








Removing the Noise in the Electronic Health Record Guidance

1. Understanding Your Environment is the First Step.

	<p>What tools are available in your EHR? Can you route messages, type and volume of messages?</p>
	<p>Talk to the providers about what they value and what can be accomplished with scope of practice. Start with their pain points.</p>
	<p>Revisit decisions that you made when implementing – they may cause the irritation that clinicians are feeling - They're dazzled by the possibility of having ALL the knowledge, without considering the possibility that that could be a BAD thing :). Or perhaps rather, without consideration that information is only useful if it's timely.</p>
	<p>Review “old messages” for a clean slate to make sure current messages can be efficiently retrieved and the in-basket is not cluttered with too much noise.</p>

2. Potential solutions after understanding workflow and making sure that clinical care will not be impacted.

	<ol style="list-style-type: none"> 1. Suppress overdue results messages for labs and imaging after 90 days. 2. Suppress expiring orders for Primary Care and Specialty Care. 3. Suppress completed order messages for referrals. 4. Purge old in-basket messages (i.e. 1 year back). 5. Eliminate duplicate referral message feedback, i.e. consult report and the message that order was completed or PCP cc'd on specialist message. 6. Suppress messages to PCPs on every visit to specialists – they do not need to get a note on every specialty visit. They see patients regularly and the information is pulled into the EHR automatically when scheduling.
	<ol style="list-style-type: none"> 1. Route ADT messages to Care Management Team members. 2. Route messages to the appropriate scope of practice. 3. Route unviewed test result messages to Pool by default at 3 days.
	<ol style="list-style-type: none"> 1. Develop a monitoring process (Dashboard) to make sure that messages are followed up on. 2. Design quick feedback macros for test results to patients