Non-template approach to the EMR results in faster patient charting

BY JERRY ZEIDENBERG

ust when you thought there was nothing new under the sun in the EMR universe, a Los Angeles-based company is bringing a system to Canada that enables physicians to chart a medical encounter in as little as 40 seconds. According to the company, that includes an entire SOAP note – made up of Subjective and Objective observations, an Assessment and Plan, along with billing instructions and referrals, if needed.

Skeptical?

We were too. But because Infor-Med Corp. (www.infor-med.com) claims to have over 5,000 physician users of its Praxis EMR in the United States, we took it more seriously. Moreover, Praxis has now made a Canadian beachhead in Victoria, B.C., where it's used by Dr. Clayton

Reynolds – a Newfoundland-born endocrinologist who served as the long-time head of quality for three Los Angeles hospitals before moving back to Canada.

As Dr. Reynolds puts it, Praxis uses a "bass-ackward" method of inputting data, explaining that the system actually takes longer to use at first, but quickly becomes faster as you populate it with data.

That's because it works on the principle of similar cases – that most cases you see in a day are quite similar. So when you build up a body of cases, symptoms, drugs and other variables, you can use a previous encounter – already populated with many variables – as the basis for the new patient's encounter note.

When you've built up a body of cases, it's much faster to remove data from a note than to construct a wholly new note for an encounter. Instead of entering a mass of data for each patient visit, you simply recall the most similar case on the screen, and remove unnecessary items or add a few that are peculiar to the current patient. As the company points out in an online demo, "Once you enter a medication or diagnosis, you never have to enter it again."

So for example, when a patient presents with an inflamed pharynx and other symptoms, and you suspect acute pharyngitis and may prescribe erythromycin, you can tap an E into the drug section, and all cases where you previously prescribed erythromycin will come up. With another tap, you select pharyngitis, and all of these cases are highlighted. Pick one of them, preferably the 'closest encounter', and you've got the basis for the new note – of course, you can change the variables, where applicable. For instance, the current patient may have had the sore throat for three days instead of the previous patient's five days, and may have moderate inflammation rather than severe, and so on.

Infor-Med claims that as you work with the system, you can quickly bring down the time needed to complete an encounter note – from three or four minutes per patient to just 40 seconds, in a matter of weeks.

Dr. Reynolds, who also works as a tester and advisor for Infor-Med, stresses that unlike other EMRs, Praxis does not use templates. Templates require you to work through pick lists, and the pick lists are not so easy to alter. It's also time-consuming to run through these menus, and they require the physician to do the same amount of work for every encounter.

By contrast, the Praxis EMR reduces the amount of work as you go along – the more terms and keywords in the system, the company says, the faster it is to generate complete and accurate notes. Unlike templates, moreover, the Praxis EMR is said to allow physicians to work in their own way. "Templates assume there's one best way to do medicine, but medicine is as much an art as a science, and physicians all have their own way of doing medicine," says Dr. Reynolds. Instead of being forced through a pre-set list of variables in templates, you're able to create your own lists in Praxis. You can click on any symptom, test, drug or variable to bring up a list of cases, which included a particular keyword, and use the 'closest encounter' as the basis for your new assessment and care plan.

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