

March 2010: The Thriving Practice

Usable EMRs-And You



KJ Lee, MD
Member, Health Informatics Committee
Past AAO-HNS/F President

The public option. Congressional Budget Office cost estimates. "The trigger." Lieberman's pivotal position. The Massachusetts Senate race. For all the buzz-words, punditry, and political wrangling within the healthcare reform debate, one thing remains certain: Medicine is going digital. It has bipartisan, conservative, and liberal support. The Administration has set the mandates and the timeframe, and the American Recovery and Reinvestment Act has provided both a general framework and the financial incentive for the transition to electronic medical records (EMRs). This is a sea-change in the medical industry.

Like a grand bazaar, there are currently hundreds of EMR vendors selling a vast array of products utilizing myriad technologies. Choosing an EMR system is an overwhelming prospect for most physicians. Despite the uncertainty of which EMR to implement, all doctors want the same thing-to be able to continue providing quality care to patients without having to relearn

how to practice medicine.

The knock on many good medical software systems is that they force doctors to radically alter their workflow. For an EMR to be an asset to its users, it must mesh with their existing routine. It must be simple to learn, functional, usable, and affordable. When a physician is considering the affordability of an EMR, he or she must carefully evaluate the total cost, not just monthly subscription fees and start-up costs. The hidden costs include the length of training, downtime, and ongoing inefficiency that make you less productive. With so many electronic medical record systems on the market, it is often difficult to distinguish one product from its competitors.

As technology surges forward, greater disparity grows between software developers and end-users. Physicians must be involved in the development of a user-friendly EMR that fulfills "meaningful use." The result of a physician's work with software engineers should be a unique and special EMR product that not only thinks like a doctor, but is also designed to follow the workflow he/she learned in medical school. An EMR is a tool that must speak to physicians in their own language. Even certifying bodies like the Certification Commission for Health Information Technology (CCHIT) and Administration experts believe that EMR usability needs to be emphasized.

Physicians who were early adopters of desktop technology in the examining room had to alter their patient interaction process at the expense of both time and bedside manner. With the advent of wireless tablet computers, we must search for ways to take the traditional patient visit digital without disrupting our encounter with the patient, allowing us to concentrate on the patient and maintain eye contact throughout the history and physical.

You should look for the following features. Practically, an EMR must be easy enough to use that even without previous computer knowledge, physicians learn to use it quickly. When you enter the room, you should be able to open the patient's chart just like a paper chart, and have the previous progress or encounter notes or H&P appear instantly. You can use the tablet to confirm the patient's identity by checking the date of birth and clarifying their current medications, along with allergies to medications, if they exist. With a simple click, you should be able to read and edit the Review of Systems. Pending tests should be visible, and if the test result is available, it can be accessed immediately.

It should be easy to record the present illness and physical findings by writing on the tablet with a stylus pen, just like an ink pen. For those who prefer typing, a keyboard should be available, in addition to hand-writing and voice recognition. Unique digital progress notes should be available in drop-down templates. This feature should be a powerful platform that is flexible, and can be customized to an individual doctor's style of practice and fulfill all future mandates, such as e-prescription. With a physician-friendly EMR, doctors can continue to practice medicine exactly as they have done for years, with increased efficiency and minimized errors.

EMRs should be nimble. They should be web-based, with wireless or hard-wired technology, to record and retrieve patient medical records within seconds, anytime, anywhere that internet service exists. Maintaining HIPAA compliance, high-level data encryption, and multilayer security should be musts for any EMR in consideration. An affordable EMR solution can save a

practice 20 percent of its staff overhead by eliminating searching for and re-filing paper charts, can reduce 10 percent of the floor space needed to store charts, and reduce transcription costs.

With that much time and money on the line, doctors should be looking for an EMR that makes technology work for them and allows them to practice their craft unfettered. It's time to do your homework. When "Pay for Performance" is implemented, will you be ready? Are you and your new EMR ready for "meaningful use?" Stay tuned.

Dr. Lee is Healthcare Advisor to Congressional leadership. He offers this personal perspective about EMRs.