

ELECTRONIC HEALTH RECORDS: A GUIDE FOR CLINICIANS AND ADMINISTRATORS

Edited by Jerome H. Carter
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THE QUALITY, SAFETY, AND AFFORDABILITY OF US HEALTH CARE are serious concerns. The widely quoted Institute of Medicine report *To Err Is Human* (1999) estimated that medical errors account for 44 000 to 98 000 persons dying in hospitals per year¹; a national poll indicated that 4 of 10 persons believe that quality of care had worsened in the 5 years since the report.² In the meantime, health care continues to absorb a greater proportion of household income. The US Congressional Budget Office predicts that total spending on health care will increase from 16% of the economy in 2007 to 25% in 2025.³ For almost a decade, private- and public-sector entities have consistently advocated that an integral part of solving these problems is the adoption and use of electronic health record (EHR) systems, eg, automated error checking, clinical decision support, and reliable information flow and integration among different individuals and departments involved in patient care.

Despite such advocacy, the potential of EHR systems has yet to be realized, with less than 20% of US physicians using such systems.⁴ Two key challenges for EHR adoption are having appropriate clinical and financial expectations and developing—or buying—the skill set needed for successful implementation. The second edition of *Electronic Health Records: A Guide for Clinicians and Administrators*, with contributions from 21 authors, logically and pragmatically addresses these 2 challenges.

The book is organized into 2 parts. Part 1 comprises 13 chapters addressing questions such as What is an EHR? What are the computer hardware, software, and Internet standards? How does an EHR system integrate into myriad aspects of modern medical practice (eg, business processes, quality assurance and improvement, and the clinician's role)? What are the legal and regulatory standards? Part 1 provides “the ‘what’ and ‘why’ of EHR-related technologies and issues.” The information is useful for anyone undecided about investing in an EHR system or who wishes to create an effective case to senior management about making the investment. Even if one has made the commitment to invest in a system or already has a system in place, part 1 is still worth reading to gain a comprehensive and up-to-date understanding of the increasing potential and issues associated with EHRs.

Part 2 delves into the pragmatic issues of how to select and implement an EHR system. Organized differently from

part 1 as more of a workbook, part 2 covers relevant how-to questions pertaining to selecting and effectively using consultants and vendors, drafting requests for proposals, negotiating proposals, planning for implementation, managing the project, training, migrating data, and ensuring compliance with privacy and data system security.

Importantly, this text acknowledges that no single source can sufficiently cover all topics in the endeavor to adopt an EHR system and, as a result, it recommends further reading and suggests authoritative resources. The book provides sound advice and effectively mixes prose with figures and tables. In my experience, clinical trainees have limited exposure to many of the areas relevant to EHR systems, such as clinical decision support, quality improvement, and changing physician behaviors. Although not the authors' main intent, the overviews of these areas could serve as an excellent resource for introductory courses on health care systems.

As technology and systems change, additional updates in future editions will be welcome, and I hope the author will consider 3 additions. First, create a smaller companion volume for the many clinicians who—though not responsible for the selection and administration of EHRs—might be interested in a high-level summary of how the system will likely affect their practice. Second, include a chapter similar to the “Physician Adoption Strategies” chapter that would focus on strategies for patients who wish to use the system, especially those with limited experience or confidence in using computers. Third, include a chapter on the role of and issues associated with EHRs being used to facilitate comparative effectiveness studies.

Overall, this second edition of *Electronic Health Records* should be a key resource, recommended as a must for the bookshelf or library of persons or organizations contemplating adopting or updating an EHR system.

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