

# Doctors swamped by 'e-medicine' demands

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(HealthDay)—Doctors say they're drowning in electronic paperwork, feeling burned out and dissatisfied with their jobs thanks to countless hours spent filling out computerized medical forms, researchers report.

Electronic health records are a cornerstone in the effort to modernize medicine. But, new systems designed to chart a patient's progress and instruct their future care have proven to be very time-consuming, the study found.

"While some aspects of [electronic records](#) can improve efficiency, computerized physician order entry is a major source of inefficiency and clerical burden for physicians," explained lead author Dr. Tait Shanafelt, a Mayo Clinic hematologist and oncologist. "Tasks that used to be accomplished with a verbal or written order in less than 30 seconds can now take more than five minutes."

As a result, physicians using these electronic records reported higher rates of burnout and increased frustration with the amount of computerized paperwork they must do, Shanafelt and his colleagues found.

The survey of more than 6,300 active physicians found self-reported burnout among:

- About 57 percent of [doctors](#) using [electronic health records](#), which serve as a computerized version of a patient's medical history. Only 44 percent of those who didn't use electronic health records feared burnout.
- Between 56 percent and 59 percent of doctors who use computerized physician order entry (CPOE), an electronic system doctors use to share instructions for patient care. Only 45 percent of doctors not using CPOE suffered from burnout.

The doctors also were more likely to be dissatisfied with their daily amount of clerical work if they used electronic records, the survey revealed.

Patients ultimately are the ones who suffer if doctors are constantly stressed out, Shanafelt said.

"Physician burnout has been linked to decreased quality of care and medical errors, as well as an increase in the likelihood physicians will cut back their work hours or leave the profession," he said.

Dr. Wanda Filer is president of the American Academy of Family Physicians. She said doctors find electronic health records to be a nuisance because the systems often have been designed to help bill insurance, rather than to aid medical care or help doctors manage their workflow.

For example, patients who go to a family doctor often need care for multiple health problems, requiring many different prescriptions, laboratory tests and care recommendations, Filer said.

"The EHR [[electronic health](#) record] is often designed for a quick clinical encounter like a head cold and becomes very clunky when you need to document more detailed information," she said.

"Trying to enter and manage vast amounts of clinical data has become incredibly time-consuming, pulling physicians away from their real purpose, which is patient care," Filer explained.

Shanafelt added that computerized records are also interfering with the personal lives of physicians.

"These electronic tools also give physicians access to the medical records when at home, which has extended the physician work day," he said.

"Studies suggest physicians spend more than 10 hours per week interacting with the EHR after they go home from the office, on nights and weekends."

Federal health care reform drove adoption of these computer systems before they had been properly tested, Filer said. Programmers need to redesign the systems so they help doctors provide better care, rather than burden them with forms.

"We spent millions of practice dollars for substandard systems that have slowed down our workflow, reduced the number of people we can see each day and caused even longer delays for visits and in the waiting room," Filer said.

In addition, regulators need to give doctors some breathing space, since the computerized records are proving to be much less helpful than initially promised, she said.

Shanafelt said support staff such as medical scribes or nurses might be able to take some of the burden off physicians. These members of the doctor's medical team could fill out the computerized forms and respond to electronic messages from patients.

However, Filer said, many practices don't have the cash to hire extra hands to help manage the computerized workload.

"Hiring staff is often not possible due to low margins in primary care and more than 15 years of poor payment for services with no money left to hire additional staff," she said. "Then factor in the cost of maintaining the EHR system, and it is no wonder [physicians](#) and other [health care professionals](#) question its value."

The findings were published June 27 in the *Mayo Clinic Proceedings*.

**More information:** For more on electronic health records, visit the [Office of the National Coordinator for Health Information Technology](#).

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