### Physician EMR Strategy - five ways to get home sooner this week

By Dike Drummond MD, CEO of <u>TheHappyMD.com</u> Full blog post is <u>At This Link</u>

#### Remember that EMR is a Dilemma

There is no SOLUTION. Your job is to build a STRATEGY to minimize the amount of your personal effort it takes to create the minimum acceptable documentation that you require.



Here are some potential components of your own EMR/documentation strategy.

#### **WATCH YOUR PROGRAMMING:**

When a physician sees a list of options, we always want to do everything at once or the most difficult step first. That is just your Workaholic, Superhero, Perfectionist programing. *INSTEAD*: I encourage you to look at this list and pick *JUST ONE tool* and make it the *Easiest or Most Fun*!

#### 1) Check your attitude

- Stop being a HATER the avoidance of charting because you HATE EMR is a major issue for many people. That HATE results in a big pile of unfinished charts every day and a downward spiral in your energy and spirit.
- Become a POWER USER instead. Commit to mastering this documentation dilemma.
- Find the Power Users in your organization the nurses know who they are
  - Watch them document. Lean over their back like a baseball umpire and watch them chart.
  - Learn their power tips
  - Ask if you can have their templates. (They always say, "Sure.")

#### 2) Always document a minimal data set

Document only what you need and nothing more

#### Do NOT write the great American novel

#### The three reasons for a chart note:

- a) Continuity
- can somebody else pick the chart up and take over where you started?
- b) To support the billing code
- is there enough in the chart to support your charge level?

- c) Cover your "legal part"
- document what you need to prevent malpractice concerns

#### NOTICE:

Does your note have to be in complete sentences? Must your note have perfect spelling or punctuation? Do you ever need to use the semi colon key?

If what you are typing does not support

- Continuity of care
- The billing code
- Or cover your "legal part"

#### DO NOT PUT IT IN THE CHART!!

#### 3) Use the software

This is meant to be semi-automated by templates. Ideally only 30% or less of your documentation is free typed into the medical record

#### REMEMBER:

How many times do you have to make a template? And how many times can you use that template?

#### TEMPLATES ARE A MAGIC WEAPON:

Every time you template another charting task you get home sooner, without working harder from that point forward.

Automate your BRM's = Broken Record Moments When do you have "broken record moments"? This is a sign you could use more template

- Make a list of your broken record moments the diagnoses and patient complaints you see repeatedly and still type freehand each time. They make you feel like a Broken Record.
- Take one item off the list each week and template it. Your Power User friend can help.
- In one month you'll have four new templates and will be getting home sooner.

#### 4) Use your team

You are programmed to be a Lone Ranger, Superhero Perfectionist

Doctors always work too hard because we never learned to lead a team effectively.

Our programming and lack of trust is revealed by how you complete this sentence: "If you want a job done right, you have to ...... "

I will guarantee you are doing too much yourself

All documentation is team documentation.

You don't have to do it all.

The team can work together to document the team's activities.

Just ask your team how to share the load more effectively and let them help you.

#### 5) Hire a Scribe - The Claw Back Method

Administrators are concerned about money and manpower

Hire and pay for the scribe in a pilot project – so you are taking the risk

Make sure you have complete statistics on your production before and after the scribe and prove you can make more money than the scribe's salary costs

Then "claw back" the scribe's salary by having the organization pay it out of your extra income – or take the extra income and pay for the scribe yourself.

Full Hire a Scribe Training is at This Link

#### 6) Tech and A.I. Scribe Equivalents

We have heard good reviews and promising evaluations of the following programs from physicians in our networks.

Augmedix virtual scribe service

Suki A.I.

And watch out for new developments from ChatGPT

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# EMR is just one of the stresses on physicians these days It is time for active measures to take back your practice

- Lower Your Stress Levels
- Build More Life Balance
- and a More Ideal Practice NOW

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