

Remote Patient Monitoring: Enrollment Notification and Settings



Date:		PCP:	
Office Phone:		Office Fax:	
Patient Name:		Patient DOB:	
Condition Enrolled:		Return Fax:	
<input type="checkbox"/> Hypertension	<input type="checkbox"/> CHF	<input type="checkbox"/> Diabetes	<input type="checkbox"/> COPD

Dear Provider,

Your patient named above has been enrolled in the ACO’s Remote Patient Monitoring Program due to the condition/s marked above. Below are the presets in the system for the disease conditions we monitor. Using this form, you may tailor the notification settings to your patient’s needs. **We will work in close communication with you and your staff to ensure prompt follow up for at risk patients (high risk triggers).** Feel free to check all that you would like monitored and adjust the settings using the “New PCP Preferred Settings” column. If no settings are changed, please check the box at the end of the form, sign and return.

<input checked="" type="checkbox"/>	Pre-set Monitoring Settings	Risk Level of Trigger	New PCP Preferred Settings
	1 lb. gained in 24 hours	Medium	
	2 or more lbs. gained in 24 hours	High	
	5 or more lbs. gained in 7 days	High	
	10 or more lbs. gained or lost from baseline	High	
	No Weight reported for 2 consecutive days	Medium	
	Diastolic Blood Pressure between 85-89 mmHg	Medium	
	Systolic Blood Pressure 160-169 mmHg	Medium	
	Systolic Blood Pressure below 100 mmHg	High	
	Systolic Blood Pressure Systolic above 170 mmHg	High	
	Diastolic Blood Pressure above 90 mmHg	High	
	No Blood Pressure reported for 2 consecutive days	Medium	
	Heart Rate between 61-65 bpm (from blood pressure monitor)	Medium	
	Heart Rate between 90-99 bpm (from blood pressure monitor)	Medium	
	Heart Rate below 60 bpm (from blood pressure monitor)	High	
	Heart Rate above 100 bpm (from blood pressure monitor)	High	
	Any Oxygen Saturation below 91-92%	Medium	
	Any Oxygen Saturation below 90%	High	
	Heart Rate below 60 bpm (from pulse-ox)	High	
	Heart Rate above 100 bpm (from pulse-ox)	High	
	Heart Rate between 61-65 bpm (from pulse-ox)	Medium	
	Heart Rate between 90-99 bpm (from pulse-ox)	Medium	
	No Oxygen Saturation/Heart Rate reported for 2 consecutive days	Medium	
	Any missed essential medication	High	
	No Symptom Surveys reported for 2 consecutive days	Medium	
	Blood Glucose between 70- 80 mg/dL	Medium	
	Blood Glucose between 200- 250 mg/dL	Medium	
	Blood Glucose below 70 mg/dL	High	
	Blood Glucose above 250 mg/dL	High	
	Temperature below 97°F	High	
	Temperature above 100.5°F	High	
	No Activity (Exercise) reported for 3 consecutive days	Medium	

Please review page 2 for essential medication monitoring.

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Check this box to have essential medications compliance monitored for the enrolled condition/s.
If box is checked, enter essential medications below including how often they should be taking them.

Name of Medication	Associated Condition (Diabetes, CHF, COPD, HTN)	Should be taken:		
		Daily	Every X Days	Custom
		<input type="checkbox"/>		
		<input type="checkbox"/>		
		<input type="checkbox"/>		
		<input type="checkbox"/>		
		<input type="checkbox"/>		
		<input type="checkbox"/>		

Check this box if you **DO NOT** want to have the ACO’s Nurse Practitioner assist with your patient’s abnormal values. This may include a home visit if needed. This is an optional service to the provider.

Please fax this form to **423-282-1216**

<input type="checkbox"/>	No changes to settings
Date	
Printed Name	
Provider Signature	