

IMPLEMENTATION OF A RESIDENT CREATED ELECTRONIC MEDICAL RECORD (EMR) TO IMPROVE COMPLIANCE WITH DUTY HOURS AND PATIENT CARE

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Purpose: To report on a resident created EMR that has improved compliance with ACGME duty hours and patient care.

Methods: Survey of Housestaff.

Summary: In order to fully comply with the new ACGME duty hours, we examined ways to become more efficient in patient care and education. We identified housestaff progress note writing and the creation of a daily signout to be areas that provided an opportunity for improved efficiency. In October we instituted a computer based note-writing and signout system that was created by a current PGY2 in Pediatrics at Case. This resident had been an IT consultant prior to attending Case Medical School, and prior to his internship created a electronic database designed to make himself and his fellow pediatric residents more efficient. The system (RECS for Resident Electronic Centralized Signout) works by creating a database for each patient that can then be used to create progress notes and a standardized, formatted signout. Daily progress notes are created by updating patient information from the previous days note and are printed and placed in the patient's chart. Signouts are created using the updated information with little or no additional input. While not strictly an EMR (the notes are printed), all the data is stored on the hospital's server and is available when patients are readmitted. We surveyed our interns and residents via email to find out the estimated time savings gained from RECS. Interns on average report time savings of 1.6 hours /day. Residents use the system when interns have the day off and reported 1.8 hours/day. Nurses and consultants have commented that the notes are legible and clearly identify the patient's service and the houseofficer's pager number. Standardized signouts have improved off-hour coverage.

Conclusion: RECS creates efficiencies that improve compliance with duty hours and patient care.

