

Assessment of Underutilisation (AOU) Patient Survey

Patient ID: _____ Patient initials: _____ Date of survey: _____

Category	Patient	Core Recommendation	Prescribing omission (tick)
A	Patient with high <u>calculated</u> risk (>15%) of CVD	If high risk (calculated >15%) the patient should be prescribed both BP and lipid lowering therapy	*Absence of bp-lowering therapy _____ *Absence of lipid-lowering therapy _____ *Absence of both bp-lowering & lipid-lowering therapy _____ *Other (free text) _____
B	A patient in a <u>clinically high-risk</u> (>15%) category for CVD	If high risk (clinically determined) the patient should be prescribed both BP and lipid lowering therapy	*Absence of bp-lowering therapy _____ *Absence of lipid-lowering therapy _____ *Absence of both bp-lowering & lipid-lowering therapy _____ *Other (free text) _____
C	A patient with an established diagnosis of cardiovascular disease	The patient should be commenced on low-dose aspirin treatment (75-150mg) unless contraindicated. Consider alternative antiplatelet agents such as clopidogrel (75 mg) if aspirin hypersensitivity is present	*Low-dose aspirin (75-150mg) _____ *Clopidogrel (75mg) _____ *Other (free text) _____
D	A patient with Type 2 diabetes and micro- or macro- albuminuria	In people with type 2 diabetes and micro- or macro- albuminuria, an ACEI or ARB should be used to protect against progression of kidney disease	*ACEI _____ *ARB _____ *Other (free text) _____
E	A patient <u>without</u> diabetes who has CKD and macro- albuminuria	In adults <u>without</u> diabetes who have CKD and macroalbuminuria, advise treatment with an ACEI or ARB regardless of eGFR or BP level	*ACEI _____ *ARB _____ *Other (free text) _____
F	A patient with heart failure with a reduced left ventricular ejection fraction (HFrEF)	An ACE inhibitor or ARB is recommended in all patients with HFrEF unless contraindicated or not tolerated...	*ACEI _____ *ARB _____ *Other (free text) _____

G	A patient with T2DM who needs metformin	Metformin is the first-choice antihyperglycaemic drug in T2DM	*Metformin _____
H	A patient with T2DM who needs a second antihyperglycaemic drug	If glycaemic targets are not met with lifestyle measures and the maximum tolerated dose of metformin, the next step is to add a second antihyperglycaemic drug	*Sulfonylurea _____ *DPP-4 inhibitor _____ *GLP-1 agonist _____ *Other (free text) _____
I	People for whom 23vPPV vaccine is indicated	Recommend 23vPPV in those aged 15-49 years <u>and</u> all patients >50 years	*>=15-49 years (without chronic disease- as per NT Schedule) _____ *>=15-49 years with chronic cardiac, lung, liver, or other chronic disease _____ *>=15-49 years without chronic disease but is alcohol dependent _____ *>=15-49 years without chronic disease but is a smoker _____ *>=50 years _____
J	People with Acute Rheumatic Fever (ARF) or Rheumatic Heart Disease (RHD) who still require antibiotic prophylaxis *long term= at least 10 years	Recommend long-term prophylactic antibiotics (either benzathine penicillin every 21-28 days or the less preferred option of daily oral penicillin V) for the prevention of recurrent rheumatic fever attacks	*Benzathine penicillin _____ *Oral penicillin _____ *Other (free text) _____
Other	Is there another prescribing omission you would like to record?	Reference used to identify omission:	*No _____ *Yes _____ If <u>Yes</u> , for which of the following conditions does the omission apply? *CVD _____ (Circle: CHD, stroke, HT, dyslipidaemia, PVD, CHF, Other) *Diabetes _____ *CKD _____ *Other chronic condition _____ Description of the omission: