Electronic Medical Records - Having It Your Way

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ELECTRONIC MEDICAL RECORDS

HAVING IT YOUR WAY

Vikas Singh
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Introduction

- Three physicians who were early EMR adopters and who remain vocal EMR advocates

- It gives us insight about what the physicians think about EMR and its adoption, benefits, most desired features and challenges faced
Rationale for choosing EMR

• Head of residency program for Family Practice and Ambulatory Care Clinics
• “They don’t want to be restricted by outside influences.”
• “We wanted software that adapted to the physician and how he practices medicine, not the other way around,”

“We wanted software that adapted to the physician and how he practices medicine.”
— David Bauer, M.D.
Memorial Hermann Hospital Systems
Houston
Rationale for choosing EMR

• “Some products force docs to document in a particular pattern or to think in a particular pattern, and this changes the way doctors would choose to practice. But this product is very flexible and does not impose structure on the physician.”

• “This product was developed by physicians, and they built this product based on medical practice, not computer science.”

• “We wanted not only to put data into the repository, but also to extract it back out.”

• Selected GE’s Logician EMR, which is now known as Centricity Physician Office EMR.
Rationale for choosing EMR

- Internist and founder of the clinic
- Developed by a physician or clinical staff
- Patients want us to spend more time with them, and doctors want to spend more time with patients

“An EMR provides information at the point of care, which is what the doctor needs for efficiency in the exam room.”
— Alan Tannenbaum, M.D.
Primary Care Associates
Cape Coral, Fla.
Rationale for choosing EMR

• A lot of what we do is repetitive, so EMRs allow doctors to become more efficient.
• An EMR provides information at the point of care, which is what the doctor needs for efficiency in the exam room.
• He wanted affordability, a system that runs in windows environment, and has a decent support from the vendor.
• He selected Charting Plus from Medicorp.
Rationale for choosing EMR

His concerns were:
• Being able to customize an EMR while containing costs as his is a multi-specialty practice.
• Savings in the cost of chart, difficulties in retrieval of chart when needed and other efficiencies obtained.
Rationale for choosing EMR

• He settled for e-M.D.’s Top Chart EMR

• Everything developed by the vendor is first tested in the company’s own medical practice. “Products are physician-developed and physician-tested,” he says
Early Adoption

David Bauer, M.D.
• began looking for the right software about 8 to 9 years ago
• evaluated about dozen different systems before settling for Centricity Physician Office EMR

Allen Tannenbaum, M.D
• started using EMR about five years ago
• quirky first generation EMR which was not flexible and didn’t had features that these physician’s wanted
Early Adoption

Allen Tannenbaum, M.D.

- Spent around $18,000 and 14 months time visiting different clinics and physicians offices and evaluating features of at least 40 different EMR’s
- He finally bought Charting Plus from Medicorp

Martin Basaldua, M.D.

- Began looking for it since 1980
- First one he bought was a green screen based software for $6000
Early Adoption

Martin Basaldua, M.D.

• Switched to a FOXPRO based system and integrated it with his Wi-Fi system to develop his own quasi-EMR
• Finally settled for e-M.D.’s product
• “We continued to be frustrated that the software just didn’t flow the way it should when a doctor sees a patient. The doctor always had to change the way he made progress notes to make the software work well.”
Evaluating Features

- Simulates actual practice, in other words, “Ability to get documentation into the EMR system in a manner he says flows naturally with a physician’s work style”.

- Ability to customize

- Options for input

- Ability to be integrated with other systems such as billing and administrative.

- Ability to incorporate digital images also in the chart.

- Modular system
Return on Investment

- Money saved by not having to create new paper charts, pulling up charts and storage of paper charts
- Saving in dictation cost and transcription charges
- Increase in collections because of efficient documentation and billing and coding
- Manpower efficiency – extra FTE was employed for other work
- Lack of fear of an audit because of complete documentation and the penalties associated with it.
Lessons Learned

• Physicians and other clinical staff are the one who are going to implement the system, so their buy-in is imperative for successful implementation.

• We have to anticipate and prepare for the challenges faced during the whole process.

• Combating the perception that it’s all work and no benefits and getting people to hang in until they see the value played out.

• Affordability and support.

• System integration.
Questions?