It was such a good idea. Digitalize medical records to enhance communication between clinicians and capture data for population management and research. In theory, the electronic medical record (EMR) would improve outcomes (and perhaps someday it may). But for the time being, the EMR systems (of which only a few companies dominate) seem to have become more a source of irritation and frustration rather than a solution for most clinicians and may even contribute to burnout, while the ultimate goal of better outcomes remains elusive.

As a clinician and, in the parlance of software, an “end user,” my experience with EMR has been an exercise in persistent frustration. Let me count a few ways: (1) it is difficult to track what happens to my patients without clicking in and out of multiple notes; (2) the interface (which seems to have been designed in the mid-1980s) is nonintuitive and arbitrary; (3) it is difficult to keep track of medications; (4) it is difficult to prescribe; (5) if I encounter a problem, unless I already know the tricks, I can’t figure out what to do; (6) the templates don’t help my patients and are just too rigid to be of help; (7) although they can be useful and I am big proponent of measurement-based care, there is simply no time to fill out all of the available fields to measure everything; and (8) it took more than 11 hours of classroom time to try to learn how to use the system—and the course suffered from the curse of knowledge by providing all sorts of fancy bells and whistles without clearly teaching how to prescribe.

Contrast this type of experience with learning a new app on a phone—no instructions, yet intuitive and one can usually figure out how to use the app and solve difficulties that arise. Among the worst of my subjective experiences with EMR is that it frequently makes me feel dumb. A better solution is to re-engineer the EMR using design thinking. “Design thinking is, at its core, a systematic innovation process that prioritizes deep empathy for end-user desires, needs and challenges to fully understand a problem in hopes of developing more comprehensive and effective solutions.”

We need to and should demand better EMR systems for our practices and for our patients.

REFERENCES