

Harnessing EMRs for Good

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It is June 30th, a day of mixed emotion for soon-to-be interns. Most of us are preoccupied with the excitement of learning critical procedures and truly having ownership of our patients for the first time, simultaneously contrasted with the fear of inadvertently harming those patients as we become

more independent. Though lower on our list of worries, electronic medical records (EMRs) present a real obstacle to both resident education and patient care as the year begins. While the EMR is viewed by many as nothing more than a nidus for burnout (perhaps rightfully so), residents are in a unique position to turn the EMR into a tool for facilitating education.

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Medical Decision Making (MDM)

Though the MDM exists primarily for others to understand your thought process, learners can use the MDM section to better formulate a coherent plan. Writing down a differential diagnosis can help you consider pathology you might otherwise forget to include, which in turn can help better organize the patient's workup. Explaining why you chose to order or forego a specific test allows for application of and increased familiarity with clinical decision tools and clinical reasoning in general. Overall, the way you write an MDM is a reflection of how you think as a physician, so developing this skill may in turn shape your practice style.

Macros

Most EMRs offer some type of macro in which a user can pre-populate information into the chart based on the patient's chief complaint. On the surface, macros help to improve the tedium of charting, but they can also be a tool for learning. Creating macros for common complaints, such as chest pain, enables a user to become better at pattern recognition. For instance, having the HEART score and Wells' criteria prepopulate in your chest pain note not only make you more familiar with those specific tools, but also bolster your clinical decision-making framework.

Order Sets

Many EMRs offer order sets - commonly ordered tests or medications for a given chief complaint as a shortcut to fewer clicks. However, order sets can also be used to develop pattern recognition skills. Early in residency,

becoming familiar with commonly ordered tests and medications is crucial, and order sets can assist with this. Similarly, paying attention to the pre-populated dosages of commonly ordered medications may help you learn them faster, which is especially useful as you enter orders on your own for the first time.

Patient Follow-up

EMRs make it easier to follow up on your patients once they leave the emergency department. This allows you to learn what you did well as well as how to improve in the future. This is particularly useful when the patient is complicated or the diagnosis was unclear. It can shape your differential diagnosis or remind you that a specific test may be useful in the future. Less concretely, following up on your patients can be humbling when you miss something, but rewarding when you do the right thing for your patient.



Final Tips

- Get to know your EMR. It might take more work up-front, but you might be surprised at how much time you can save during your day-to-day work.
- Be positive. While we all love to complain about electronic charting, it is here to stay, so complaining is not productive. That being said, most EMRs are dynamic systems, so offering ideas for improvement can actually make a difference.
- Don't overuse or become overly dependent on the tools discussed above. While mental shortcuts are helpful for many reasons, it is most important to know why you're making the decisions you're making, and when to deviate from those shortcuts. ●