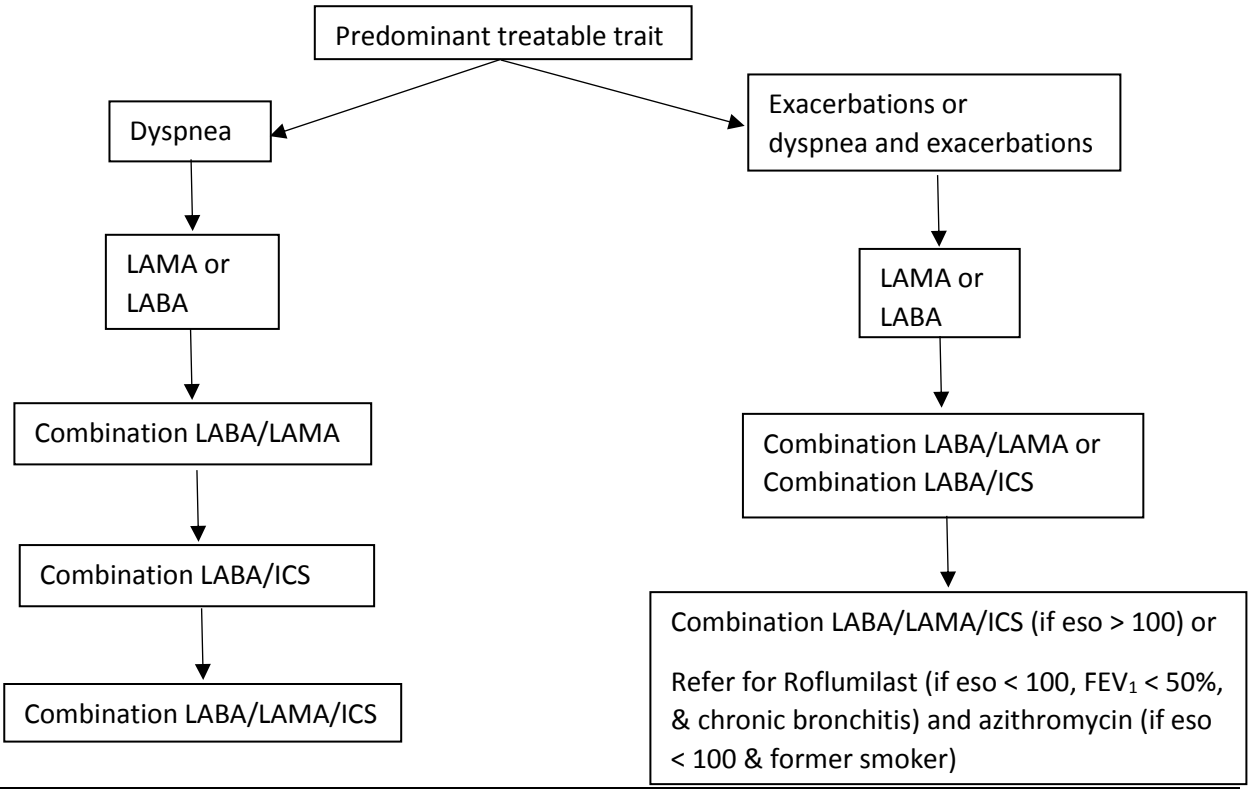
Appendix B: Protocol for COPD Management

Initial Treatment Recommendation Based on Symptoms and Exacerbations

		Symptom Severity	
		CAT <10 or mMRC 0-1	CAT ≥ 10 or mMRC ≥ 2
Exacerbations in past year	≥ 2 exacerbations or ≥1 exacerbation leading to hospitalization	Group C: LAMA	Group D: LAMA or Combination LABA/LAMA (consider if CAT > 20) or Combination ICS/LABA (consider if eos >300)
	0 to 1 exacerbation not requiring hospitalization	Group A: SABA or LABA	Group B: LAMA or LABA or Combination LABA/LAMA (consider if severe breathlessness)

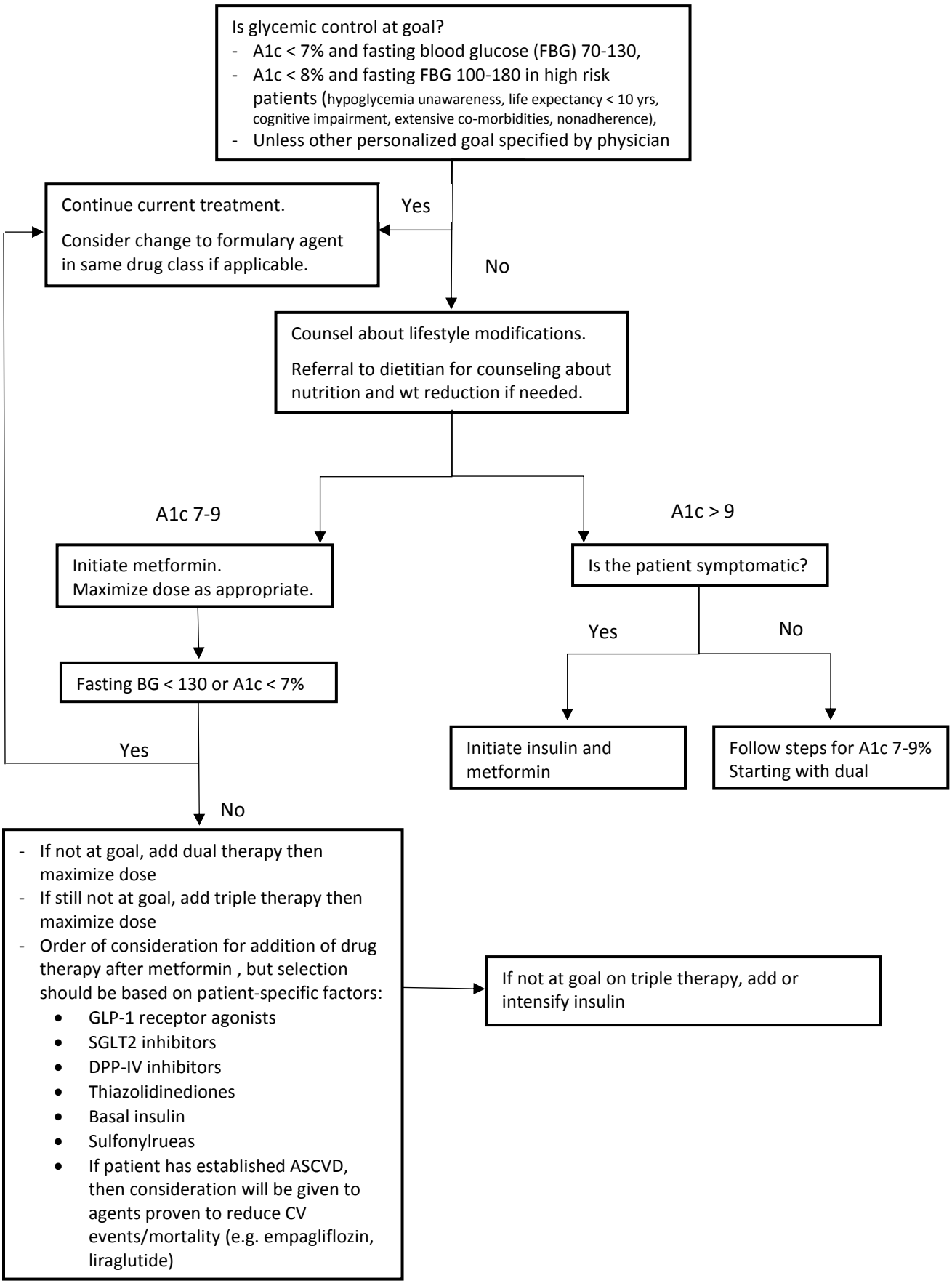
COPD Maintenance and Step-up Therapy

(*Recommendations not dependent on ABCD Classifation for Initial Treatment)*

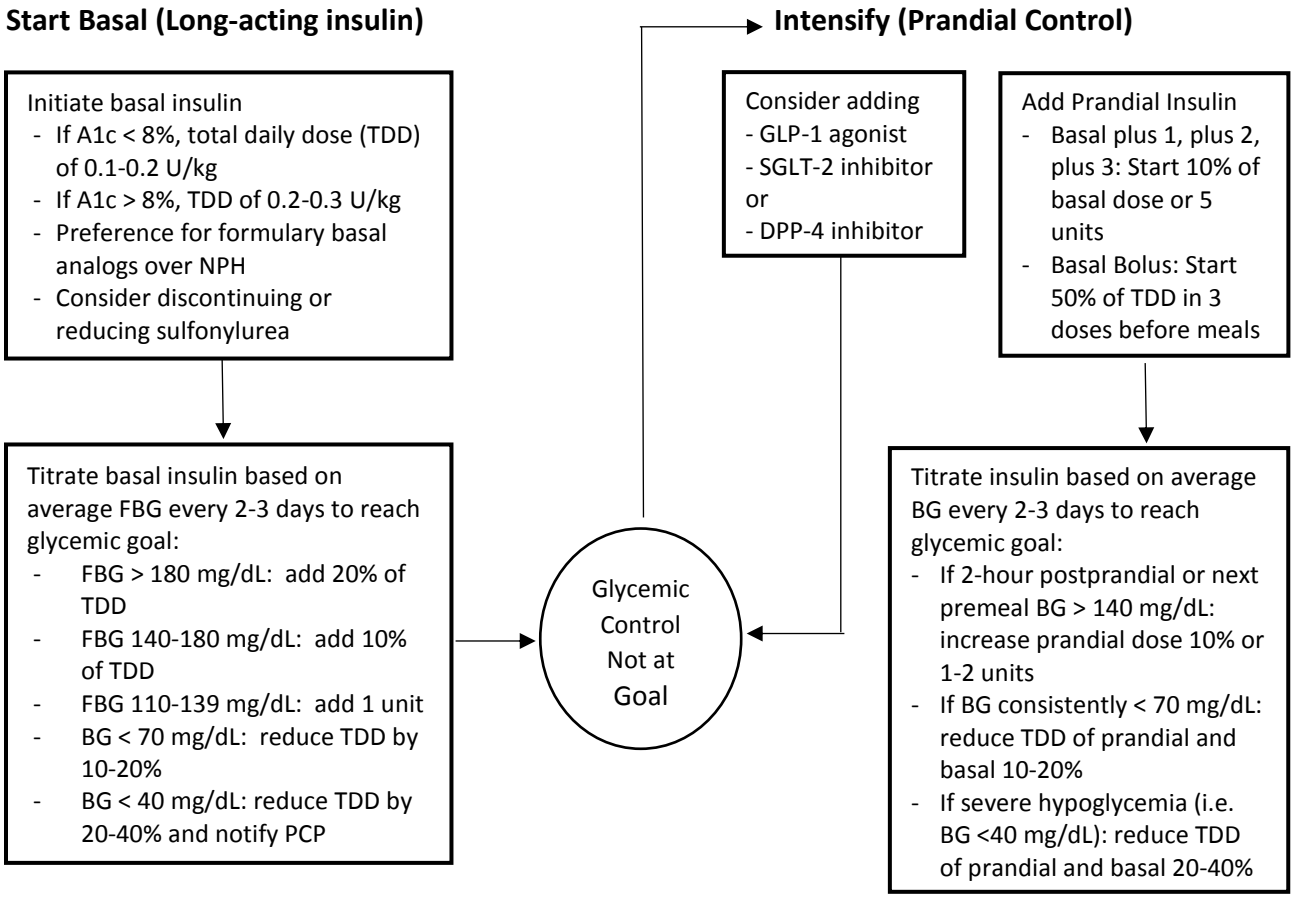


Abbreviations: CAT=COPD Assessment Test, eos=eosinophil count, LABA=long acting beta$_2$- agonist, LAMA=long acting muscarinic antagonist, mMRC=Modified Medical Research Council Respiratory Questionnaire, SABA=short acting beta$_2$- agonist, SAMA=short acting muscarinic antagonist

Appendix C: Protocol for Type 2 Diabetes Management

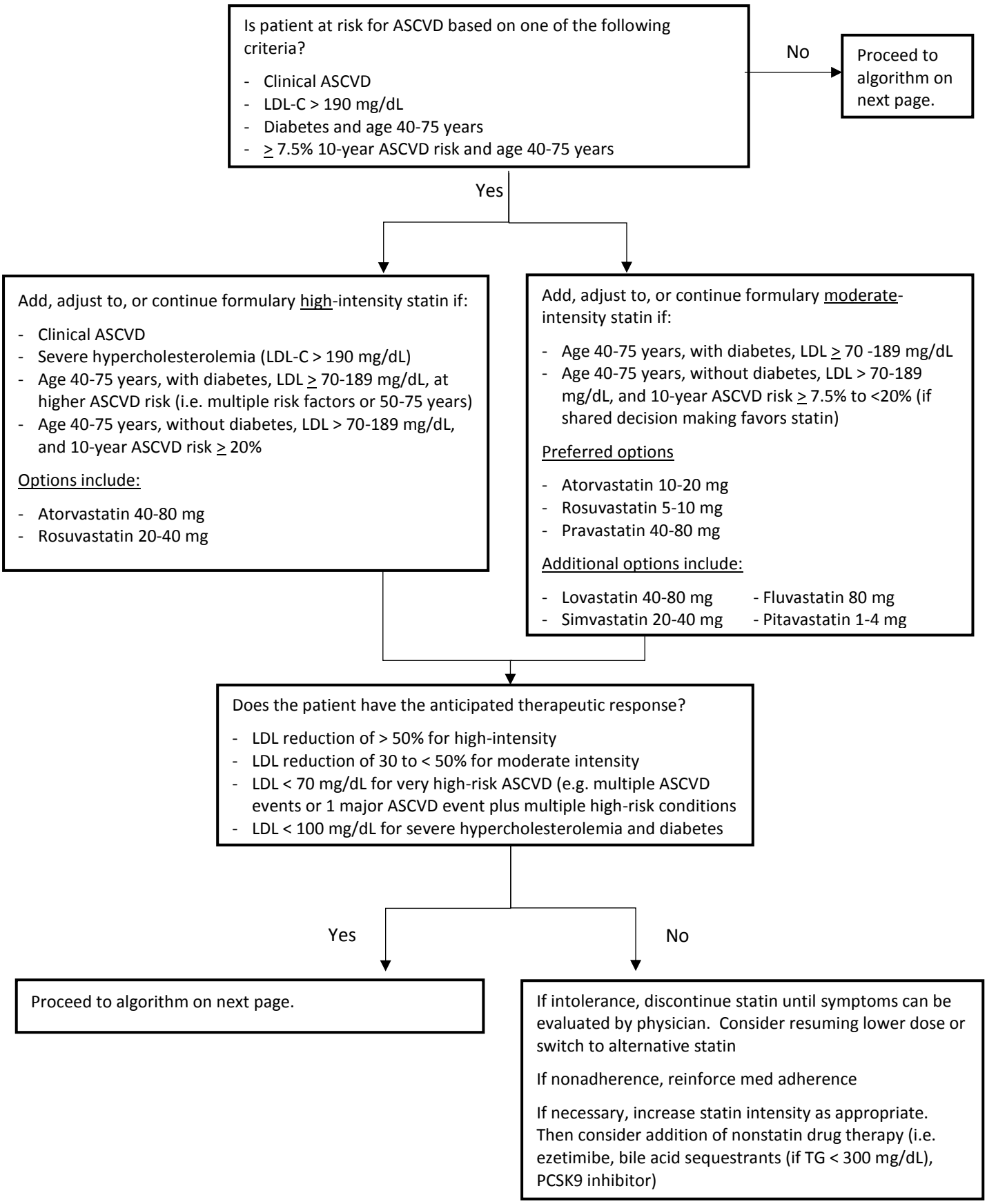


Appendix C: Protocol for Diabetes Management – Insulin Therapy

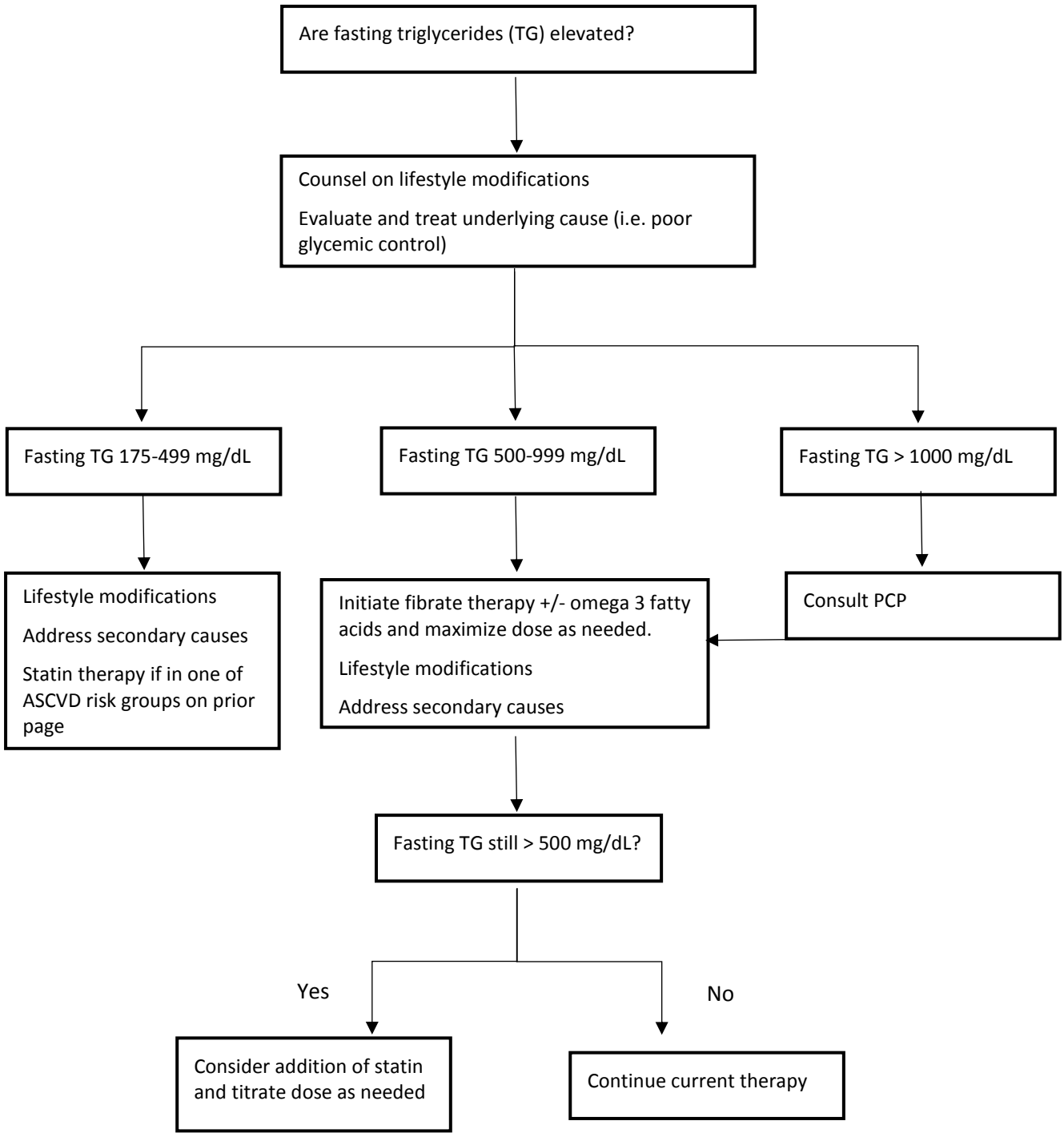


- Each diabetes patient visit will include assessment of weight, diet, exercise, medication adverse effects, medication contraindications, drug interactions, and recent labs as related to diabetes pharmacotherapy
- Additional preventative medicine standards for diabetes to be reviewed include: Aspirin 81 mg daily for most men > 40 yo and women > 50 yo, tobacco cessation, pneumococcal and influenza vaccine, annual comprehensive foot exam, annual retina exam by eye specialist, screening for microalbuminuria, and statin therapy (see hyperlipidemia protocol)
- A1c, microalbumin, and basic metabolic panel can be ordered as needed for assessment of pharmacotherapy
- Self-monitoring BG (SMBG) testing meter and supplies can be ordered to aid in monitoring for diabetes pharmacotherapy.
- Each patient visit will include counseling on diabetes, lifestyle changes, diabetes medications, SMBG, & med adherence.

Appendix D: Protocol for Hyperlipidemia Management

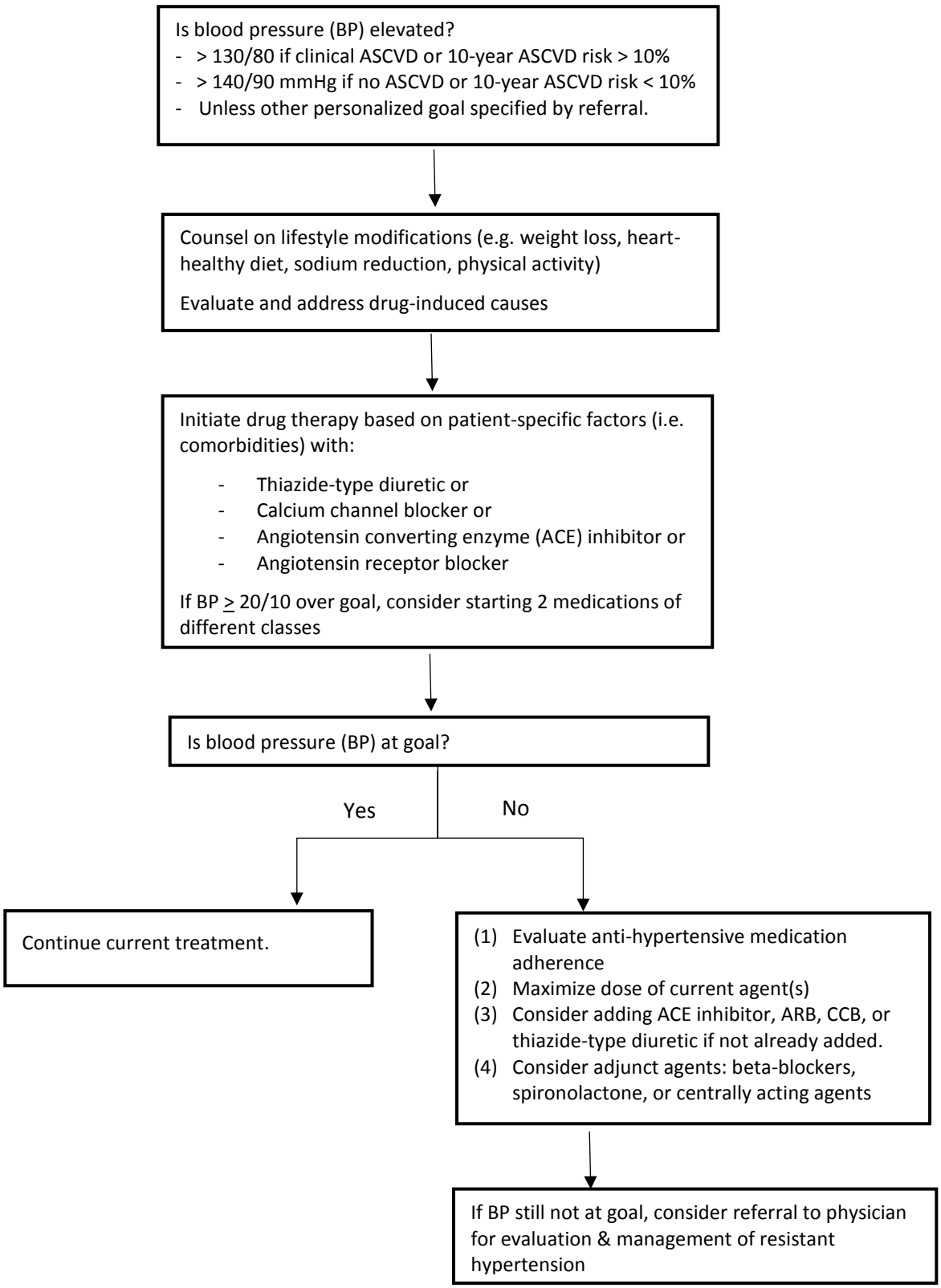


Appendix D: Protocol for Hyperlipidemia Management



- Each patient visit for hyperlipidemia will include assessment of weight, diet, exercise, medication adverse effects, drug interactions, medication contraindications, medication adherence, and recent labs as related to hyperlipidemia pharmacotherapy.
- Lifestyle modifications to be emphasized at each visit include adhering to heart healthy diet, regular exercise habits, avoidance of tobacco products, and maintenance of healthy weight.
- Fasting lipid profile (FLP), hemoglobin A1c, and comprehensive metabolic panel can be ordered as needed for assessment of pharmacotherapy.
- Each patient visit will include counseling on hyperlipidemia, lifestyle changes, lipid-lowering medications, & med adherence.

Appendix E: Protocol for Patients with Hypertension



- Each patient visit for hypertension will include BP taken by cuff and stethoscope and assessment of weight, diet, exercise, medication adverse effects, contraindications, drug interactions, and recent labs as related to hypertension pharmacotherapy
- Basic metabolic panel can be ordered as needed for assessment of pharmacotherapy.
- Each patient visit will include counseling on hypertension, lifestyle changes, antihypertensive medication, & medication adherence.

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The INTEGRIS CMM Scope of Practice and Protocols were presented and approved by the following committees:

INTEGRIS Health Partners (IHP) Performance Improvement Committee 11/21/16.
IHP Board of Directors 1/4/17.
IHP Pharmacy Task Force 12/8/16, revisions on 3/14/19
IMG Executive Committee June 2018, revisions on March 2019