

# [Good report about electronic health records](https://assignbuster.com/good-report-about-electronic-health-records/)

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## Current system

In Naxvegas Hospital, the use of paper-based health records has always been in use since it was established. The system requires the development of a personal manual health record where the patient information is recorded and stored. The hospital has health records department where the documented patient records are filed in a systematic order. The files have accumulated over time, and the need for more office space has been a burning issue. The system has employed the terminal digit filing system in the filing area (Bleich, Howard, Slack & Warner, 2010). This helps easy documentation, filing and retrieval of the patient information though it may be time consuming. An analysis of the paper-based health record system in the hospital shows that there are more than five hundred thousand different patient files. Each file contains the demographic details of the owner, patient vital signs and doctor’s prescription. The current system does not offer ready solutions in the process of improving patient care and treatment.

## Problems & weaknesses

The paper-based records are associated with various problems and weaknesses. The most challenging issue is security of the patient information. In most instances, the system fails to address the privacy and confidentiality of the patient record since third parties may interfere with the information (Harman & Bond, 2012). Duplication of patient information is observed since it has been realized that some patients own more than a single file. The physicians face problems when the health records are incomplete and with an illegible handwriting. It is difficult to access test results in time, and the system is associated with numerous medical errors. The manual records are at great risks of fire, theft, and weather related concerns like the hurricanes, floods and tornadoes.

## Changes yielded by the system and the impact

The Electronic Health Record System will introduce several observable changes in Naxvegas Hospital. It will replace the paper-based records with digital records where patient information will be stored in computer systems. The new system will support interoperability where all processes in the hospital will be interconnected in the process of treatment.
The system will enable the integration of billing in inpatient and outpatient settings. This ability will shed light in the revenue cycle function since it will justify the return on investment for the E. H. R system. The system will lead to systematic clinic workflows and the waiting time will be reduced. Patients’ attendance will increase due to the accuracy of data, appropriateness and legibility. Computerized physician order entry (CPOE) systems will involve the caregivers to involve themselves to reduce medical errors (Bleich, Howard, Slack & Warner, 2010).

## Should it be extended or replaced?

In the end, the hospital must completely replace the paper-based records with digital forms. The E. H. R system is associated with numerous advantages while paper-based records present an array of weaknesses. The implementation of a digital system is time consuming and requires huge amounts of funds. Despite the reality, the hospital will generate benefits after the system starts to operate fully.

## Phase-out plan for the existing system

The Phase-out plan of the paper-based record system will have a timeline covering 1st June to 31st Dec 2014
As expounded above, system analysis will be conducted in the right manner and the Naxvegas Hospital will benefit from the implementation of the new hospital.

## References

Bleich, Howard L.; Slack, Warner V. (2010). " Reflections on electronic medical records: When doctors will use them and when they will not". International Journal of Medical Informatics 79 (1): 1–4. doi: 10. 1016/j. ijmedinf. 2009. 10. 002. PMID 19939731
Harman, L. & Bond, K. (2012). “ Electronic Health Records: Privacy, Confidentiality and Security”. N. p. Retrieved from http://virtualmentor. ama-assn. org/2012/09/stas1-1209. html