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MSHO Action Plan – DIABETES – HEART FAILURE – HIGH BLOOD PRESSURE – BREAST CANCER

Condition	Description	Test	Explanation	Frequency	Normal Range
Diabetes	A condition where the pancreas either doesn't make insulin or enough insulin to help the body use sugar.	A1C Test	A blood test to check how well blood sugar is controlled. The result of this test is the average blood sugar within the last 3 months	Recommended every 3 months if not stable, if stable, every 6 months	Below 7, but encourage the member to talk to their doctor about their target range
		Blood Pressure test	A test in a doctors office that checks their blood pressure	Each visit	Guideline is 130/80 or below, but encourage the member to talk to their doctor about their target range.
		Cholesterol, specifically Low Density Lipoproteins (LDL)	A blood test that checks for cholesterol, specifically for the bad kind of cholesterol, "LDL".	Yearly	Below 100, but encourage the member to talk to their doctor about their target range.
		Dilated eye exam	An exam by an eye doctor to look inside the eyeball for disease. The doctor will use drops to make their pupils big.	Yearly	No blood vessel damage from diabetes
		Microalbumin test	A urine test to see if protein is being passed through their kidneys and into their urine.	Yearly	Negative for protein. (But if the member is on an ACE Inhibitor medication, they do not need a microalbumin test.)

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Condition	Description	Test	Explanation	Frequency	Normal Range
Heart Failure	Inadequacy of the heart to pump blood adequately in the body. Blood and other fluids "back up" and can cause swelling of the extremities or shortness of breath, etc.	Cholesterol, specifically Low Density Lipoproteins (LDL)	A blood test that checks for cholesterol, specifically for the bad kind of cholesterol, "LDL".	Yearly	Below 100, but encourage the member to talk to their doctor about their target range.
		Blood Pressure	A test in a doctors office that checks their blood pressure	Each visit	Guideline is 140/90 or below, but encourage the member to talk to their doctor about their target range.

Learn your ABC's for good diabetes care:

1. **A** is for A1c. If your number is 7% or higher, your blood sugar is higher than recommended by the ADA (American Diabetes Association.) Check with your doctor to see what your number should be.

2. **B** is for Blood Pressure. If your blood pressure is 130/80 mm/Hg or higher, your blood pressure is higher than recommended by the ADA. High blood pressure or (Hypertension) makes your heart work too hard. This puts you at risk for a heart attack or stroke.

3. **C** is for Cholesterol. Cholesterol and blood fats can build up and block your arteries. This increases your risk of heart disease. A blood test is used to check your cholesterol levels. The test will show the following results:

    - **Total cholesterol levels**. The lower your total cholesterol, the better. High total cholesterol increases your risk for heart disease.

    - **LDL**. stands for (low-density lipoprotein). This is otherwise known as "bad" cholesterol. The lower your LDL number, the better. A high LDL can increase your risk for heart disease.

    - **HDL**. Stands for (high-density lipoprotein). This is otherwise known as "good" cholesterol. The higher the HDL, the better. HDL helps to remove bad cholesterol from your blood. A high HDL can help lower your risk for heart disease.

- **Triglycerides**. The lower your triglycerides, the better. These are a kind of fat the body needs to store energy. High triglycerides may increase your risk for heart disease.

4. **D** is for Dilated eye exam. This should be done by an ophtomologist yearly. Drops are put in your eye to widen the pupil and allow the eye doctor to look in your eye for damage caused by diabetes.

5. **M** is for Microablumin. This urine test should be done yearly to test for proteins being passed in the urine. You might not need this test if you are on certain heart medications. Ask your doctor if you should have this test done.

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Examples Of Commonly Prescribed Diabetes Medication

(Note: the following list are just a few examples and does not include all diabetes medication)

Oral Antidiabetics **:** Glipizide (Glucotrol), Glyburide, Glimipride (Amaryl), Acarbose, Miglitol, Sitagliptin, Prandin, Starlix, Actos, Avandia
Glucagon **:** Glucagon-Like (Exanatide Injection)- Byetta, Detrimer
Metformin **:** Fortamet, Glumetza, Glucophage
Combination Products **:** Avandomet, Actoplus Met, Glucovance, Metaglip, Avandaryl

Insulin	**Insulin Preparations**	**Onset of Action**	**Peak Action**	**Duration of Action**
Short-Acting	(Regular) Novolin R Humulin R	30 minutes	2-5 hours	5-8 hours
Rapid-Acting	Lispro (Humalog) Aspart (Novolog) Glulisine (Apidra)	15 minutes 15 minutes 15 minutes	30-90 minutes 1-3 hours 50-100 minutes	2-4 hours 3-5 hours 5 hours
Intermediate-Acting	NPH	1-3 hours	6-12 hours	16-24 hours
Long-Acting	Detemir (Levemir) Glargine (Lantus)	1 hour 1 hour	* No pronounced peak: small amounts of insulin are slowly released, resulting in a mostly constant concentration /time over a 24 hour period.	20 hours 24 hours
Mixtures	Humalogmix (75/25) -or- Humalogmix (50/50) Novolog mix (70/30) NPH and Regular (70/30 ; 50/50)	15 minutes 15 minutes 30 minutes	30-240 minutes 60-240 minutes 2-12 hours	16-24 hours 16-24 hours 16-24 hours

This chart from Institute for Clinical Systems Improvement (ICSI)

Class	Examples	How they work
Statins	atorvastatin (Lipitor) simvastatin (Zocor) rosuvastatin (Crestor) fluvastatin (Lescol) lovastatin (Mevacor) pravastatin (Pravachol) lovastatin (Altoprev)	Lower LDL levels by slowing cholesterol production in the liver. It also helps the liver remove cholesterol from the blood. May lower triglycerides. May slightly raise HDL.

Common Cholesterol Medications:

Bile Acid Sequestrants	colestipol (Colestid) colesevelam (WelChol) cholestyramine (Questran)	Lowers LDL levels by keeping cholesterol in the intestines so it can be removed by the body in the stool.
Nicotinic Acid	Niacor Niaspan	Lowers triglycerides and LDL levels. Raises HDL levels.
Fibrates	gemfibrozil (Lopid) fenofibrate (TriCor) fenofibrate (Lofibra)	Lowers triglycerides by decreasing production and removing them from the blood. May raise HDL levels.
Cholesterol absorption inhibitors	ezetimibe (Zetia)	Lowers LDL. Slightly decreases triglycerides. Slightly increases HDL.
Combo cholesterol absorption inhibitor & Statin	ezetimibe/simvastatin (Vytorin)	Lowers LDL and triglycerides. Increases HDL.

Heart Failure and high blood pressure care:

Blood Pressure. If your blood pressure is 140/90 mm/Hg or higher, your blood pressure is higher than recommended by the American Heart Association. High blood pressure or (hypertension) makes your heart work too hard. This puts you at risk for a heart attack or stroke.

Cholesterol. Cholesterol and blood fats can build up and block your arteries. This increases your risk of heart disease. A blood test is used to check your cholesterol levels. The test will show the following results:

- **Total cholesterol levels**. The lower your total cholesterol, the better. High total cholesterol increases your risk for heart disease. A good goal is to have your cholesterol below 200. Talk with your doctor about your target total cholesterol.

- **LDL**. stands for (low-density lipoprotein). This is otherwise known as "bad" cholesterol. The lower your LDL number, the better. A high LDL can increase your risk for heart disease. A good goal is to have an LDL below 100. Talk with your doctor about your target LDL.

- **HDL**. Stands for (high-density lipoprotein). This is otherwise known as "good" cholesterol. The higher the HDL, the better. HDL helps to remove bad cholesterol from your blood. A high HDL can help lower your risk for heart disease.

- **Triglycerides**. The lower your triglycerides, the better. These are a kind of fat the body needs to store energy. High triglycerides may increase your risk for heart disease.

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Common Heart Failure Medications:

Class	Examples	How they work
Diuretics	**Bumetanide (**Bumex) **Furosemide (**Lasix) **Hydrochlorthiazide** (HCTZ) **indapamide** **metolazone** **torsemide**	May also be called "water pills." They keep excess fluid from collecting in your body. Diuretics make your body lose minerals such as potassium and magnesium. Your provider will monitor this with regular blood tests and may prescribe supplements of these minerals.
ACE Inhibitors	**benazepril** **captopril** (Capoten) **enalapril** (Vasotec) **fosinopril** **lisinopril** (Prinivil) **moexipril** **quinapril** **ramipril** **trandolapril** **aceon** (perindopril)	. Make it easier for your heart to work by opening your arteries and lowering your blood pressure.
Beta-blockers	**acebutolol** **atenolol** **betaxolol** **bisoprolol** **carvedilol** (Coreg) **metoprolol** (Toprol XL) **nadolol** **sotalol** **timolol** **cartrol** (carteolol)	Make it easier for the heart to work by slowing the heart rate and lowering blood pressure. They may also prevent abnormal heart rhythms.
ARBs	candesartan **(Atacand)** Irbesartan (**Avapro)** losartan **(Cozaar)** Valsartan **(Diovan)** telmisartan **(Micardis)** eprosartan **(Teveten)**	Same as ACE inhibitors. May be taken when you can't tolerate an Ace inhibitor due to side effects.
Digitalis	**digoxin**	Strengthens the force of your heart's contraction.

Class	Examples	How they work
Aldosterone antagonists	**spironolactone** eplerenone (**Inspira)**	Act like diuretics, but also have additional effects that help the heart work easier.

Common Hypertension Medications:

Class	Examples	How they work
ACE Inhibitors	**See above**	See above
Beta-blockers	**See above**	See above
ARBs	**See above**	See above
Diuretics	**See above**	See above
Potassium-sparing diuretics	amiloride (Midamor) spironolactone (Aldactone) triamterene (Dyrenium)	Removes excess fluid without removing the potassium in your body.
Alpha-blockers	doxazosin mesylate-(Cardura) prazosin hydrochloride- (Minipress) terazosin hydrochloride-(Hytrin)	Impoves blood flow and lowers blood pressure **Can increase or decrease effects of other medications. Tell your doctor if you are taking: beta blockers, calcium channel blocker or erectile dysfunction medication before taking an Alpha blocker.**
Combined alpha and beta-blockers	carvedilol (Coreg) labetolol hydrochloride-(Normodyne, Trandate)	Improves blood flow, lowers blood pressure. Slows heart rate, lowers blood pressure. Caution: This medication can increase or decrease effects of other medication. Consult your doctor if you are taking a calcium channel blocker or erectile dysfunction medication along with this combined Alpha and Beta blocker.
Calcium Channel Blockers	amlodipine (Norvasc) diltiazem hydrochloride-(Cardizem, Dilacor, Tiazac) felodipine (Plendil) isradipine (DynaCirc) nicardipine (Cardene) nifedipine (Adalat, Procardia)	Also known as “calcium antagonists,” interrupt the movement of calcium into heart and vessel cells. Used to treat high blood pressure, angina (chest pain), and some abnormal heart rhythms.

Class	Examples	How they work
	nisoldipine (Sular) verapamil hydrochloride- (Calan SR, Covera HS, Isoptin SR ,Verelan)	

Breast Cancer Information

Condition	Description	Test	Explanation	Frequency
Breast Cancer Screening.	Breast Cancer Screening means checking a woman's breasts for cancer before there are signs or symptoms of the disease. Three main tests are used to screen the breasts for cancer: Mammogram, Clinical breast exam, and self breast exam.	Mammogram	A mammogram is an X-ray of the breast. Mammograms are the best method to detect breast cancer early when it is easier to treat and before it is big enough to feel or cause symptoms.	Women between the ages of 40-75 should have a mammogram every one to two years.
		Clinical breast exam	A clinical breast exam is an examination by a doctor or nurse, who uses his or her hands to feel for lumps or other changes.	A clinical breast examination may be part of a woman's regular checkup. Women should talk with their health professional about how often they need a breast examination.
		Breast self-exam	A breast self-exam is when you check your own breasts for lumps, changes in size or shape of the breast, or any other changes in the breasts or underarm (armpit).	Women are encouraged to conduct a self-breast exam on a monthly basis.

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Breast Cancer Screening Talking Points:

Breast cancer is the most common cancer for women in the United States and the second leading cause of cancer deaths. Early detection increases the chances of successful treatment. UCare encourages women to have regular mammograms after age 40.

Experts say that getting regular mammograms might be one of the best methods for spotting breast cancer in the early stages. These X-rays can detect a tumor up to two years before you might feel a lump.

Women are encouraged to call their doctor's office to schedule an appointment for a mammogram, and to discuss the need for clinical breast exam. Women are encouraged to conduct a breast self exam on a monthly basis, and to contact their doctor if they feel any lumps.