

## Heavy burden of EHRs could contribute to physician burnout

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For every hour physicians provide direct clinical face time to patients, nearly two additional hours is spent on electronic health records (EHR) and other clerical work within the clinic day. Outside office hours, physicians spend another 1 to 2 hours of personal time each night doing additional clerical work. Researchers suggest that the burden of EHRs could contribute to physician burnout. The findings of a time and motion study are published in *Annals of Internal Medicine*.

Time spent in meaningful interactions with patients is a powerful driver of physician career satisfaction, but increased paperwork and <u>time</u> on the computer means less time for direct patient care. Correlations between increases in EHR task load and physician burnout and attrition have been shown (more than half of U.S. <u>physicians</u> experience some sign of burnout), but little quantitative data is available on how physicians' spend their time.

Researchers observed 57 U.S. physicians in four states to describe how their time was allocated in ambulatory practice. The physicians also completed diaries about their after-hours work. The researchers found that during the office day, physicians spent 27 percent of their total time on direct clinical face time with patients and more than 49 percent of their time on EHRs and desk work. In the exam room, physicians spent almost 53 percent of their time on direct clinical face time and 37 percent on EHRs and desk work. After hours, physicians spent another 1 to 2 hours each night on clerical work, mostly related to EHRs.



The findings suggest that documentation support with either dictation or documentation assistant services may increase direct clinical <u>face time</u> with patients. The author of an accompanying editorial notes that both the American Medical Association and the American College of Physicians have initiatives aimed at reducing administrative burdens so that physicians can focus on the patient relationship. The author agrees that such changes could help physicians rediscover the joy of medicine.

More information: *Annals of Internal Medicine*, http://www.annals.org/article.aspx?doi=10.7326/M16-0961

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