

On the Record

What to expect as neurology practices go electronic.

BY GINA SHAW

oes your neurologist use an electronic medical record (EMR) system? If the answer today is "no," chances are good it will be "yes" within the next few years. In many doctors' offices, the pace of the move from giant cabinets full of paper records to streamlined electronic systems has been glacial. But new incentives from the federal government are hastening the process.

Over the next decade, some \$27 billion will be spent to promote the adoption of EMR systems by health care providers. In July, the Department of Health and Hu-

man Services published the final rules defining "meaningful use" of an EMR. This is the standard the department has set for whether or not a medical practice can tap into some of that \$27 billion in rewards for going digital. (Learn more online at healthit.hhs.gov.)

You don't have to read the entire 864-page docu-

ment outlining the requirements for meaningful use. But it's important to know what will be happening as more and more neurology practices transition to EMR systems, and how this change will benefit you.

EMR: WHAT'S IT GOOD FOR?

"An electronic medical record system means better health care," says Neil Busis, M.D., chief of the division of neurology in the department of medicine at the University of Pittsburgh Medical Center's Shadyside Hospital. Dr. Busis is the chair of a key committee of the American Academy of Neurology (AAN) that addresses EMRs.

"When you have a system that can put all your data in one place in the office, you have tools rather than just information," Dr. Busis says. "Let's say Mrs. Jones takes a mul-



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tiple sclerosis drug and is supposed to have quarterly blood work. With an electronic record, an alert can be

programmed to pop up on the neurologist's computer screen saying, 'Have you ordered Mrs. Jones' blood work?'"

If your neurologist prescribes you a new drug, the system might pop up with an alert that warns him that you have allergies to a related medication, and that you are on another drug that interacts badly with the new one he wants to prescribe.

Better access to information for your doctor also means that he can make a more fully informed decision about your care—whether he's at your bedside or miles away.

All of the patients at Dr. Busis' hospital have EMRs. "So if someone calls me at home to say, 'Mrs. Jones has taken a turn for the worse,' I can go to my home computer and look directly at the lab results, CT scan results, and opinions from other consultants," he says. "It's not the same as

being at the bedside, but it's a lot better than just hearing someone else describe the situation."

Having an EMR also means better continuity of care for you. How many times have you had to pick up a copy of your file to bring to a new doctor, or had a hospital visit at which they didn't have any information about your last MRI or CT scan? Paper records don't move very smoothly. But one of the key goals of the push for a fully digitized health system is something called "interoperability," which means record systems that talk to one another.

"I had a patient recently with a very complicated medical situation," says Dr. Busis. "He has transverse myelitis [an inflammatory condition of the spinal cord that can cause short- or long-term paralysis] and Guillain-Barré [a disorder in which the body's immune system attacks part of the peripheral nervous system]; he also has had lymphoma and experienced a stroke. He was last in my office in July, and he went off to rehab and seemed to be doing well.

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"When he came back to visit me in October," Dr. Busis recalls, "the patient told me that he had been to another hospital the month before and they had a par-

ticular opinion about his case. But the information wasn't in our system, and there was no easy way for me to get his records. Yes, I could fill out a request and get them eventually. But here we were, the two of us at his appointment, and I wanted the records right away. When there are interoperable EMRs, we'll be able to do that."

WHAT TO EXPECT IN THE DIGITAL FUTURE

So what should you expect from your neurologist as the practice transitions to an EMR system? To some extent, it depends on the doctor. An EMR can be used in many different ways.

"Some practices will only use an EMR to do basic documentation," says Gregory Esper, M.D., M.B.A., associate professor of neurology and vice chair of clinical affairs for the department of neurology at Emory University in Atlanta, GA. "Others may use more complete solutions that allow them to prescribe medications electronically and view imaging studies."

The only way to know how your neurologist intends to use EMRs is to ask. (See box, "What to Ask Your Neurologist About EMRs.")

At a minimum, when your neurologist launches an EMR system, you should be able to obtain an electronic copy of your health information upon request.

"This includes all your test results, your problem list, your list of medications, and list of allergies," says Steven Zuckerman, M.D., a neurologist in private practice in Baton Rouge, LA. "In order to get that information, all you should have to do is request it, and within three business days you should get that informa-

tion in the format of your choice—on a flash drive or some other file that you can pull up on your computer, or securely emailed to you."

You should also receive, within three days of each visit, a written or electronic summary of that visit. "Usually these clinical summaries not only give you a list of what your problems were, but also what lab tests and imaging studies were ordered, medication changes, and when and where you are expected at different appointments," Dr. Zuckerman says.

In the best case, an EMR at your neurologist's office will offer you much more: the ability to request appointments and refill prescriptions online, two-way electronic communication with your doctor, and electronic access to clinical information like lab results and X-ray results.

CONCERNING PRIVACY

Despite all these advantages, many people have concerns about their privacy when an EMR is involved. All of these systems have security built into them, such as passwords, firewalls, systems that track who viewed the record when and for how long, and specific levels of

authorization allowing only certain users access to the most private information. But is your information really safe?

"In fact, in many ways there's much less privacy in paper records," Dr. Busis points out. "If you're in the hospital, you go onto a floor and they have a list of patients' names and numbers on a bulletin board. It's harder to access an electronic medical record, though it's easier to spread a breach of privacy once you have done so, because online you can just forward a file. But it's also easier to tell who accessed an electronic record inappropriately, so violations are easier to track."

"The bottom line is that no system is perfect," Dr. Busis says. "There will be unintended consequences and things we forgot about, but there are in paper records too. And we'll learn and try to make things better."

Ultimately, says Dr. Esper, an electronic system will make your neurologic care much easier. "A lot of my patients tell me that they prefer that I use an electronic record at the point of care," he observes. "They say, 'I can't remember what that prescription was,' and I say, 'I can download the last six months of prescriptions for us to review.' Used well, a good EMR enhances the doctor-patient relationship."

WHAT TO ASK YOUR NEUROLOGIST ABOUT EMRS

- ▶ Does your practice comply with the meaningful use requirements set out by the Department of Health and Human Services?
- ▶ What information and capabilities will be included in my electronic medical record?
- ► How can I access my electronic medical record?
- ► How secure is my information? Will you have a secure online portal for patients to access their EMRs online?
- Will you be prescribing electronically?
- Will you be doing e-consultations (medical visits via e-mail or another online format, such as instant messaging)?
- How is the electronic medical record helping me? How are you using it to enhance your decision-making?