Don’t Skip a Beat: Integrating Into a Multispecialty EHR

Ideally, the use of electronic health records (EHRs) will not only meet your specific needs as a cardiologist, but further support collaboration with physician peers, provide quick access to essential patient information, and enhance productivity. That’s the ideal—but the reality is most EHRs are designed around primary care providers (PCPs), with minimal regard for the intricacies of subspecialty workflows. As more cardiologists join with hospitals and health systems, however, integrating with multispecialty EHR systems and leveraging this technology to provide optimal patient care is critically important. Whether you’re already part of a multispecialty group, considering joining one, or working with your existing group to evaluate a new EHR solution, consider these key issues to make sure EHRs meet your needs.

Tailoring Leads to Efficiency

According to a recent article in American Medical News, 53% of cardiology groups are fully integrated with a hospital, up from 32% in 2011. With heavy alignment, cardiologists need to have a voice in discussions concerning EHR optimization. Regardless of the EHR system, there are a few specific approaches you can take to incorporate customization within the confines of a multispecialty setting.

• **Collaborate with leadership and make your EHR needs known.** Help leadership understand the clinical needs that are missing from the current EHR setup. For example, if your EHR only permits one user in a patient chart, explain the efficiency and productivity benefits of allowing multiple staff members to document in a chart during a procedure such as a stress echocardiogram. If your requirements are known, many vendors will work with large groups to provide improvements—or at least temporary workarounds—to create an ideal workflow.

• **Customize templates and develop order sets.** An out-of-the-box EHR may not fit your practice’s workflows. However, by working with your IT department or the EHR vendor to customize templates, lists of favorite selections, and workflow processes, you may be able to modify the system to meet your needs. Providers have found success in creating order sets for common pre-op, post-op, or consulting visits, which can provide efficient shortcuts for frequent visit types.

• **Institute device integration.** Integrating your external devices; for example, your electrocardiogram (ECG) with EHRs can greatly reduce manual data entry, enhance accuracy, and increase timeliness of information. By integrating an ECG device directly with the EHR for data and reports, for instance, information can be collected and transferred seamlessly and be instantly available and shareable. Working with leadership to prioritize integration requirements may help to ensure that the technology staff focuses appropriately.

Prioritizing EHR in the Medical Group Search

When thinking about joining a medical group, your EHR needs should be part of your due diligence. EHR needs should be in place to integrate key capabilities and information into the enterprise’s EHR system.

• **Demand a hands-on demo.** You need to know the capabilities and limitations of the medical group’s technology up front. Screenshots or controlled demos of a cardiology suite may tell one story, but when the system goes live, you may not find such a happy ending if critical workflows cannot be met without significant changes to the system or reductions in patient volume. Hands-on demos offer the opportunity to ferret out potential problems before it’s too late.

• **Identify “deal-breakers.”** It’s important to distinguish the workflow processes and systems required to maintain productivity and patient care outcomes. If the EHR does not bolster your ability to record real-time results of routine procedure, identify this as a functional requirement with the medical group’s administration team. Before joining a medical group, a plan should be in place to integrate key capabilities and information into the enterprise’s EHR system.

• **Provide examples of routine and complex patient types.** You should be able to see how the EHR can support the types of cases that make up most of your day. If a high level of customization is required to efficiently meet your practice’s needs, document specific requirements in the implementation plan, and test them prior to going live.

• **Speak to current specialists within the group.** If the medical group doesn’t include cardiology already, a general surgeon or orthopedist may have faced similar challenges with the EHRs. They can provide valuable insight regarding how well the EHR meets their (and your) needs.

Putting It All Together

Balancing cardiologist-specific needs within the complexities of a multispecialty medical group is challenging. Cardiologists need to make their needs known but also be willing to compromise to find a suitable solution or improve an existing EHR system. However, if your cardiology group is active throughout all phases of EHR implementation and ongoing adoption, a multispecialty system can become a sustainable asset that provides immense value to you and your patients.

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