



ANTICOAGULATION (AC)

EVIDENCE IN ACTION

Anticoagulation (AC) management and therapy continue to be part of national patient safety concerns and national quality measure protocols. Reducing adverse risk to patients is a priority which will also be tied to a financial incentive program for those institutions that meet a stringent “meaningful use” criteria. Our goal is to pre-emptively address patient care to avoid costly inpatient admissions by providing intuitive tools that benefit specialists AND non-specialists alike in all care settings.

The management of oral anticoagulation therapy, especially with Vitamin K antagonist therapy such as Warfarin, continues to be the number one cause of adverse drug events requiring hospitalization in Americans (Budnitz et al., NEJM 2011; 365:2002-12).

Point of Care Anticoagulation (PCDS AC) system

was developed with leading clinical thrombosis experts to specifically address the new and complex challenges of managing both Warfarin and Target Specific Oral Anticoagulants (TSOAC). With the introduction of TSOACs, the number of variables that need to be factored into therapy management and decision-making has become increasingly challenging. The PCDS AC management system enables clinics to augment their teams with integrated electronic decision support that provides consistent, measurable and evidence-based quality of care for patients on anticoagulants.

The PCDS AC system is currently the only AC system that incorporates full TSOAC therapy and workflow, which allow for expanded paradigms of anticoagulant management, and manages all phases of AC therapy. It provides valuable data on the efficacy of TSOACs to improve patient care and, ultimately their impact on cost savings related to adverse events.

The PCDS AC system is also the only AC system that incorporates high-risk auto identification into the anticoagulant management plan, including using thrombosis and bleeding risk scores and peri-procedural anticoagulant management, helping healthcare providers at an enterprise-level (that are not AC experts) make better decisions and drive positive outcomes.



Now you can quickly know the entire AC history of a patient in under 60 seconds from any department in the organization. Add to the AC patient record following a standard protocol.

Patient Safety & Cost Savings:

Via reduction of Warfarin-related adverse drug events (MIs, strokes, major bleeds, etc.) by consistently achieving time-in-therapeutic range (TTR) above 72%. The PCDS AC system utilizes the most validated evidence-based algorithm to dose Warfarin patients (Hamilton General nomogram - Nieuwlaat et al., Thrombosis and Haemostasis 108.6/2012).

Patient Safety & Revenue Generation:

The PCDS AC system brings together the ACCP Antithrombotic guidelines, risk ratings like CHA₂D₂S-VASc, HAS-BLED, HEMORR₂HAGES, drug-drug interactions, and other evidence-based research to automatically identify high risk patients, including those not currently enrolled in the AC program, and manage their AC care end-to-end. This provides an opportunity to identify new patients for AC therapy and enroll them in your program.

Patient Satisfaction:

The PCDS AC system is currently the only AC system that incorporates full target specific oral anticoagulants (TSOAC) therapy and workflow, which allow for expanded paradigms of anticoagulant management. These new TSOAC agents require far less blood testing which is a major plus for patients.

Anticoagulation
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Home Patient Reports

Profile Risks Encounters Procedures Medications Adverse Events Labs Education

James Aarons [Edit](#)

ACTIVE HIGH RISK 2

MR# 6512-24
DOB 04/23/1952
Sex Male
Weight 62 kg
CrCl 56 mL/min 11/11/2014
Blood Type A
Clinic Apple Valley Clinic
PST Yes
TTR 75.4%
Allergy: Codeine
ANTIPLATELET ALERT!

Primary Diagnosis
Other arterial embolism and thrombosis of abdominal aorta - I74.09

Secondary Diagnosis
Acute embolism and thrombosis of inferior vena cava - I82.220

Patient Action Plan

View Initial Encounter

Encounters

New Follow-Up End of Therapy

Last INR 2.4 on 11/24/2014	Next INR Create Appointment Apple Valley Clinic	Oral Coumadin 6.5 mg Weekly	Bridging No active bridging therapy
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INR History
TSOAC History
All History

INR Date	INR	Therapy	Weekly Dose	Dose Δ	Next INR
11/24/2014	2.4	Coumadin, Maintenance	6.5 mg	↔-0.00%	01/01/2015
11/17/2014	2.9	Coumadin, Maintenance	6.5 mg	↓-7.69%	12/08/2014
11/10/2014	3.1	Coumadin, Maintenance	6.5 mg	↔-0.00%	11/17/2014
11/03/2014	3.7	Coumadin, Maintenance	6.5 mg	↓-7.14%	11/10/2014

- *Manage drug transitions (Warfarin to TSOAC and back to Warfarin)*
- *Provide real-time data for “at risk” patients*
- *Improve patient workflow and enables management of large numbers of AC patients*
- *Integrate diagnosis and procedure billing codes for accurate billing documentation*

Fulfill CMS Meaningful Use Stages 2 & 3:

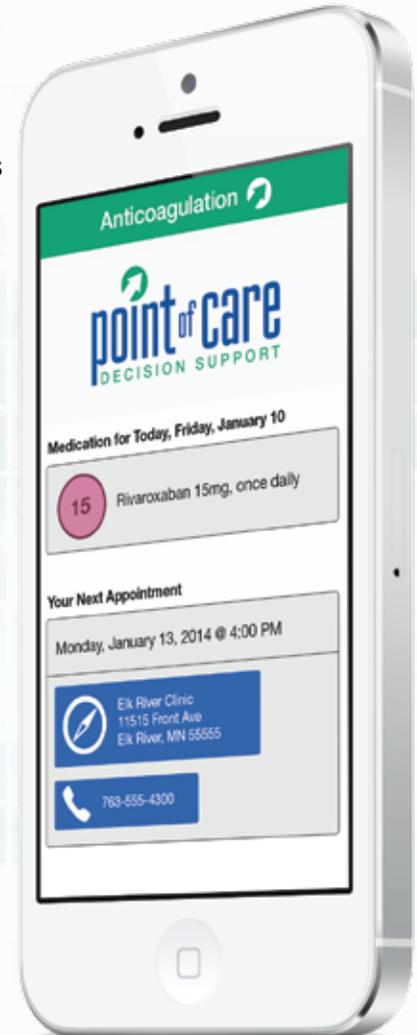
Provides ability to fulfill CMS MU-2 criteria for quality of Warfarin dosing at a system-level with TTR > 70%. Achieve MU-3 measures by improving population health and providing patient self-management tools via our mobile patient engagement application. Also provides de-centralized capabilities for rural locations or extensive geographic areas.

Technical Highlights:

- Web-based software solution that can be self-hosted or cloud-hosted
- Enterprise software that can scale to manage an unlimited number of patients and users
- Role-based security constraints that limit users to relevant functions
- iPad/Tablet compatible for clinicians
- Patient engagement mobile app available at the Apple®, Android® and Windows® mobile app stores
- Compatible with Windows and Unix® platforms
- Compatible with Oracle®, Microsoft SQL Server, MySQL and other RDBMS databases
- Capable of integrating into an EHR system at various levels depending on the workflow of your organization, and ready to accept any data accessible such as labs, procedures, and events

Return on investment include:

- Reduction of adverse events and hospital admissions/re-admissions
- Identifying patients with emerging chronic disease conditions before they become critical
- Minimum 4:1 Annual ROI
- Enables clinicians to spend more time with patients and see more patients
- Gives patients timely, accurate care with less waiting/delays
- Maximize staff productivity



Updates to the patient treatment plan automatically reflect in the patient's mobile app!
The app also communicates PST/PSM INR, pill schedule, patient education and more.

About Us

Point of Care Decision Support (PCDS) is an evidenced-based clinical decision support software company. We transform complex medical guidelines and validated trials into timely, critical information. Our solutions guide key clinical decisions and transitions of treatment at the point of care.

With its *Dynamic Decision Support Platform* as the core anchor, PCDS builds intuitive healthcare tools that measure and improve the quality of patient care, provide real-time data and analysis, and have a meaningful and measurable return on investment. This provides consistency across every application available, helping patients and their healthcare providers manage chronic disease conditions.

Real-time intelligence is the base of the platform taking evidence-based rules, merging with patient data and constructing a personalized patient point of care therapy program while focusing on “total patient health risk reduction”.

Interoperable with all major EMR/EHR systems, the *Dynamic Decision Support Platform* easily integrates new technology with existing investments, reducing implementation and operating costs. PCDS customers are able to more easily innovate and evolve with the changing needs of the business at a lower cost.

Point of Care Decision Support solutions are cloud-based and HIPAA compliant. The applications are accessible via web browser, iPad and other tablets. There is 24/7 live monitoring of the system that includes daily, McAfee secure HIPAA testing and firewall stress testing following stringent security protocols.

As patient care protocols continue to evolve, so does Point of Care Decision Support. Real-time intelligence is the base of the platform taking evidence-based rules, merging with patient data, constructing a personalized patient point of care therapy program. Future modalities include: cholesterol, COPD, oncology, hypertension, diabetes, arthritis, mental health and obesity.

Contact us for more information about our products and services.



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