

## About This Guide

This Guide provides a high-level overview of Patient Notes in Practice Partner. The overview is meant to provide guidance for you, your practice electronic health record (EHR) champion, or IT staff.

Experienced users are the main focus of this Guide; not every step is included in the instructions, and this is not a replacement for training from Practice Partner. There are several ways to approach each workflow in Practice Partner. This Guide highlights one workflow; however, you may be familiar with an alternative approach. Please note that this Guide was created based upon Practice Partner version 11.0. Screens and features may change as new software versions are released.

## INDICATIONS AND USAGE

PRALUENT (alirocumab) is indicated:

- to reduce the risk of myocardial infarction, stroke, and unstable angina requiring hospitalization in adults with established cardiovascular disease
- as an adjunct to diet, alone or in combination with other lipid-lowering therapies (e.g., statins, ezetimibe), for the treatment of adults with primary hyperlipidemia (including heterozygous familial hypercholesterolemia) to reduce low-density lipoprotein cholesterol (LDL-C)

## IMPORTANT SAFETY INFORMATION

- PRALUENT is contraindicated in patients with a history of a serious hypersensitivity reaction to PRALUENT, including hypersensitivity vasculitis and hypersensitivity reactions requiring hospitalization

Please see accompanying full [Prescribing Information](#)



## Using Patient Notes

Clinical decision support (CDS) tools such as Patient Notes provide clinicians and staff with patient-specific information, intelligently filtered and presented at appropriate times to help improve the delivery of care. Patient Notes can assist with identifying gaps-in-care and may enhance patient outcomes and improve care consistency—a benefit to both providers and patients.

Patient Notes can be created to alert health care professionals (HCPs) to consider PRALUENT therapy for appropriate patients during the visit.

## Factors That May Impact Patient Notes

The display of Patient Notes may be impacted by the clinical data available in the EHR; for example, if lab results are saved in the EHR as a PDF file and not available for use as “data” to be queried. Additionally, in those cases where lab results are received from multiple laboratories, it may be necessary to select each lab’s order codes to enable all appropriate patients to display alerts. The query criteria should consider active patients only (not deceased or inactive, as determined by the practice). Also, medications prescribed before the EHR was implemented might not be included in a patient’s medications list. These information gaps can limit the number of patients where alerts are displayed.

Patient Notes can help identify whether the patient is a candidate for PRALUENT treatment based on clinical appropriateness and payer utilization management criteria via:

- Reminders during the patient exam workflow, such as ordering lab tests or other diagnostics, adjusting or adding medications to a patient’s treatment plan, or providing patient education on LDL-C goals
- Identification of patients who, for example, have a diagnosis of established cardiovascular disease (eg, myocardial infarction, stroke or unstable angina requiring hospitalization) and may also be on maximally tolerated statin therapy (eg, atorvastatin 40 mg/day), and having elevated LDL-C  $\geq 70$  mg/dL or  $\geq 100$  mg/dL, depending on insurance

## IMPORTANT SAFETY INFORMATION

- Hypersensitivity reactions (e.g., pruritus, rash, urticaria), including some serious events (e.g., hypersensitivity vasculitis and hypersensitivity reactions requiring hospitalization), have been reported with PRALUENT treatment. If signs or symptoms of serious allergic reactions occur, discontinue treatment with PRALUENT, treat according to the standard of care, and monitor until signs and symptoms resolve

Please see accompanying full [Prescribing Information](#)



**Praluent**<sup>®</sup>  
(alirocumab) Injection 75mg/mL  
150mg/mL  
Redefining Possible

## Reminders: Using Patient Notes

Practice Partner enables Patient Notes, which are displayed when the patient's chart is accessed.

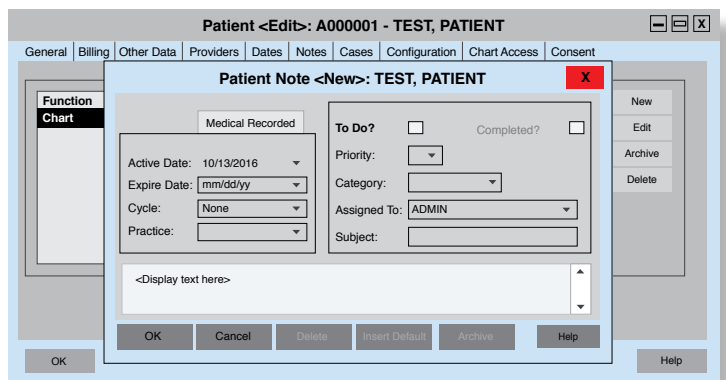
For example, a Patient Note may be created to alert the HCP of patients with uncontrolled LDL-C who are clinically appropriate and approvable for PRALUENT therapy based upon the approved Indication.

Patient Notes can be created manually based on a Patient Inquiry report that can be run listing all patients meeting specific criteria. Criteria for PRALUENT would include established cardiovascular disease (eg, myocardial infarction, stroke or unstable angina requiring hospitalization), with or without concomitant use of a maximally tolerated statin therapy (eg, atorvastatin 40 mg/day) and having elevated LDL-C (eg,  $\geq 70$  mg/dL or  $\geq 100$  mg/dL), depending on insurance.

The following steps illustrate how to create Patient Notes to identify patients who may be candidates for treatment with PRALUENT.

## To Add a Patient Note:

1. Create a **Patient Inquiry** with the appropriate criteria. For example: established cardiovascular disease, (eg, myocardial infarction, stroke or unstable angina requiring hospitalization), with or without concomitant use of a tolerated statin therapy atorvastatin 40 mg/day, and LDL-C  $\geq 70$  mg/dL or  $\geq 100$  mg/dL
2. Use the resulting patient inquiry report, which can be created using the EHR Patient Inquiry tipsheet for Practice Partner, as a source document. For each patient identified on the Patient Inquiry report, navigate to the patient chart, select the **Patient** button, and then select the **Notes** tab
3. Select **New** and
  - Choose **Medical Record** from the dropdown
  - Add **Date(s)** or other details as desired
  - Add **display text** in the text box
4. Select **OK** to save the **Patient Note**



## IMPORTANT SAFETY INFORMATION

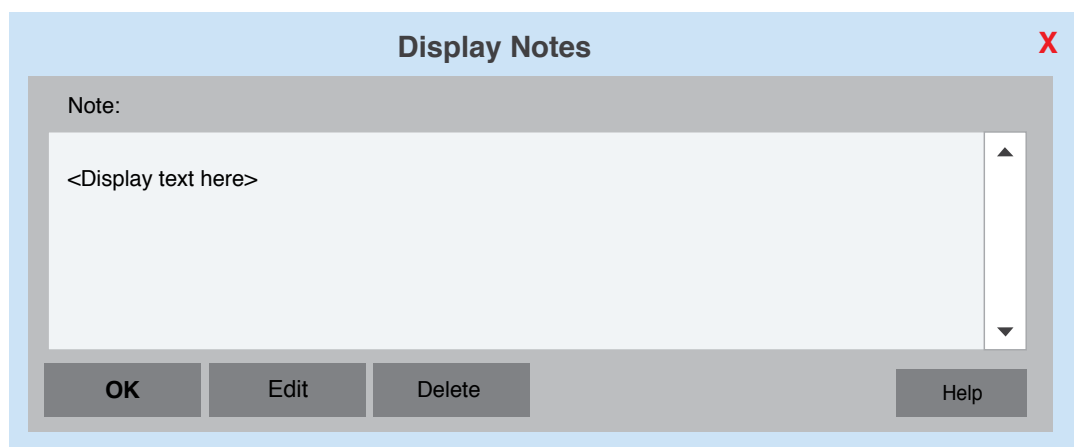
- The most commonly occurring adverse reactions in clinical trials in primary hyperlipidemia (including heterozygous familial hypercholesterolemia (HeFH)) ( $\geq 5\%$  of patients treated with PRALUENT and occurring more frequently than with placebo) are nasopharyngitis, injection site reactions, and influenza

Please see accompanying full [Prescribing Information](#)



## Reminders: Using Reports and Patient Notes

5. The Patient Note displays each time the patient chart is opened



## IMPORTANT SAFETY INFORMATION

- The most commonly occurring adverse reactions in the cardiovascular outcomes trial (>5% of patients treated with PRALUENT and occurring more frequently than placebo) were non-cardiac chest pain, nasopharyngitis, and myalgia

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## IMPORTANT SAFETY INFORMATION

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- Hypersensitivity reactions (e.g., pruritus, rash, urticaria), including some serious events (e.g., hypersensitivity vasculitis and hypersensitivity reactions requiring hospitalization), have been reported with PRALUENT treatment. If signs or symptoms of serious allergic reactions occur, discontinue treatment with PRALUENT, treat according to the standard of care, and monitor until signs and symptoms resolve
- The most commonly occurring adverse reactions in clinical trials in primary hyperlipidemia (including heterozygous familial hypercholesterolemia (HeFH)) ( $\geq 5\%$  of patients treated with PRALUENT and occurring more frequently than with placebo) are nasopharyngitis, injection site reactions, and influenza
- The most commonly occurring adverse reactions in the cardiovascular outcomes trial ( $>5\%$  of patients treated with PRALUENT and occurring more frequently than placebo) were non-cardiac chest pain, nasopharyngitis, and myalgia
- In the primary hyperlipidemia (including HeFH) clinical trials, local injection site reactions including erythema/redness, itching, swelling, and pain/tenderness were reported more frequently in patients treated with PRALUENT 75 mg and/or 150 mg every 2 weeks (7.2% versus 5.1% for PRALUENT and placebo, respectively). Few patients discontinued treatment because of these reactions (0.2% versus 0.4% for PRALUENT and placebo, respectively), but patients receiving PRALUENT had a greater number of injection site reactions, had more reports of associated symptoms, and had reactions of longer average duration than patients receiving placebo
- The once-monthly (Q4W) 300mg dosing regimen had a higher rate of local injection site reactions as compared to PRALUENT 75mg Q2W or placebo (16.6%, 9.6%, and 7.9%, respectively) in a trial in which all patients received an injection of drug or placebo every 2 weeks to maintain the blind. The discontinuation rate due to injection site reactions was 0.7% in the 300 mg Q4W arm and 0% in the other 2 arms

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## IMPORTANT SAFETY INFORMATION (*cont.*)

- In a cardiovascular outcomes trial, local injection site reactions were reported in 3.8% of patients treated with PRALUENT versus 2.1% patients treated with placebo, and led to permanent discontinuation in 0.3% of patients versus <0.1% of patients, respectively
- In the primary hyperlipidemia trials, liver-related disorders (primarily related to abnormalities in liver enzymes) were reported in 2.5% of patients treated with PRALUENT and 1.8% of patients treated with placebo, leading to treatment discontinuation in 0.4% and 0.2% of patients, respectively. Increases in serum transaminases to greater than 3 times the upper limit of normal occurred in 1.7% of patients treated with PRALUENT and 1.4% of patients treated with placebo
- In the primary hyperlipidemia trials, the most common adverse reactions leading to treatment discontinuation in patients treated with PRALUENT were allergic reactions (0.6% versus 0.2% for PRALUENT and placebo, respectively) and elevated liver enzymes (0.3% versus <0.1%)
- PRALUENT is a human monoclonal antibody. As with all therapeutic proteins, there is a potential for immunogenicity with PRALUENT

Please see accompanying full [Prescribing Information](#)

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