

This **Pre-Visit Planning Tool for the ABCS** is intended to equip clinicians with essential information about the ABCS status of their patients. You may use this checklist to build the capability to “flag” upcoming care needs in your electronic health record (EHR). This checklist should be completed in anticipation of a patient’s upcoming visit.

Patient Name: _____ Date of birth: _____ (mm/dd/yy) Date: _____

Instructions: Circle Yes (Y) or No (N)

ASPIRIN

- Y/N Diagnosis of CAD (Coronary Artery Disease)?
- Y/N Diagnosis of TIA (Mini-Stroke)?
- Y/N Diagnosis of Ischemic Stroke?
- Y/N Diagnosis of PVD (Peripheral Vascular Disease)?

- Y/N If patient has any of the above diagnoses, is patient on low-dose Aspirin (unless contraindicated)?

ACC/AHA Calculated Risk: _____%

*Diagnosis can be found on the patient’s Problem list

**Aspirin usage can be found on the Medication list.

BLOOD PRESSURE

Most recent blood-pressure reading: ____/____ Date: _____

- Y/N Was BP at goal (less than 140/90 if 59 and younger OR less than 150/90 if 60 and older)?
- Y/N Is patient on ACE if diabetic or has CAD?

*Most recent BP readings can be found within the Last Office Note or the Vitals section

CHOLESTEROL

- Y/N LDL of 190?
- Y/N Diabetes and LDL of 70?
- Y/N Diagnosis of CAD, TIA, Ischemic Stroke, or PVD?

- Y/N If yes to any of the above, is patient on a statin (unless contraindicated)?

*LDL levels can be found within the Lab section.

SMOKING

- Y/N Is smoking status known?
- Y/N If yes, is patient currently smoking?
- Y/N If yes, was cessation counseling done? Documented?

*Smoking status can be found within Office Notes or Personal/Social History
**Smoking cessation counseling can be found within Office Notes if documented