



# The Verdict on Electronic Medical Records

Perspectives of a Mobile Specialist  
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**E-Healthcare Strategies**

for

**Physicians, Hospitals, & Integrated Delivery Systems**

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# Agenda

- ◆ Practice Information
- ◆ Practice Statistics
- ◆ Workflow Needs
- ◆ Current Solutions
- ◆ Demonstrations
- ◆ Future Needs

# Practice Information

## ◆ Type of Practice

- Five physician Gastroenterology practice

## ◆ Location: Northwest suburbs of Chicago

- Three Hospitals
- Offices
  - ◆ Two main offices
  - ◆ Two satellite offices
  - ◆ Remote Business office
- One Ambulatory Surgery Center

# Information System

## ◆ Hardware

- 15 workstation WAN
- T1 line

## ◆ Software

- Practice management system: Millbrook paradigm
- EMR: logician internet
- Electronic Superbill
- Palm based software for remote charge capture

# Practice Statistics

- ◆ Annual clinical activity per physician
  - Office Consults: 450
    - ◆ 4-6 per day
  - Return Patients: 500
    - ◆ 6-8 per day
  - Endoscopies: 1500
    - ◆ 6-8 per day
  - Annual Hospital Visits 1000
    - ◆ 6-8 per day

# Workflow Needs

## ◆ Office

- Documentation of E&M Services
- Charge Capture
  - ◆ E&M Coding

## ◆ Hospital

- Access to clinical office records
  - ◆ Pre-procedure H&Ps
  - ◆ Inpatient Admissions on established patients
- Mobile Pharmacopoeia
- Mobile Charge Capture
  - ◆ Procedures
  - ◆ E&M Coding

# Current Solutions

- ◆ Electronic Medical Record

- Logician Internet

- ◆ Mobile Pharmacopoeia

- Medscape Mobile

- ◆ Charge Capture

- Office

- ◆ E&M: Logician Internet
- ◆ Procedures: Superbill

- Hospital

- ◆ Palm Application



# Demonstrations



# Future Mobile Physician Needs

- ◆ All of the current needs
- ◆ Tools that develop a competitive advantage
  - Remote Access to EMR
  - Remote Access to Practice Guidelines
  - Realtime Patient Access
  - Remote Outcomes Data reporting