

# Tap, Tap, Tap to Better Patient Documentation

**Solo practice family physician on Nantucket Island uses an EMR to improve documenting patient visits and increase online communication with patients.**

*By Kathleen Waton, Associate Editor*

Dr. Greg Hinson is in the minority. He's among the meager 13 percent of physicians in solo practice who use electronic medical records, according to a recent Commonwealth Fund survey. But Hinson is comfortable being apart from the madding crowd. He knew electronic record keeping would be the ticket to efficiencies in his practice so he traded in his hodgepodge of inadequate record-keeping techniques, said hello to an EMR geared to small and midsize practices and is engaging patients in a Web portal that puts them in the driver's seat of their healthcare.

In August 2001, Hinson moved from a three-doctor office in rural Georgia to take over a similar size practice on Nantucket Island, Mass.—a community with a year-round population of 10,000 that quadruples the number of residents in the summer. Hinson supplemented his predecessor's handwritten notes and paper charts with notes generated by an early, limited EMR. When the vendor phased out the EMR a couple of months after Hinson moved to Nantucket, he experimented with a mixture of handwritten notes, homemade MS Word templates, macros, checklists and dictation.

"If you opened my paper charts, you'd see notes generated in about four or five different ways," says Hinson. "I was spending too much time documenting and way too much time hunting for paper charts. It was very confusing."

*Photo courtesy of Greg Hinson, M.D.*

In 2003, Hinson began searching the Internet for EMR options that would allow him to not only improve documentation, but also involve patients more in their healthcare. After seeing several vendor names pop up repeatedly on physician-driven forums like [physicianonline.com](http://physicianonline.com) and [emrupdate.com](http://emrupdate.com), he contacted those vendors, participating in a dozen online demonstrations.

When Hinson would describe his staff size—a nurse practitioner, medical assistant and receptionist—and patient volume (approximately 45 a day), vendors would stop Hinson midsentence and say, "You can't afford us." The market was not friendly to small practices of fewer than 10 doctors, Hinson contends, and instead catered to medium and large physician practices of 40 to 50 docs who could justify the time and expense of customizing a product. Hinson soldiered on and after a year, narrowed his choice down to two vendors.



## User Forum Helps Decision

After conducting site visits to see their software packages in action, in March 2004, Hinson chose Westborough, Mass.-based eClinicalWorks' EMR because it met the broad needs of a family physician. Since Hinson has a special interest in childbirth, he likes that it documents pregnancy well and provides everything from health maintenance alerts to pediatric features like growth charts. The software is Internet based, easy to customize, and it was the lowest priced of all the fully integrated EMR/PM packages he considered. Plus, it didn't require "a thousand mouse clicks to produce a cookie-cutter note that no one can read."

Before signing the contract, however, Hinson wanted to hear more from users of the system, so he started his own Internet forum, [www.ecwusers.com](http://www.ecwusers.com)—without telling the vendor. "I learned users were very pleased with the company and their support," Hinson says. "I did not hear of anyone who bought the software and gave up on it." After a few weeks, Hinson advised eClinicalWorks of his online forum and invited them to participate. "Initially, I think they were nervous about a group of people talking on the Internet about the pros and cons of their product," Hinson says, but eventually eClinicalWorks staff joined in the discussions. Today, the forum has more than 1,300 members and is a "form of non-urgent tech support" for users.

Bolstered by input from users, Hinson signed the contract for eClinicalWorks' EMR in April 2004. The product is an electronic suite of front-office functions (appointment scheduling, copay collection and registration), mid-office functions (clinical documentation, lab ordering and e-prescribing) and back-office practice management (coding and billing). Most of the vendor's clients send claims directly from the EMR to the insurance companies. Hinson, however, chose, at least for now, to e-mail the superbill that the EMR generates to the billing company he hired four years ago.

eClinicalWeb, the ASP (application service provider) version of eClinicalWorks, provides remote access for physicians to access patient charts and other data and a secure Web portal for patients to e-mail Hinson, view lab results and schedule appointments.

Between signing the contract and implementing the software, Hinson bought a Windows server with one gigabyte of RAM, two Toshiba M200 tablet PCs for himself and his nurse practitioner and a desktop PC for the front office.

## Smooth Implementation

Implementation in May was "pretty easy," says Hinson. Staff in his practice had scanned paper charts into digital files even before he chose a vendor and eClinicalWorks migrated the rest of the data from the billing company to build a new database. Three days before training began, eClinicalWorks remotely accessed the computers in Hinson's office and installed the software. Hinson chose to license the EMR and have it installed, but it can also be hosted from a data center.



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The week before go-live, the medical practice closed Monday and Tuesday for full-time training, and Hinson and the nurse practitioner saw a "handful" of patients without set appointments Wednesday through Friday to test drive the EMR. On Monday, May 10, 2004, the office went live with their new EMR, seeing the normal number of patients and ending the day on schedule.

Initially, staff was nervous about the new automation, especially the medical assistant who had very little computer experience. "When the staff began to see day-to-day benefits," Hinson says, "they became more enthusiastic." Prescription refills, for instance, are a snap. Before automation, the

receptionist took a message when a patient called for a prescription refill, hunted for the patient chart, clipped the note to the front of the chart and put it in a pile for Hinson to write the prescription and give it to the medical assistant, who would call the pharmacy. Now patient requests for a prescription refill are input directly into the system, Hinson is alerted on his tablet PC and with two or three clicks on the computer, he sends the refill directly to the pharmacy. The amount of time per message “decreased tremendously,” Hinson says.

Linked to his EMR system, the tablet brings “a whole level of resources and references into the exam room that I think patients appreciate,” Hinson says. Patient records are right at his fingertips. “Tap, tap, tap and there’s a photo of their suspicious mole from last year right on the screen for comparison.” Having a wireless computer in the room provides immediate access to the Internet. Hinson can look up references on the online clinical textbook and patients can take him to a Web site they were reading to review it with him. Because everything is self-contained on his tablet, Hinson can function at home, in his office, or upstairs from his office in the 15-bed Nantucket Cottage Hospital.

### **Home Earlier**

At first it took more time to document patient visits on the computer than for Hinson to hand-write notes on paper. But within a month or two, he says he was at least as quick on the computer and “certainly documenting better.” The EMR supports the use of digital ink with the tablet PC. Hinson, however, doesn’t do as much handwriting as he’d anticipated because “I’m a fairly quick typist and I can hit the keys quicker than the tablet can recognize my handwriting.”

Hinson’s next step is to capitalize on the patient portal. “Instead of documenting notes about lab results in a record and then calling a patient to discuss them,” Hinson says “it’s a lot easier to just automatically provide those notes to patients via the Internet and have patients receive an automatic e-mail notification to log online.” Hinson has a core group of patients who are tech savvy and optimizing their use of the patient portal. But it will take time and education to wean the average patient off calling the doctor’s office “for this and that” and to become more comfortable communicating online. By automating health maintenance reminders, the patient portal should help provide better preventive health for Hinson’s patients and generate more income for his office.

Hinson has not quantified the benefits of his EMR, but says he is no longer staying an hour or two after seeing the last patient to complete charts. “When I look at my watch at the end of the day, I’m getting home earlier than I used to,” he says. With a wife, four children and two dogs waiting for him, that’s worth its weight in gold.

For more information about **eClinicalWorks’ EMR and related products**,  
[www.rsleads.com/511ht-201](http://www.rsleads.com/511ht-201)