

Using Technology to Enhance Patient-Physician Interactions



Electronic health records (EHRs) are essential to providing medical care for patients. With the growing use of EHRs, the computer has become an integral part of a clinical office examination room. If used effectively, in-room technology will both enhance patient care and engender a greater degree of patient trust in their provider, according to an article published in *Clinical Informatics in Psychiatry - PM&R Journal*.

The EHR in the examination room can be a very important tool in fostering patient engagement and participation. "How a physician simultaneously uses the computer and interacts with patients will either enhance or deter patient engagement in areas of health maintenance and rehabilitation," writes article author David Voran, MD, of Truman Medical Center in Kansas City.

To leverage EHRs in the examination room, the author says physicians must be skilled not only in their specific EHR but in how to use a growing variety of technology tools effectively to include the patient in the activities necessitated by the EHRs. For example, using the computer to explore web sites the patient has visited and to pull up medical reference material such as Up-To-Date (www.uptodate.com) and Epocrates (www.epocrates.com) on a large screen – instead of an iPhone or iPad – during the visit enables the patient to participate in the discovery or validation process.

In contrast to mobile devices, use of large-screen computer monitors provides the physician and patient with increased screen real estate, maximising the amount of information that can be displayed. These screens minimise the amount of clicking scrolling, and screen manipulation required to perform routine data entry, information location, and other tasks small screens impose. "Larger screens enable easier communication and sharing with the patient," Dr. Voran notes.

Unfortunately, many examination rooms were built long before computers were available and make it very difficult for both the physician and the patient to interact effectively. In these "older" examination rooms, often the computer is located in a wall cabinet. This location forces the provider to turn their back on the patient to use it. Furthermore, the computer is placed too far away for the patient to view the screen effectively.

A more productive and open arrangement is when the room is either configured such that the patient, physician, and computer are situated where the physician can easily make eye contact with the patient as well as direct the focus of the patient to the computer screen when necessary, according to the article. Introducing or placing the computer on a swing arm with a small shelf or desk also makes the computer more accessible to the provider and patient.

In addition to training how to interact with a patient using the EHR in the room, many physicians do not receive formal education on how to use multiple monitors or how to seamlessly integrate clinical photography and mobile technology tools like Cellscope's OTO (www.cellscope.com) and AliveCor's Kardia (www.alivecor.com) or other newer technologies into routine visits.

As Dr. Voran points out, "It is important that we physicians pay attention to advancing technologies that have the potential to improve our ability to diagnose, treat, and improve our patient's lives and learn to incorporate them into clinical practice and our education."

Source: [PM&R Journal](#)

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