

Provider Documentation: COPD & Asthma

Documentation Tips & Best Practices

Did you know that complete documentation of COPD and asthma can help identify patients for disease management programs?

Documentation components necessary to capture the severity of illness of your patients with COPD, asthma, and other respiratory conditions:

- Any relationship between COPD, bronchitis, and asthma
- Type of bronchitis (acute, chronic, asthmatic, etc.)
- Severity of asthma (mild, moderate, severe)
- Frequency of asthma (intermittent, persistent)
- Be sure to note (if applicable):
 - o Respiratory infection
 - o Hypoxia, hypercapnia, hypoxemia, or respiratory failure
 - o Status asthmaticus
 - o Tobacco use or dependence
 - o History of tobacco use or secondhand exposure
 - o Use of oxygen

Utilize MEAT (Monitor, Evaluate, Assess, Treat) to specifically address patient conditions:

Monitor	Evaluate	Assess	Treat
Symptoms Disease progression Disease regression Referencing labs/tests	Test results Medication effectiveness Response to treatment Physical exam findings	Test ordered Counseling Record review Discussion	Medication Therapies Referral
MEAT Examples: COPD & Asthma			
Exacerbation of moderate persistent asthma – Patient is improving; we will continue monitoring.	Asthma with COPD - Patient relief from rapid- acting bronchodilator treatment.	COPD with chronic bronchitis – Discussed smoking cessation and reviewed breathing exercises.	Severe persistent asthma, uncomplicated – Continue current inhaler therapy and follow up with Dr. X for further management.