

# How long do doctor visits last? Electronic health records provide new data on time with patients

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How much time do primary care physicians actually spend one-on-one with patients? Analysis of timestamp data from electronic health records (EHRs) provides useful insights on exam length and other factors related to doctors' use of time, reports a study in the January issue of *Medical Care*. The journal is published in the Lippincott portfolio by Wolters Kluwer.

"By using timestamps recorded when information is accessed or entered, EHR data allow for potentially more objective and reliable measurement of how much time physicians spend with their patients," according to the new research by Hannah T. Neprash, Ph.D., of University of Minnesota School of Public Health and colleagues. That may help to make [appointment scheduling](#) and other processes more efficient, optimizing use of doctors' time.

## More precise estimates of primary care visit times

Using a national source of EHR data for primary care practices, the researchers analyzed exam lengths for more than 21 million [doctor visits](#) in 2017. The study focused on exam lengths and discrepancies between scheduled and actual visit times.

Based on EHR timestamps, the mean exam time was 18 minutes, with a median of 15 minutes. "The mean exam lasted 1.2 minutes longer than scheduled, while the median exam ran 1 minute short of its scheduled duration," Dr. Neprash and coauthors write. The longer the scheduled visit, the longer the exam time.

"However, shorter scheduled appointments tended to run over while longer appointments often ended early," the researchers add. Scheduled 10-minute visits ran over by an average of 5 minutes; in contrast, scheduled 30-minute visits averaged less than 24 minutes.

More than two-thirds of visits deviated from the schedule for 5 minutes or more. About 38 percent of scheduled 10-minute visits lasted more than 5 minutes, while 60 percent of scheduled 30-minute visits lasted less than 25 minutes.

The findings suggest "scheduling inefficiencies in both directions," according to the authors. "Primary care offices' overuse of brief appointment slots may lead to appointment overrun, increasing wait time for patients and overburdening providers." In contrast, "longer appointments are critical for clinically complex patients, but misallocation of these extended visits represents potentially inefficient use of clinical capacity."

The time doctors spend with patients has a major impact on care. Average visit times seem to have increased over the years—yet physicians may still

feel pressed to do more in the available time, including documentation, patient monitoring, and prevention/screening steps.

Estimates of medical visit times have been largely based on national surveys, which rely on information reported by office-based practices. For several reasons, these estimates may not accurately reflect the actual time doctors spend with patients in the examination room.

Routine data collected by EHRs provide a new way to measure length of physician visits, Dr. Neprash and colleagues write. Their method excluded visits where EHR data didn't seem to be recorded in real [time](#) and accounted for overlapping visits due to "double-booking."

Health systems could use EHR data to track discrepancies between schedules and actual visit lengths, enabling more efficient scheduling for patients with different needs. While acknowledging some limitations and challenges of this approach, the researchers believe their findings "support the development of a scalable approach to measure [exam](#) length using EHR data."

**More information:** Hannah T. Neprash et al. Measuring Primary Care Exam Length Using Electronic Health Record Data, *Medical Care* (2020). [DOI: 10.1097/MLR.0000000000001450](https://doi.org/10.1097/MLR.0000000000001450)

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