

MD Snapshot-Prescribing Manual

CPSA Portal: Analytics

For the best user experience, we recommend using Google Chrome to access MD Snapshot-Prescribing. After logging into the Analytics section of your secure CPSA Portal and selecting MD Snapshot-Prescribing, you will see the **landing page**, which includes summary patient trends for our four prescribing categories:

- Antibiotics
- Benzodiazepines/Z-drugs (BDZ/Z)
- Opioids
- Opioid New Starts (formerly opioid-naïve)

rt good patient care. Variations in practices and clini wing your Prescribing Snapshot. Questions? <u>Visit the</u> Ξ n page by clicking here or us of AIR Inquiries@cosa.ab.c cpsa snapshot 2023-Q1 Summary Prescriber, Anonymous 3; Your Trend Higher Risk Patients Details 9 Antibiotic² Patients 2020 03 2023 Q1 5 BDZ/Z³ Patients - 5 Median 2020 03 2023-01 Opioid⁴ Patients (AII) 2020 03 2023-01 **Opioid Patients** л (New Starts*) 2020 03 2023 01 (1) information from your annual renewal (RUP) determined your adoignment to a comparator group. In addition, if you belong to a Primery Care Network (PCN) and have beledt the FCN comparator group, your preciping practice is compared to physicians identified as members of your FCN. Comparator group members may have similar qualification of nicel prectices, or preporting distribution, but variations at an individual level are possible. Please take your contact into consideration as you review and interpret the information provided. (2)Analytic group includes drug dispenses for antibiotics, excluding topical formulations (5)BDQ/2 setegory includes benood as applies and behood as expine-like drugs or 3-drugs (i.e. copisione, calepion or colpidem). (4)The obioid analytic group includes thug dispenses for opietes, opicide and certain non-opicid drugs (but albitatiand valuemine). Non-opicid drugs and opicid drugs accigned an oral morphine equivalent of sero (some bupmorphine and methadone products) do not contribute to total opicid drugs calculations. These contributes to ingredient counts only. Thermatical real in operime for collection (control opical drugs optical drugs calculations) and the contribute to any thermatical real in opicide (control drugs optical drugs calculations). (c)Opiolic patients are considered New Starts ("they do not have a preceding opiolic dispense ()act 180 days) in Netzere. Phermaceutical Information of the start nation Network (FIN), Fatients





MD Snapshot-Prescribing Menu

The **Menu** allows for easy access to and transition between each component of MD Snapshot-Prescribing.

This includes our **Supporting Material**, such as:

- An overview of MD Snapshot-Prescribing
- The MD Snapshot-Prescribing Manual
- The latest Prescribing Companion
- An FAQ document
- A Glossary of Terms
- OME/DDD used in MD Snapshot-Prescribing
- TPP Alberta's Drug Utilization Atlas
- A reference on <u>Comparator Groups</u>
- <u>Prescribing resources</u> on CPSA's website



Supporting Material

Overview of MD Snapshot-Prescribing

MD Snapshot-Prescribing Manual

Prescribing Companion

Frequently Asked Questions

Glossary of Terms

Oral Morphine Equivalents (OME) & Defined Daily Doses (DDDs)

TPP Alberta's Opioid & Benzodiazepine and Antibiotic Atlas

Physician Prescribing Practices (PPP) Resources





To access other pages within your MD Snapshot-Prescribing, hover your mouse over the three horizontal lines in the top, left-hand corner of your screen, then click on your desired page. To close the navigation pane, click "X". This approach is like using a back arrow on browsers. See the navigation section below for other transition options.

MD Snapshot Prescribing is a tool to improve prescribing awareness and support good patient care. Variations in practices and clinical complexities are recognized. Please consider your individual context when reviewing your Prescribing Snapshot. Questions? <u>Visit the</u> program page by clicking here or email us at <u>AlR.Inquiries@cpsa.ab.ca</u>

Antibiotic Prescribing	N
 Antibiotic Summary 	
 Antibiotic Higher Risk Patients 	
Benzodiazepine and Z-drugs Prescribing	>
All Opioid Prescribing	>
Opioid New Starts	>
Supporting Material & FAQs	
View Full Prescribing Snapshot	
Earning CMEs	

After bringing up the menu, clicking on the > to the right of each menu option allows you to navigate to the summary or list of higher-risk patients for each prescribing category.

Ret	urn to Prescribing Summary	
Ant	ibiotic Prescribing	\sim
0	Antibiotic Summary	
0	Antibiotic Higher Risk Patients	

Navigation

Navigation from the Summary Page provides access to measure trends for the previous 12 quarters and your prescribing details for each category. Navigation can be done in two ways:

1. Click on the Menu lines (in the top left corner of the screen as described above).

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OR

Click on the arrow at the end of each category.
 Antibiotic² Patients
 ^{Omparator}
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 ²⁰²⁰ 03
 ²⁰²³ 01
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Navigation between views can be done in two ways:

1. Click on the arrow in the top left corner of the category page, labeled "Back to Prescribing Summary".



OR

2. Click on the Main Menu.

Patient Details for the Higher Risk Measures can be accessed in two ways:

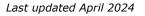
1. Click on the arrow in the top-right corner of the category page, labeled "Higher Risk Patient List".



OR

2. Click on the arrow above the Higher Risk Patients bar graph.









Example of higher-risk patient details (names and PHNs are fictitious):

Back to Benzodiazepine and Z-Drugs Summary			Benzodiazepine Higher Risk Patient List						
Pres	criber, Anonym	ous		Patient Total	Your DDDs				Date 2023-02
PHN	Patient Name	Sex	Age	DDDs per day	per day Contribution	≥2 DODs per day	BDZ/Z Patients 65+	3+ BDZ/Z Prescribers	3+ BDZ/Z Ingredients
PHN	Patient Name	Sex	Age 66	day 6.30	per day Contribution 2.10	≥2 DODs per day	BDZ/Z Patients 65+	3+ BDZ/Z Prescribers	
PHN	Patient Name			day	Contribution	22 DODs per day	BDZ/Z Patients 65+	3+ BDZ/Z Prescribers	Ingredients

Summary reports

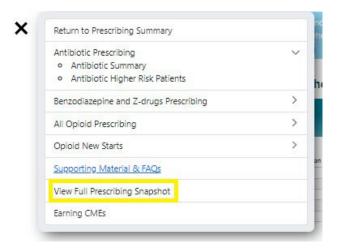
Full or Summary reports can be accessed in two ways:

1.Click on "View Full Prescribing Snapshot" from the black bar at the top of each page.

CPSA Analytics Prescribing Snapshot View Full Prescribing Snapshot Practice Checkup Sign Out

OR

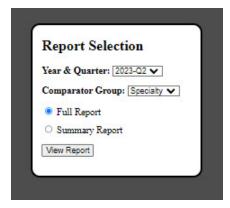
2. Click on the **Menu** and select View Full Prescribing Snapshot.







Then, choose the Year & Quarter, Comparator Group and whether you want to see the Full or Summary report.



To print or save your report (Full or Summary) access the **View Full Prescribing Snapshot** (from either of the methods above), right-click on the white portion of the screen and select "Print" to direct the function to the desired printer, or select "Save as" to save to a file.

Back	Alt+Left Arrow
Forward	Alt+Right Arrow
Reload	Ctrl+F
Save as	Ctrl+S
Print	Ctrl+F
Cast	
Search images with G	oogle

Please remember to store or dispose of your MD Snapshot-Prescribing securely as it prints with confidential patient information.

Additional functionality

Additional functionality when viewing your report includes the ability to:

1. From the top-right of the landing page, choose between your specialty comparator grouping and Primary Care Network (PCN) if you belong to one.

Physicians who practice in a PCN have the option of comparing their prescribing practices with other physicians within their PCN, or within their <u>specialty-based</u> <u>comparator group</u>.

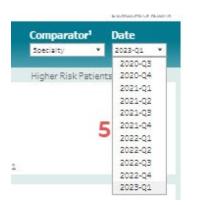




It is important to note the comparator groups differ among the drug categories. View our <u>Comparator Groups</u> document to learn more about the methodology for creating the comparator groups, as well as the specialties included within them.

Comparate	or ¹	Date	
Specialty		2023-Q1	3

2. View data from a previous quarter (from a selection of 12 quarters) by selecting the desired year and quarter from the dropdown options.



3. Hover your mouse over the line graph to see specific quarter data for each point.



4. Hover your mouse over sections of the pie charts to review its details.







Footnotes

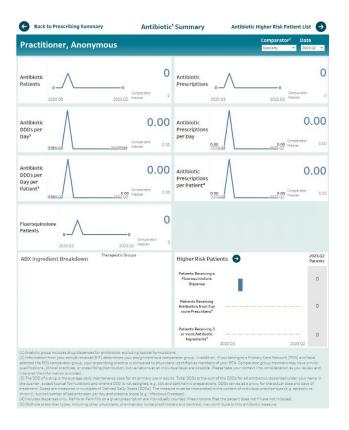
Footnotes include information pertinent to each page.

Example from the landing page:

(1)Information from your annual rer	newal (RIF) determines your assignment to a comparator group. In addition, if you belong to a Primary Care Network (PCN) and have selected
the PCN comparator group, your pre	escribing practice is compared to physicians identified as members of your PCN. Comparator group members may have similar qualifications,
clinical practices, or prescribing dist	rribution, but variations at an individual level are possible. Please take your context into consideration as you review and interpret the
information provided.	
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	s drug dispenses for opiates, opioids and certain non-opioid drugs (butalbital and ketamine). Non-opioid drugs and opioid drugs assigned an Ime buprenorphine and methadone products) do not contribute to total opioid dose calculations. These contribute to ingredient counts only.
Tramadol and all codeine products (including OTC low-dose products) are included in all measures.
	ew Starts if they do not have a preceding opioid dispense (last 180 days) in Netcare, Pharmaceutical Information Network (PIN). Patients ine products as opioid agonist treatments are excluded from these measures.

No Data

If there is no prescribing in any of the categories in a selected quarter, a zero value will be shown on the report. Inclusion of zero values allows for identification of practice changes over time. Refer to the example below.







Report an Issue

a) If you notice or suspect an error within your data, or have any technical issues, use the "Report an Issue" button located in the **top right** corner on the Analytics homepage to **securely** report the issue to CPSA.

My Profile	My Practice Status	My Permits & Receipts	My Documents		Analytics	
				Physic	cian Portal	
		Analytics			A Report an Issu	e
b)	Please spec	cify you're ref	erring to N	/ID Snapshot	t-Prescribing and provide as much d	letai

- in your report as possible to help us investigate your concern.
- c) Click submit when done.

Questions?

MD Snapshot-Prescribing is an educational resource physicians can use to improve the care they provide and is not intended as a judgement on prescribing practices. If you have any questions, please connect with us by:

- Using the secure "Report an Issue" function under the Analytics tab.
- Sending an email to <u>AIR.Inquiries@cpsa.ab.ca</u>. Please note that for privacy reasons, patient-specific details should not be included in the email.
- Calling 780-969-4935 or 1-800-561-3899 (extension 4935).

