



Electronic Medical Record Systems are a Big Plus



By David J. Manske, MD

I READ WITH INTEREST Dr. Eduardo Bermudez's essay in the January/February 2007 issue of Sierra Sacramento Valley Medicine. I find myself drawn to make some comments on my own experiences and observations with the EMR.

Over the last 18 months the advent of our comprehensive EMR has been an interesting adventure into the 21st century, an adventure that seems to have challenged us all and made us take a hard look at how we relate and adapt to a changing world. It seems to me this experience has distinguished our medical group into two groups of people who deal with change in dramatically different ways. Perhaps this speaks to something deeper in the human psyche.

I am an orthopaedic surgeon and have practiced at the Kaiser-Permanente South Sacramento Medical Center for nearly 21 years. As a consequence of my tenure, I have a very busy surgical and busier office practice, with many returning customers and many new patients every week. Patients come to see me from a variety of Kaiser facilities scattered around the Sacramento Valley, as well as from the Bay area.

In the 20th century these people often came unaccompanied by any charts or X-rays, these records remaining at their home facility altogether or arriving the day after the consultation. X-rays needed to be repeated at the expense of more radiation exposure for the patient and higher health care costs. Prior procedures or work-up had to be surmised, guessed at or repeated, with the same problems of patient inconvenience and expense.

Now I have complete access to the entire patient chart from South Sacramento and indeed the entire Sacramento Valley service area. As more facilities come online these records will be available from any of our Northern California facilities. This can only dramatically improve our service to our patients, improving their satisfaction and reducing the costs of providing their care. And I am less stressed and far happier!

My typical office workflow has become much more efficient and I have found the computer to be a minimal hindrance to my patient-provider interaction. In fact, I think that the patients' experience has been dramatically improved by the presence of the computer. I have situated my exam rooms so that eye contact is not lost, I do my post-visit charting in my office after each visit, and I am able to quickly pull up patient lab results and X-rays, for my review and the patient's edification, with no more inefficient thumbing through a paper chart or digging through a bulky X-ray jacket. My patients are usually very impressed!

Our Secure Messaging feature allows me to communicate with my patients in a very timely fashion, much preferred to the old-fashioned phone call method, when we often might play "phone tag" for days. I can personally answer their questions in as much or as little detail as needed, for review at their convenience. Many of my patients are delighted to have this service offered and I encourage all to sign up for this access. Postop phone visits are easily made and just as easily documented, again to the mutual satisfaction of patient and provider.

The EMR helps me manage my hospital patients in a much more timely and efficient manner as well. Upon completion of rounds I can finish my documentation on the spot, at one of many available terminals or, if late for the OR, I can finish this in the operating room as my next patient goes off to sleep. This is very nice. I have designed many of my own "order sets" and this has made the process of writing orders much faster for me.

My time stress has gone down many-fold. No longer do I have to squint to decipher hand-written consultation notes when medical consultation is needed. Illegibility has become an anachronism! Our system makes it very difficult to make medication errors.

All of these changes help me and tremendously benefit my patients. As I am writing this, I have gotten a call from the nurse caring for one of my hip replacement patients. I find it necessary to give her an order. In the 20th century, I would likely have given a verbal order and then had to hunt down the paper chart later, to sign that order within the regulatory 48 hours.

But now I have just opened the patient's hospital chart, in my office, entered the order, and electronically signed it, with just a few mouse clicks. The patient gets good care, all of the regulatory bases are covered and I am back to my computer to continue this essay!

When on-call from home, I can review X-rays taken in the ED, schedule surgery for a patient with a hip fracture and have the whole "ball rolling" before I even head out for the hospital. If necessary, I can check on my patient's progress from the same home computer. (And while speaking of home access, I find that this is very helpful when on call but try to minimize my use of the computer otherwise, for the benefit of my time with my family. I have become so efficient that I very rarely have homework, realizing that some things can wait until the next day.)

Now, I don't mean to imply that all is perfect. There are glitches, as with any computer application. There are the occasional down times and the system still needs some tweaking to improve user friendliness - but all of these problems are being addressed by lots of very smart people and I look forward to continued improvement in the product. I can handle the little problems, realize that they are temporary and move on. This has not been the case for some of my colleagues.

As the system has rolled out, there have been those among us who have struggled, a struggle of their own making I fear. Not unlike Eeyore, the downcast donkey in the Pooh stories, there are some who, from the very beginning, have intoned, "We're not going to make it, it's not going to work," and these poor unfortunates have indeed had a tough time of it. Every little issue becomes a mountain, convincing them again that the system is doomed to failure, a self-fulfilling prophesy.

Change in any shape seems to cause them great consternation. As an example, one of our surgeons stormed into the office of our OR assistant manager, red in the face that the cautery machines had been changed. "I can't handle change!" he snarled. She calmly reminded him that he'd been married three times, that he could indeed handle change! Mouth open, he retreated, perhaps to re-evaluate his change management style.

I am a firm believer that we create our own reality. Call it karma or the "glass is always half full," but I have tried to approach the EMR as a new adventure, one destined to make things better for all of us. And I have struggled very little. The system is the same for all of us, we have all had the same problems, but I have a different way of approaching change that seems to work well for me. I can come to work with a smile on my face and really mean it!

The 21st century has not brought us flying cars (at least not yet!) but the EMR will be seen to be a great stride forward for health care, I am convinced. I am very proud to belong to an organization that has made this such a priority, and I'd like to personally thank all of those hard working people for bringing this system to us and for their ongoing efforts to make it always better. I have and will continue to benefit from the EMR, but

more importantly, this is even more the case for my patients!

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