



## The Top Five Things Your EMR Should Do (and three things it shouldn't)

— Michael Sherling, MD, MBA, CMO *Modernizing Medicine*

*"It's a jungle out there. Disorder and confusion everywhere...Hey, who's in charge here?"*—Theme Song from Monk

A quick Google search for EMR companies will find more than 100 of them, each with its own list of promises and enticements. It soon becomes overwhelming to try to figure out which ones to trial, let alone purchase. And once that is done, how do we determine which system will live up to its promises? It is the rare physician who has not been burned by an EMR system that doesn't do all it was supposed to. At the very least, we all know someone who has been tortured by an EMR system and that has made us all more gun-shy.

The answer for many has been to give up on EMRs and stick with paper. According to a recent New York Times article, "less than 30 percent of physicians nationwide now use digital records." (Lohr, S. "Carrots, Sticks and Digital Health Records." The New York Times, Feb 26, 2011). But, in less than four years, the costs of relying on paper will skyrocket as the government penalizes those physicians still using paper charts.

So, how to separate the good, the bad and the useless and find the right EMR? How do we not get "wowed" by fancy graphics and slick salespeople? The answer lies in making the decision to buy an EMR as we would for buying a car. Yes, the design of the dashboard is nice and free XM radio is fun, but if the engine isn't good, the rest is unimportant. Analogously, there are five parts that make up the "engine" of an electronic medical record. Without these, your EMR just won't perform as you need it to.

### 1. Save Time

"Doctors don't want to become clerks," says Dr. Isaac Kohane, a health technology specialist at the Harvard

Medical School, quoted recently in the New York Times (Lohr, S. "Carrots, Sticks and Digital Health Records." The New York Times, Feb 26, 2011). It is not as if doctors can see fewer patients as reimbursements decrease. Therefore, EMRs must save time. When previewing an EMR, ask the salesperson directly how long a note takes to generate on the system. Watch him or her do it. Then ask to do it yourself. Time the salesperson writing the note. Then time yourself. The truth is probably somewhere in between since the salesperson is expert at generating a note on their system and it would probably take you many months on the system to become as fast as he or she is. Multiply the minutes it takes by the number of patients you see a day. If a note takes you 3 minutes to write and you see 40 patients a day, documentation of just the notes will add 2 hours to your day. Unless you already dictate very long notes, that's just too much time spent on documentation.

### 2. Be Automatically Customizable

Customization is the new buzz word in the world of EMRs. Rare is the physician who will come across an EMR booth at a trade show and not hear that he or she is able to "customize" preset templates. And, of course, customization is a good thing. You do not practice exactly like your mentors or your partners do. But remember that the system should customize to you, you should not actively have to customize your system—a process that could take weeks or months to do. Software now has the ability to remember how you like to do things and do them that way every time (though you can always vary from the norms that you've set). There should be no need for you to type it in for the system to remember. It should be an automatic function. This is also important, because as medicine changes and your practice changes, the system should adapt to you, without you having to reprogram it. Just as Dr. Kohane noted that doctors shouldn't

## The Top Five Things Your EMR Should Do (Cont.)

become clerks, we shouldn't have to become computer programmers either.

### 3. Act As A Reference

The greatest way computers may have influenced medical practice is in acting as a wonderful reference for physicians. Combing the medical literature has now become as simple as executing a few keystrokes. It therefore should follow that your EMR should have a fair bit of medical knowledge embedded within it. Prescribing Dapsone? The EMR should know to check a G6PD level. Sure you know it too, but it never hurts to have a back up on a busy day. Seeing a blistering disorder? Why not have a differential at your fingertips? Software can be quite a powerful tool in aiding the diagnostician if properly harnessed.

### 4. Improve Doctor-Patient Communication

Perhaps your patient speaks broken English and perfect Mandarin. Your Mandarin is a bit rusty and no one in the office is a native speaker. Perhaps they bring a relative with them and you are left to trust that person to translate your questions and the patient's answers though they have no medical or translation background. It is a recipe for misinformation and even misdiagnosis. As long as your patient can read in their native language, an EMR should be able to translate their history for you, provided they can select from a pick-list. There is no middleman to confuse the issue or embarrass the patient into telling less than the full story. But even if both you and your patient speak the same language perfectly, it is not uncommon for a patient to leave the office and promptly forget what you have told them and why they should follow your treatment plan. That's where patient handouts are key and an EMR should generate a customizable treatment plan in simple words for your patient. After all, you've already input all the information in doctor-ease. The EMR should be able to quickly translate it into patient-ease without you having to spend any extra time doing it.

### 5. Put Everything In One Place

This is something all EMRs claim to do, some just do it better than others. Everything you need from pathology to previous notes should be on the screen ready for you. The more screens you have to toggle through, the more time and mental energy it takes to complete a note and a visit. Storing certain data is something the government has mandated all EMRs do in order to become certified. How that data is presented is up to the individual system. Preferably, everything you need should be on one screen and certainly not more than one click away.

After you've gone through your chosen EMR demonstration and found the top five things the system should do to be to your liking, now you have to beware of the three main pitfalls of even the most impressive systems.

### 1. The System Wastes Time

Even if the note is generated quickly, beware of other time sinks, such as prescription writing software and multiple pop-up screens which can render the prettiest system virtually useless. Make sure that pop-ups are kept to a minimum and anything that can be automated is—from filling in prescriptions to helping with coding. Minutes count and anything that slows you down takes away from your time with patients and your family. Remember to ask about the other features of the EMR and include that into your time calculations.

### 2. Distracts You From Your Patient

The biggest complaint patients have about EMRs is that when their doctors use the EMR, they forget to look at them. Bad form for some physicians, disastrous for dermatologists. As visual physicians, looking away from the patient is never a good use of our time. Make sure that your system is portable and allows you to have a medical assistant do much of the data entry or keeps it simple enough for you to keep your attention where it should be—on the patient.

### 3. Introduces Errors

EMRs are supposed to be the key to preventing medical errors or so they are being touted. But as the above cited New York Times article noted and many of us have already figured out, "...complex technology — designed for big health groups, not small practices — could well increase medical mistakes...." Simplicity in design is very important as is the ability to be more than a fancy word processing device. Copy-and-paste errors are common in documentation as is a template that automatically inserts a normal exam where there may not have been one. Make sure your EMR is fast, but also that it accurately records what you are doing each time as a unique event.

After you have made sure that the your chosen EMR meets the aforementioned criteria, just like finding the right car, you will know you have found the right system when it feels right to you. And if it doesn't feel right, don't buy it. After all, you will be spending more time with your electronic medical record system than you will with any automobile you will ever own.