

How EHR Optimization Can Cut Clinician Burden for Allergists

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The integration of customized EHR templates is one way EHR optimization to reduce clinician burden for allergists.

Further EHR optimization, the integration of EHR scribes, and implementation of clinical decision support (CDS) and computerized physician order entry (CPOE) systems could boost patient care and reduce clinician burden for allergists, [according](#) to an article published in *Current Allergy and Asthma Reports*.

The constant evolution of health IT in the allergy field has impacted allergist workflow. Like most other clinicians, allergists have seen an increase in after-hours workload doing non-clinical jobs such as EHR documentation.

Clinical EHR documentation was initially designed to record clinical information as provider notes in real-time during a consultation, assessment, or treatment, to share patient data between health providers.

While the transition from paper to EHR documentation has allowed for more accessible and legible notes, it is a primary cause of [clinician burden](#) due to information overload and larger amounts of text that is not always relevant to patient care.

"Allergists need to find ways to lower this burden in order to continue to provide exceptional evidence-based medical care while minimizing physician burnout," wrote Annette F. Carlisle, Saul M. Greenbaum, and Mike S. Tankersley, three faculty members at University of Tennessee Health Science Center.

To enhance EHR documentation, AI voice-recognition scribes have started to replace human scribes in the workplace. The authors noted long-term cost savings, decreased training time, and constant availability as benefits of the technology.

While a well-designed [EHR scribe](#) possesses the ability to decrease clinician burnout and technology costs, it cannot replicate all benefits that a human scribe brings to a medical office.

Human scribes can adapt to the process of training, certifying, and managing medical scribes, described the authors. Also, some health systems may have different documentation styles or expectations that cannot be followed by a digital scribe.

Next, digital scribes are not capable of interacting with the provider, other members of the care team, and patients. Because the digital scribe cannot be more than a silent transcriptionist, a health system may have to hire an assistant to fulfill the other tasks of the human scribe.

While the decision of human scribe versus digital scribe is up to the provider, some providers are moving forward with digital scribes to reduce clinician burden.

Along with improving EHR documentation, the three healthcare professionals recommend the implementation of CDS and CPOE systems.

CDS tools enable prescribers to access real-time patient data, ideally resulting in enhanced patient safety, improved compliance rates, and increased medication accuracy. CDS also alerts prescribers to potential errors and adverse drug events.

According to the authors, CPOE integrated reduces medication errors by more than 55 percent. With both CPOE and CDS, medication errors decreased by 83 percent.

Another way to decrease burden is to enhance [EHR usability](#) through EHR optimization.

The authors recommended customized EHR templates that clinicians can easily utilize to view patient medical history. For an allergist, the customized interface would include a history of illnesses, such as asthma, dermatitis, rhinitis, urticarial, food, or venom reactions.

Other allergy-based templates and EHR optimizations include recording allergy skin testing, immunotherapy dose customization, integrating the asthma control test, and incorporation of extract ordering.

Additional templates also include the ability to integrate a template for e-prescribing, office visits, patient portal messaging, and other methods of communication.

Easy access to view and utilize this information would boost patient care and decrease clinician burden.

"The practicing allergist can implement various additional strategies in their office workflow to maximize and synthesize good medicine and good business," concluded the authors. "Optimal use of office staff, electronic health records, and various workflow efficiencies has been shown to improve job satisfaction and reduce physician burnout."