

Chapter 4

Electronic Health Records: Where They Are Now and Where They Need to Be

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ABSTRACT

The physician often spends far more time gazing at the screen than at the person who has made the appointment. The patient has booked with the expectation their illness or accident will receive undivided attention. Immediately there is a problem, both for the doctor and the patient. Careful medical record-keeping is one of the most important duties of a clinician. How else can a patient's history be documented, the clinical findings recorded, the provisional diagnosis entered, and the chosen treatment pathway defined? But how does the doctor maintain confidence-giving eye contact whilst doing all this? The 19th century physician, as exemplified by the famous painting of "The Doctor" by Luke Fildes in 1891, typifies the devotion to care exhibited by the committed physician. The actuality is that today's physicians display equal amounts of dedication to their work; the difference in 1891 was that there was very little available to treat the great majority of illnesses. EHR, if used to its potential, is the means of pulling all this data together and getting it right every time!

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INTRODUCTION AND BACKGROUND

Walking through our local hospital corridor recently I passed one of my colleagues, an excellent paediatrician, wheeling a suitcase filled with medical records. I held up my mobile tablet and said, “This is all you need.” His reply was predictable and encapsulates the problem medicos have in ditching their traditional paper records, “No, not for me, I’m a hands-on doctor.” What does this mean? Surely, we can be hands-on and still be advocates for electronic health records (EHRs).

The computer is often seen by patients to be taking over consultations because the doctor regularly spends more time gazing at the screen than at the person who has made the appointment. The patient has booked with the expectation their illness or accident will receive undivided attention. Immediately there is a problem, both for the doctor and the patient. Careful medical record-keeping is one of the most important duties of a clinician. How else can a patient’s history be documented, the clinical findings recorded, the provisional diagnosis entered, the investigation results be displayed and the chosen treatment pathway defined? But how does the doctor maintain confidence-giving eye contact whilst doing all this? The “Sick Woman” (Figure 1) illustrates the 17th Century physician caring for his patient (Steen, c 1663). The difference in the day of Dutch artist Jan Steen (1626-1679) was that there was very little available to treat the great majority of illnesses. Doctors today have the ability to treat their patients effectively so long as they make the right diagnosis. If not sure what they are dealing with they have the ability to access huge amounts of information to make the right call.

EHR, if used to its potential, is the means of pulling all this data together and getting it right every time! Unfortunately, all this knowledge is not being harnessed effectively and the EHR systems in use today have many shortcomings. Evolving technology and increased expectations of health workers and patients is likely to make them obsolete, with all the current problems suitably attended to. To see how this will be achieved it is necessary to look at what healthcare is now and what it will be with optimally functioning EHR systems.

When there is talk of “healthcare” this is largely a misnomer. It is actually “illness care”, apart from public health measures which have been around for over a century such as safe water supplies, vaccination, hygienic food handling and alerts at times of disease outbreaks. Worse still, it is illness care of the “snapshot” variety. Hospital admissions, office consultations, home care visits, are all “snapshots” in the ill-health of a person. What is required is effective healthcare. And, because by common usage the word healthcare is almost exclusively illness or accident care, the term will be used throughout the chapter in this context. Perhaps the best way it can be shown to be effective is to provide holistic healthcare, recording health information on every person in a community at times when they are considered to

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