How An EMR Makes Connecting With The Patient More Difficult

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I have the great privilege of being a medical educator. Everyday, I have an incredible time working with internal medicine residents at their continuity clinic, teaching the art of ambulatory medicine. Our working environment here is academically rich and fulfilling. The name of the legendary Dr. Martin Leibowitz (an iconic figure in ambulatory medicine here) stands outside our conference room as a constant reminder of how medicine is practiced and taught. There is a large oval table at the center of the conference room, constantly surrounded by venerable attendings, interspersed with curious residents, discussing all the difficult cases of the day. There is the constant buzz of organized chaos like a stock exchange that is addictive and keeps things fun and enjoyable.

Although this positive vibe has never changed, the working environment has transformed since I first joined in 2009. The conference table used to be littered with text books like Harrison's, Netter and a variety of dermatology books. In between the people and books sat heavy, tattered orange colored paper charts. Some were just a few pages, some hundreds, all documenting a litany of complaints, physical exam findings, test results, insurance documentation, medication lists and well thought out plans by generations past of neophyte doctors. Blue, black, red, green ink on yellow oxidized pages, all fascinating yet often illegible. My intrigue with these historical documents quickly faded, and the burden of having to flip through hundreds of abstruse pages became quite frustrating. The sight of these bright orange charts piled on my desk at the end of the day, became a nauseating reminder of the inefficiencies and dangers of paper documentation. Our electronic medical record (EMR), slated to be release 6 months after my start date, could not come soon enough.

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