Special Audio Report Transcript

Headline:	Medical Specialists Pushing for More Tailored Electronic Health Record Systems

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Text:

For years, the priority for electronic health record advocates has been achieving widespread adoption. Now that a critical mass of providers is on board, there is a growing conversation about the best ways to serve specialists. This is a special report for *iHealthBeat*, a daily news service of the California HealthCare Foundation. I'm Rachel Dornhelm.

Thomas Lee Hambrick is an obstetrician-gynecologist at OB/GYN Partners for Health in Oakland, Calif.

SFX Sound of flipping through paper medical record

Despite looking into EHR systems for the last three years, his office has decided to continue using paper files.

(Hambrick): [sound of paper record in background] "So here's our medical record here. [FADE UNDER] So we have our problem list on left-hand side and progress notes on this side."

Hambrick says the biggest roadblock to the office adopting EHRs is the cost and time involved. But the second biggest concern is that the systems they have seen aren't quite tailored to their practice.

(Hambrick): "Like for obstetrical care, the American College of Obstetrics and Gynecology has a six-page form we fill out for prenatal care. Not all of the systems offer that same form."

Hambrick says EHR systems often make it hard to view a patient's lab work alongside the other prenatal data he wants to consider. And he has privacy concerns. In his specialty, he says, women may come in and want an elective termination or may talk about having an affair during treatment for a sexually transmitted infection. He says those things go in a medical record, but a patient may not want it in a record that the hospital could see ...

(Hambrick): "... that members of another office might see. That your husband's primary care doctor, if they have the same doctor could

look at this. Those types of issues I think are important for us to figure out a solution to."

OB-GYNs aren't the only ones who have very specific demands for EHR systems.

A study published in the December 2012 edition of the journal *Pediatrics* found that pediatricians' rates of adopting fully functional EHR systems lagged behind general EHR adoption rates. The data were from 2009. One of the study's authors -- Michael Leu, a pediatrician at Seattle Children's Hospital -- says researchers explored five key features a pediatric practice should have in its health IT system. That included tracking of vaccines and calculating whether any were missed.

(Leu): "Are they due and how frequently do we have to give these things to catch them up again? It will easily take five or more minutes to figure out what are the catch-up immunizations a child needs if they're not really up to date on their immunizations."

Other processes that Leu says are automatable and should be included in EHR systems are growth curves, weight-based dosing calculators and tracking tools for well-child visits. He says the study found that just under 10% of pediatricians with an EHR system used a system with all these features.

(Leu): "These are basic things that allow pediatricians to do a better job. It's a little bit of a challenge to figure out how we're going to get the other 90% of the pediatricians that HAVE adopted to have those features. And that doesn't even count all those pediatricians who haven't adopted electronic health records yet."

Leu says the American Academy of Pediatrics has dedicated some of its staffers to making sure pediatric technology needs are met. Child Health Informatics Center for the Academy Director Christoph Lehmann says a concerted effort to steer pediatricians to appropriate systems has helped. Researchers are currently collecting data from 2012 to update the Pediatrics study.

Health IT firms have noticed the need.

(Wall): "We were actually looking at all the specialties right now, and we're developing special content that goes back and looks at it."

That's Jeff Wall, a physician executive with health IT vendor Cerner. He says over the last two years Cerner has increased its focus on specialists. For instance, their physician experience team noted that orthopedists heavily rely on X-rays and images.

(Wall): "So we're focusing say for orthopedics on making sure they have that easy access to all that diagnostic [information] in the [EHR], and it integrates well with the ordering and documentation processes."

Wall says Cerner can use back-end data to analyze how many clicks it takes doctors or specialists to do their work, and then use that information to streamline processes and training. Wall says the usability testing teams are working to provide a balance of what is best for the specialist and overall care.

(Wall): "So we're also looking again to tailor to fit the specialties, but also to find the overlap that really enhance interdisciplinary care among the different specialties."

Last summer the National Institute of Standards and Technology, or NIST, released its guidelines for companies developing EHR systems with pediatric functionality. Lana Lowry, a health IT project lead at NIST, says she'd like to do this for more specialties. Lowry says she often hears about the need.

(Lowry): "All the time, all the time ... and that's a challenge because if it was up to me, I would like to address everything all at once, but we have to... [laughs] It's quite a new field, health IT. You cannot address everything overnight."

But Lowry says that the new Stage 2 rules for the meaningful use incentive program could represent a huge step forward on this issue. Usability of the system, she says, is now a requirement of the regulations.

This has been a special report for *iHealthBeat*, a daily news service of the California HealthCare Foundation. If you have feedback or other issues you'd like to have addressed, please email us at iHB@CHCF.org. I'm Rachel Dornhelm, thanks for listening.