

Talk Back

Capitalism works

Thank you for printing the article by Craig Wax, DO, ["The free market incentive model," From the Board, Dec. 18, 2009]. Though not a novel idea, it is a well-proven one. It is the model which provides incentives for the goals we all wish to accomplish: lower costs, more accessibility, and better quality. It benefits physicians and patients, rich and poor. Why are so few considering this approach?

PAUL J DIBBLE, MD
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A word from the chorus

I have one word for Dr. Wax . . . Amen.

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What to look for in an EMR

Choosing and adopting an EMR is overwhelming. All doctors want to continue providing quality care to patients without having to relearn how to practice medicine.

The knock on many good medical software applications is that they force the doctor to radically alter workflow. An EMR must mesh with existing routine. It must be simple to learn, functional, usable, and affordable. A physician must evaluate the "total" cost, not just monthly subscription fees and start-up costs. Hidden costs include the length of training, downtime, and ongoing inefficiency. As technology surges, a



"PHYSICIANS MUST BE INVOLVED IN THE DEVELOPMENT OF A USER-FRIENDLY EMR THAT FULFILLS 'MEANINGFUL USE.'"

greater dissonance grows between the software developer and the end-user. 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 product that not only thinks like a doctor, but follows the physician's workflow as trained in medical school.

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 take the traditional patient visit digital without disrupting the encounter, allowing the physician to concentrate on the patient and

maintain eye contact throughout.

Look for the following features: An EMR must be easy enough to use that even physicians without previous computer knowledge learn to use it quickly. When the physician enters the room he should be able to open the patient's chart and have the previous progress note or encounter note appear instantly. With a simple click the Review of Systems should be able to be read and edited. Pending tests should be visible and if the test result

is available, it can be accessed immediately. It should be easy to record by writing on the tablet with a stylus pen. A keyboard should be available in addition to voice and handwrit-

ing recognition. Unique digital progress notes should be available in drop down templates. This feature should be a powerful platform that can be customized to each doctor's style of practice and to fulfill all future mandates, such as e-prescription.

EMRs should be nimble; a web based, 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 multi-layer security are musts. Doctors should be looking for an EMR that makes technology work for them while allowing them to practice unfettered.

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