

# Physician Reflects on Implementing EMR

In 1996, 4 years after starting his solo family practice in Niles, OH, Michael T. Ciletti, MD, set his sights on achieving a paperless office by implementing an electronic medical record (EMR). Unfortunately, the application he found was more a data repository than a true EMR, and multiple problems ensued.

“We had to scan every paper form used in the system,” Dr. Ciletti said. “It turned out to essentially double the amount of work [to retrieve] the information on each form I wanted in my patients’ records.” To make matters worse, his vendor provided little software support.

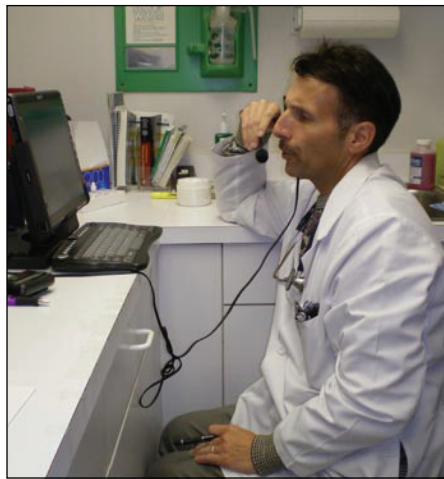
“It just never worked,” conceded Maria V. Ciletti, RN, practice administrator of the practice—and Dr. Ciletti’s sister.

Despite the setbacks, Dr. Ciletti remained focused on this goal. When his transcriptionist retired 4 years later, Dr. Ciletti opted to use health care information technology (IT) rather than hire another staff person. He turned to Dragon NaturallySpeaking, the speech recognition software from Nuance Communications, Inc., Burlington, MA, to dictate his notes. Eliminating transcription proved both efficient and cost-effective—for one thing, it eliminated the 1- to 2-day turnaround to get his printed notes into patients’ paper charts—but it still fell far short of Dr. Ciletti’s goal.

“I still wanted to bring all patient information collection and access together in an overall paperless solution,” he said. “I was still looking forward to replacing paper charts with an EMR.”

## Finding an EMR

Dr. Ciletti continued to look into different EMR alternatives. “We reviewed three systems in detail,” said Maria Ciletti. “We were waiting for a MicroMD EMR. We had used MicroMD PM for practice management since 1995 and enjoyed excellent software support and established trust with the company.”



*Dr. Michael Ciletti achieved his goal of setting up a paperless office.*

In January 2007, Henry Schein Medical Systems demonstrated MicroMD EMR at Dr. Ciletti’s office. “It seemed like you would need an IT degree to run other EMRs we investigated,” said Dr. Ciletti. “When we went through the demonstration of MicroMD EMR, we found it intuitive and straightforward. We also had confidence that integration with practice management would not be a problem.”

MicroMD EMR was installed in April 2007. Today, seven personal computers (PCs) are on a hardwired network and Dr. Ciletti uses a wireless tablet PC.

Dr. Ciletti believes that many physicians resist adopting EMR systems because of concerns over short-term declines in productivity and possible revenue losses during implementation and staff training.

Henry Schein Medical Systems was on site for 3 days, he said.

- *Day 1:* Training focused on introducing nurses to the system so that they could learn the system’s basic navigation and how they would communicate with Dr. Ciletti.
- *Day 2:* This day was primarily devoted to the nurses and medical assistants who do patient histories and update patients’ information before

the doctor sees them. The prescription module was also introduced.

- *Day 3:* Dr. Ciletti and Maria got their orientation to the software.

“For my practice, getting going on the EMR was easy,” said Dr. Ciletti. “The process can be much less complex in a small office versus a big group practice. It took us only 2 weeks to become proficient once installation was complete.”

Dr. Ciletti said that that implementing MicroMD EMR did not require major changes in his routine. Dragon NaturallySpeaking dictated his notes directly into a text encounter “so, for me, there was no change,” he said. Now, “the big difference for me is that I can access patients’ records on my tablet PC instead of carrying around paper charts. Plus, the system’s natural language processor can traverse through my dictated notes to pull out discrete data for reporting purposes.”

A huge benefit is that the process of collecting and presenting essential patient information is now automated and simplified. Not only is patient information gathered and organized more efficiently, it is accessible to all users whenever they need it.

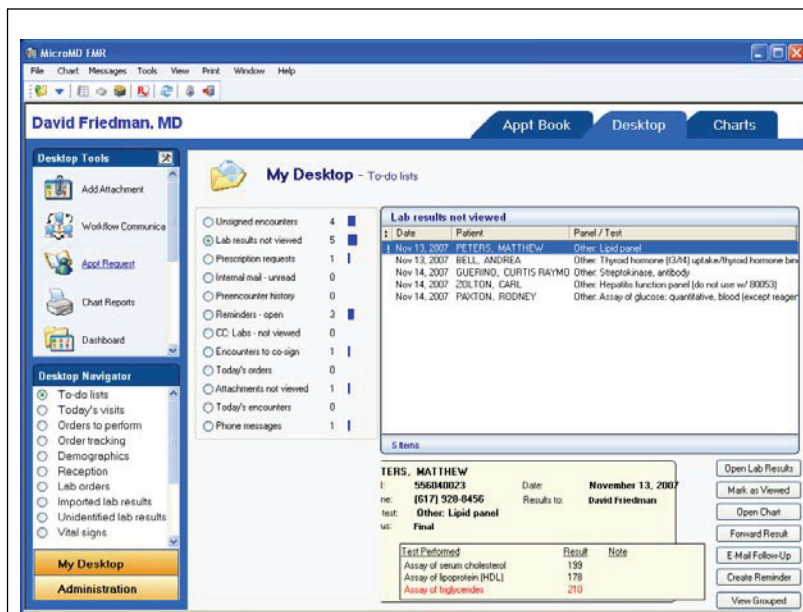
“Before if I was looking for information in a particular patient’s chart and Maria needed the same chart for billing, she had to wait,” Dr. Ciletti said. “That is no longer a problem.”

Both Dr. Ciletti and Maria point to the improved workflow of managing prescription refill requests and lab results. They say that the EMR has made the time in between Dr. Ciletti seeing patients much more productive. Now, instead of handing a message of a refill request to the doctor, the receptionist can stay at her desk and enter the refill request while talking to a patient. The software then creates a refill form for Dr. Ciletti to sign electronically and sends a message to his computer inbox, which he checks in between seeing

patients. If he wants to review any information from the patient's medical record before signing the refill, he has immediate access to the information on his tablet PC.

The EMR also has an interface to Quest Diagnostics. When lab results are ready, they are immediately transmitted and directed into the patient's record with abnormal values flagged. Turnaround time is fast, and there is no chance that the results will be misplaced.

Previously, Dr. Ciletti had to wait until the following morning for results. He would be bombarded most mornings with test results and had to review up to 25 to 30 charts at the start of his office day. Now it is much easier to manage, and Dr. Ciletti can focus his attention on flagged results.



### Bottom Line Impact

Dr. Ciletti's initial investment in the EMR for software and hardware—including a server, a tablet PC, upgrades for other PCs and a new flat-bed scanner—was \$27,000. The gains in office productivity with the EMR

have enabled Dr. Ciletti to schedule an average of five additional patients per day. With the resulting increase in revenue, his practice will reach a positive return-on-investment within 18 months.

“Sooner or later, whether by government mandate or to meet the requirements of large private payers, all physicians are going to have to adopt EMRs,” said Maria. “It is inevitable. It makes good sense to get out

ahead of that and to implement an EMR on your own terms.”

For more information on the MicroMD EMR, contact David Aquilina at Henry Schein Medical Systems at 612/922-5551 or e-mail [davidaquilina@msn.com](mailto:davidaquilina@msn.com). ■