## CHRONIC ILLNESS MANAGEMENT GUIDELINES Routine and Annual Treatment Guidelines

Attachment B OP-140137

Asthma ICD-9: 493.90	Annual Physical Examination	Annual Oral Examination (by provider)	Annual Flu Vaccine	Pneumovax (see guidelines)	Annual Peak flow or spirometry												
CAD ICD-9: 414.0	Annual Physical Examination	Annual Oral Examination (by provider)	Annual Flu Vaccine	Pneumovax (see guidelines)	Baseline EKG, then at providers discretion	Annual CBC	C Annual CI	MP	Annual Fasting L Profile	₋ipid							
COPD ICD-9: 496	Annual Physical Examination	Annual Oral Examination (by provider)	Annual Flu Vaccine	Pneumovax (see guidelines)	Routine Peak flow q 3 - 6 months or spirometry	Routine O2 sats. q 3 - 6 months if patient on oxygen											
Diabetes ICD-9: 250	Annual Physical Examination	Annual Oral Examination (by provider)	Annual Flu Vaccine	Pneumovax (see guidelines)	Routine Foot examination q 3 – 6 months	Annual dilat retinal examination		MP	Annual Fasting L Profile	₋ipid	Annual urinaly: (dipstick)	sis	HgbA1C q 3-6 months	Annual urine a if urine protein on ACE inhibit	negative & p		
HIV: ICD-9 408	Annual Physical Examination	Annual Oral Examination (by provider)	Annual Flu Vaccine	Pneumovax (see guidelines)	Tetanus as indicated	Annual dilat retinal examination	annual for	annual for L female age 21-		Viral	Routine CD4 q 4 months		Routine CBC q 4 months	Routine CMP q 4 months	Fasting Lipid Profile Annually	RPR Annually	Hepatitis A & B Vaccination (If no serologic immunity) HPV for < 27 years old.
HTN ICD-9 401.9	Annual Physical Examination	Annual Oral Examination (by provider)	Annual Flu Vaccine	Pneumovax (see guidelines)	Baseline EKG, then at providers discretion	Annual fundoscopic examination (by provider	า	3C	Annual C		Fasting Lipid Profile every 3 years		Annual urinalysis with protein (dipstick)				
Seizure ICD 9: 345.9	Annual Physical Examination	Annual Oral Examination (by provider)	Annual Flu Vaccine	Annual CMP	Annual neurologic and cognitive exam									_			
Hepatitis B ICD- 9: 070.32	Annual Physical Examination	Pneumovax in severe disease (see guidelines)	Annual Flu Vaccine	Hepatitis A series if not contraindicat ed or already immune	One Time HCV antibody with reflex RNA One time HIV screen	Every 6 months CBC CMP PT/INR AFP	Every 6 months Hep panel	Ever mon HBV	, .	Every month: HBeAç	s Every 6	i	FIB-4 t calculations Q 6 months thttps://www.	HBV Treatment in hose with advanced fibrosis/cirrhosis or persistently elevated ALT with expert guidance	Bi-Annual Child-Pugh Score in severe disease	Abdomir splenic Ultrasou for HCC screenin Q 6 mon	2 – 3 years  with cirrhosis g and annual
Hepatitis C ICD-9: 070.70	Annual Physical Examination	Pneumovax in severe disease (see guidelines)	Annual Flu Vaccine	Hepatitis A & B vaccine series if not contraindicat ed or already immune	One Time HCV antibody with reflex RNA One time HIV screen	Annual CBC CMP in mile disease		_	/ treatment k-up as per cy	-	Bi-Annual Child-Pugh Score in seve disease		Bi-annual CBC, CMP, PT/INR, AFP In severe disease	EGD every 2  - 3 years with cirrhosis and annual EGD in CTP class C	APRI > 2.0	l in cirrhosis. ), FIB-4 > 3.25; f liver disease o	
Fatty Liver SNO MED	Annual Physical Examination	Annual Flu Vaccine	Hepatitis A vaccine se not contrai or already	ries if CBC ndicated	ual Ar		Annual Fasting Lipid	Annual Hemogl A1c		Annual PT/INR	Ann AFP		Annual Hepatitis Panel (CPL 162)	Annual APl and FIB-4			

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Cirrhosis	Bi-Annual	Pneumovax	Annual	Hepatitis A &	One Time	One Time	One Time	Bi-Annual	Bi-Annual	Bi-Annual	Bi-Annual	Bi-Annual	EGD every
ICD 9:	Physical	(see	Flu	B vaccine	HCV	HBV	HIV	CMP	CBC PT/INR	AFP	Child Pugh	RUQ/splenic	2 – 3 years
571.5	Examination	guidelines)	Vaccine	series if not	screening	screening	screening				score	Ultrasound	annual
0				contraindicat	with HCV ab	with	(CPL 3540)				calculation	for liver	EGD in
				ed or already	with reflex	hepatitis						cancer	CTP class
				immune	RNA (CPL	Panel (CPL						screening	С
					4677)	162)							

	Seizure - Medication Table									
Phenytoin	Drug level – if seizures uncontrolled or toxicity symptoms present		Ethosuximide	Drug level – if seizures uncontrolled or toxicity symptoms present						
Carbamazepine	Drug level – if seizures uncontrolled or toxicity symptoms present CBC – every 6 months CMP – every 6 months		Valproic Acid	Drug level – if seizures uncontrolled or toxicity symptoms present CBC – every 6 months CMP – every 6 months						
Phenobarbital	Drug level – if seizures uncontrolled or toxicity symptoms present									

Pneumovax Vaccination Guidelines							
Who needs to be vaccinated?	Who needs a second dose?						
<ul> <li>All unvaccinated adults age 65 years or older. (PPSV23 or Prevnar 20)</li> <li>All adults who smoke.</li> <li>All persons age 18-64 years who have chronic disease.</li> </ul>	One time revaccination is indicated for: (1) All adults who are at highest risk of pneumococcal disease or who have anatomic or acquired asplenia or are chronically immunocompromised, if 5 years have elapsed since the previous dose. No more than 2 doses are beneficial over a lifetime.						
All persons who have anatomic asplenia or are immunocompromised.	(R 03/24)						