

# Improving the Quality and Timeliness of Patient Documents with InteGreat EHR Visit Entry and Voice Recognition

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For 75 years, the physicians and staff of Carle Clinic have been providing care to the residents of central Illinois, with physicians practicing in more than 50 specialties. Carle Clinic physicians practice at Carle Foundation Hospital, a 305-bed not-for-profit hospital located in Urbana, Illinois, the primary teaching hospital for the University of Illinois College of Medicine, and at Clinic's thirteen locations, including Mattoon-Charleston, 60 miles south of the Carle Clinic main campus.

Dr. Robert Good splits his time between adult medicine, endoscopy and medical leadership of the Mattoon-Charleston clinic. His busy practice requires that he practice efficiently and use technology to smooth his workflow. Dr. Good has used InteGreat EHR since 2005, when the system used by the Carle Clinic since 1996 was adopted at Mattoon-Charleston. In addition to the standard functions used by all Carle providers, Dr. Good uses InteGreat EHR Visit Entry and Voice Recognition functionality to improve the timeliness, completeness, and accuracy of his patient care documentation. On the morning we met at his office, he cleared 89 worklist items, including labs, messages, and communications to other providers, in just 15 minutes.

InteGreat EHR Visit Entry offers standard, specialty and diagnosis-focused templates which can be edited by clients to support specific workflows. Dr. Good customized his Adult Medicine and Endoscopy templates to fit his practice and uses these templates with Voice Recognition technology to speed and simplify the completion of endoscopy reports, letters, portal responses and other in-office tasks. Templates include general category questions for which Dr. Good uses voice recognition to "input" text notes. Now that he has worked with them for some time, he is planning further improvements. Both Dr. Good and his nurse carry tablet computers during patient visits and document in the patient exam room.

The patient history and vital signs are entered in InteGreat EHR by the nurse. On entering the room, Dr. Good reviews the patient's medical history and works through the chief complaints, associated history, review of systems, and other elements of his examination. He quickly documents his review and findings by checking appropriate template boxes and adding text detail as needed. Dr. Good does not use Voice Recognition documentation in the patient room and would like to build shortcuts to insert commonly used phrases into text boxes. The visit note text is produced by InteGreat EHR as documentation proceeds. As needed, as in the case of nursing home or other patients with caregivers, notes can be printed for patients before they leave the exam room. Dr. Good completes his comprehensive patient documentation by the end of each day without extending his hours.

Dr. Good was introduced to Voice Recognition the 1990s, when a University of Wisconsin Professor who was developing an EMR worked for a time at the Carle Clinic. He first used Dragon 2.0 software. He is currently using Dragon 9 Medical and reports that total "training" time to ensure that the software accurately translates his spoken voice was one hour. Dr. Good uses Voice Recognition for text documentation, patient and clinician correspondence, and some navigation through the InteGreat EHR. Text documentation includes documentation of anything that is not recorded via template or typed text input. Navigation involves the use of voice commands to sign, send, forward, retrieve, respond, or otherwise process patient orders, test results, visit notes, follow up instructions, staff directions and other functions.

The Charleston-Mattoon Clinic spent nearly \$200,000 in transcription fees in 2008. Dr. Good is committed to reducing this expense. He has saved over \$25,000 while improving the quality and timeliness of his documentation and would like to have all the providers at his clinic use InteGreat EHR Visit Entry and Voice Recognition. To support clinic physicians, he will work with administration to obtain the necessary equipment, provide training, and build appropriate incentives into the physician compensation model.