**[PROJECT NAME] – Tip Sheet for Curation of Registry Using a Report**

This tip sheet outlines steps to guide the curation of the registry.

Here are the steps that might be good to include to start:

*[Set up report as a favorite prior to executing the following steps]*

1. Criteria for including a patient on the Reporting Workbench Report (clinicians can then add to or remove from the registry as needed)
   1. Includes patients with appointments **in the next month** with the following diagnoses:
      1. Low back pain
      2. Osteoarthritis
      3. Hip or knee pain
      4. Fibromyalgia
   2. Excludes:
      1. Patients under 18 years of age
      2. Patients experiencing cancer-related pain
      3. Patients receiving pain management as part of palliative care
2. Description of the review cycle (e.g., when, whom, review of what)
   1. Reporting Workbench Report will be in the **Outpatient Physician Home** dashboard *under Favorite and Subscribed Reports*
   2. Clinician will regularly (e.g., initially weekly):
      1. Review the Reporting Workbench Report (also have ability to link to patient’s chart)
      2. Add appropriate patient(s) to the [PROJECT NAME] program via a modifier, in bulk or via a registry activity (or similar)
      3. Indicate patients deemed not appropriate for [PROJECT NAME] via a modifier or via a bulk tool
      4. **Send [EHR Patient Portal] message to patient(s) via bulk action**
   3. Patients added to the [PROJECT NAME] program are subsequently included in the pain registry which can be utilized for any downstream CDS (BPAs) and downstream notifications via [EHR Patient Portal]
   4. During routine ambulatory care, BPAs will notify clinicians of a patient who is not currently on the pain registry but meets the criteria for [PROJECT NAME] inclusion
   5. Clinician indicates whether the patient is a good candidate for MyPAIN and if so, adds them to the registry, enabling the use of MyPAIN for subsequent visits by either:
      1. Add a modifier: Candidate for [PROJECT NAME] program (default); or
      2. Add a modifier: “Not candidate for [PROJECT NAME] program”
3. Invitation criteria (TBD, what do clinical team members think is **important to making a decision about inviting patients** on the registry to MyPAIN)
   1. Determine patient distribution
   2. Don’t overwhelm clinicians with patients who have received an invitation
   3. Encounter type matters (no procedures for example)
   4. Clinical criteria match (e.g., coming for a return or new patient visit)
4. Address any order issues, e.g., does some type of order need to be coupled with the MyPAIN invitation per [EHR Patient Portal] rules?
5. Brief recap of final process and determine frequency, etc.