CAT4 Release Notes V4.15 May 2019

This update contains a number of changes to existing reports as well as new functionality.

Updates to existing reports:

- CV Event Risk updates for revised NVDPA guidelines

  The National Vascular Disease Prevention Alliance (NVDPA) has updated their guidelines for the calculation of the CV Event risk and PEN CS is adjusting the algorithms used in CAT Plus to the new guidelines and aligning the terminology. While we are implementing the change in algorithm, we also align the rounding used in PAT CAT and CAT4. The changes are mainly around patients with diabetes without a full set of measurements and the increased for older indigenous patients. The newly considered criteria are:

  - Diabetes + ACR >= 2.5M, 3.5F
  - eGFR < 45
  - BP diastolic >= 110
  - Indigenous Age > 74

  This change will affect the report in two ways:

  - More patients will be included in the report as there are now additional criteria available
  - More patients will be reported in the 16%-19% risk group who were previously reported in the <16% risk group.

  Full details on the latest guidelines can be found here: https://www.cvdcheck.org.au/australian-absolute-cardiovascular-disease-risk-calculator
  This change will affect the CV Event risk report in PAT CAT and CAT4.
  A recalculate of the CV Event risk report is required to apply the new algorithm to the report in PAT CAT. While we are implementing the change in algorithm we also align the rounding used in PAT CAT and CAT4.

- Indicated CKD Report update to include patients without a CKD diagnosis and with a eGFR < 60 and no ACR

  Based on the guidelines in the 3rd edition of the CKD management handbook available from the kidney foundation here: https://kidney.org.au/health-professionals/prevent/chronic-kidney-disease-management-handbook
  This change will increase the number of patients with indicated CKD as it will now include those patients with an eGFR <60. Prior to this change we only included patients with eGFR and ACR results, now we will include those with eGFR only provided the eGFR is <60. As we can't calculate the timing for the clinical action plan without the ACR we will display only the indicated stage of CKD without a colour indicating the urgency for the clinical action plan.

  This change will affect the 'Indicated CKD with no diagnosis' under the 'Data Cleansing' reports in CAT4 and the 'indicated conditions' report in PAT CAT as well as the data cleansing app in Topbar.

| | | | Albuminuria Stage | |
Kidney Function Stage	GFR (mL/min/1.73m²)	Normal (urine ACR mg/mmol) Male: < 2.5 Female: < 3.5	Microalbuminuria (urine ACR mg/mmol) Male: < 2.5 -25 Female: < 3.5-35	Macroalbuminuria (urine ACR mg/mm Male: > 25 Female: > 35
1	≥90	Not CKD unless haematuria, structural or pathalogical abnormalities present		
2	60-89			
3a	45-59			
3b	30-44			
4	15-29			
5	<15 or on dialysis			

- MBS Item Lists – add non VR Item numbersUnclear how to do this in NKPI/APCC reports as they only list standards

  Medicare addeded new item numbers for non-vocationally registered GPs and PEN CS has addeded these item numbers to the existing medicare reports. These items are specific to non VR GPs and are not expected to have a large impact on numbers in MBS related reports.
  Details of the new items:

- Diabetes_SIP added "259", "260", "261", "262", "263", "264"
- Health_Check added "224", "225", "226", "227"
- Asthma_COC added "265", "266", "268", "269", "270", "271"
- Mental_Health_Careplan added "272", "276", "277"
- RACF "183", "188", "202", "212"
- Telehealth added "812", "827", "829", "867", "868", "869", "873", "876", "881", "885", "891", "892"
- Indigenous HC (715) added "228"
- GPMP (721) added "229"
- TCA (723) added "230"
- GPMP/TCA Review (732) added "233"
- DMMR (900) added "245"
- RMMR (903) added "249"
  The changes will affect the MBS item report and MBS attendance filter groups in CAT4, the MBS item report in PAT CAT and the MBS app in Topbar.

- MBS Item Lists – new respiratory item numbers

  Medicare has added new item numbers specific for respiratory care and PEN CS has added these items to the relevant reports. Some of the items are only relevant to specialist care, but some increase is expected in the MBS item report. The details of the new items are:
  11503,11505,11507,11508,11512
  The changes will affect the MBS item report in CAT4 and PAT CAT.

- Deidentified extract will include data for patients that have been reviewed as not having an indicated condition

  CAT Plus users can remove patients indicated with a chronic condition from the respective lists in CAT4 Cleansing reports or in the data cleansing app in Topbar. Until now these reviews were not included in the deidentified data uploaded to PAT CAT. With the latest update PEN CS is addressing this issue and the work done at the practice level will be reflected in the 'Indicated Diagnosis' PAT CAT report. Numbers are expected to drop for the five indicated conditions depending on the level practices have cleaned up their data locally.
  The changes will affect the 'indicated conditions' report in PAT CAT.

- Waist graphs will now contain a category age <18 and nothing recorded to align the CAT4 reports with the clinical systems and recommendations for waist measurements

- CDSA report percentages have been aligned to the RACGP 5th edition to show the traffic light colours at the following percentages:

  - Cutoffs for green will be > 90% Allergies and > 75% for the rest

  - Red will remain as 0-60% for All

  - Orange becomes > 60 - 90% Allergies and > 60 - 75% for the rest

- ICPC 2Plus groupers have been updated to move some of the diabetes types to the 'undefined' diabetes category as the diagnosis wasn't clear on the type of diabetes. This will affect Zedmed, Communicare and Genie users.

- New test name added for FOBT screening report: NBSP for National Bowel Screening Program

- Spirometry graph header has been updated to show that the data we report on is POST Spirometry only'
- Mapping updates:
  - Fluzone High Dose added for influenza vaccines
  - Asenapine added for antipsychotics
  -

New functionality

- Respiratory medications - new category Respiratory COPD Combination (ICS/LAMA/LABA) has been added to the medication filters

    The Asthma Council has added a new category for Asthma & COPD medications in 2018 (source https://www.nationalasthma.org.au/living-with-asthma/resources/health-professionals/charts/asthma-copd-medications-chart)
    and PEN CS is aligning the respiratory medication filters and reports with this new category of medication. The new category is a combination of ICS/LAMA/LABA for COPD patients and it category includes generic fluticasone furoate/umeclidinium/vilanterol (Trelegy Ellipta).
    This change will affect the Medication report and filter in CAT4 and PAT CAT.

- Patients with a subtotal hysterectomy will be included in the cervical screening reports as they are also eligible for 5 yearly screening

- Additional names added for cervical screening test:
    - Human Papilloma Virus
    - National Cervical Screen
    - CST

- Cancer filter and reports have been added to CAT4

    The new filter and report will enable users to find patients with a number of cancer diagnosis in a bar chart as well as enable filtering for those cancer conditions. For full details please see here: Cancer Diagnosis Data Mapping and watch our brief video on the new report/filter here: Cancer Report and Filter Video

- Audit C results are now being extracted and reported for Best Practice users

- Medicare number is now showing on the patient re-identify report instead of IHI

- Bug fixes and performance enhancements