Text and Macros for Continuous Glucose Monitoring

Macros (sometimes called auto-text, smartphrases, or dotphrases) can help save time and increase thoroughness of CGM documentation in the medical record. These examples are optimized for Epic and for Cerner PowerChart but may be modified as needed to adapt to any electronic health record (EHR).

Text and macros for CGM data review and interpretation

Epic SmartPhrase		Cerner PowerChart Auto Text	
.CGMDATA		.cgmdata	
I reviewed the patient's CGM data, which revealed the following:		I reviewed the patient's CGM data, which revealed the following:	
Average Glucose:	*** mg/dL	Average Glucose:	$_{\rm mg/dL}$
GMI:	*** 0/0	GMI:	_ %
Time In Range:	*** 0/0	Time In Range:	_ %
Time Below Range <70mg/dl:	*** 0/0	Time Below Range <70mg/dl:	_ %
Time Below Range <54mg/dl:	*** 0/0	Time Below Range <54mg/dl:	_ %
Time Above Range >180mg/dl:	*** 0/0	Time Above Range >180mg/dl:	_ %
Time Above Range >250mg/dl:	*** 0/0	Time Above Range >250mg/dl:	_ %
Glucose Variability:	*** 0/0	Glucose Variability:	_ %
Treatment adjustments/recommendations based on this CGM review and interpretation: ***.		Treatment adjustments/recommendations based on this CGM review and interpretation:	

Text and macros for the medical record and/or insurance authorization requests (modify as needed)

.CGMRECOMMENDATION

This patient has diabetes and uses insulin as part of their diabetes treatment plan, via injection and/or inhalation (at least 3 times daily if Medicare) or via insulin pump. For their safety, I have advised this patient to check their blood glucose level at least four times daily, including before meals, before bed, periodically after meals, if they believe they might be experiencing hypoglycemia, or if they are ill (not required for Medicare).

.CGMJUSTIFICATION

This patient experiences significant glycemic fluctuation despite significant efforts to optimize care, and they still experience one or more of the following: hypoglycemia, hypoglycemia unawareness, diabetic ketoacidosis, and/or HbA1c not at target. I have therefore recommended continuous glucose monitoring as part of their comprehensive diabetes treatment plan, in order to help them lower their HbA1c to target and/or maintain their HbA1c at target, to alert them to and to detect hypoglycemia, and/or to reduce hypoglycemia. Being able to use a continuous glucose monitoring system will therefore help increase their short term and long-term safety. This is consistent with the American Diabetes Association's Standards of Medical Care in Diabetes—2021 (https://care.diabetesjournals.org/content/44/Supplement 1/S85).

.CGMCONTINUATION

This patient has been using and benefiting from using a continuous glucose monitoring system. Consistent with the American Diabetes Association Standards of Medical Care in Diabetes—2022, Recommendation 7.3 (https://diabetesjournals.org/care/article/45/Supplement_1/S97/138911/7-Diabetes-Technology-Standards-of-Medical-Care-in), they should be allowed to continue to do so.

.CGMPROFESSIONAL

I have recommended professional continuous glucose monitoring for this patient in order to further elucidate glycemic patterns including hyperglycemia and/or hypoglycemia; to allow education about effects of food, activity, medication, and/or stress; and/or to serve as an adjunct or replacement for HbA1c monitoring, as HbA1c may be inaccurate in this patient. This is consistent with the American Diabetes Association's Standards of Medical Care in Diabetes—2022, Recommendation 7.17 (https://diabetesjournals.org/care/article/45/Supplement 1/S97/138911/7-Diabetes-Technology-Standards-of-Medical-Care-in).