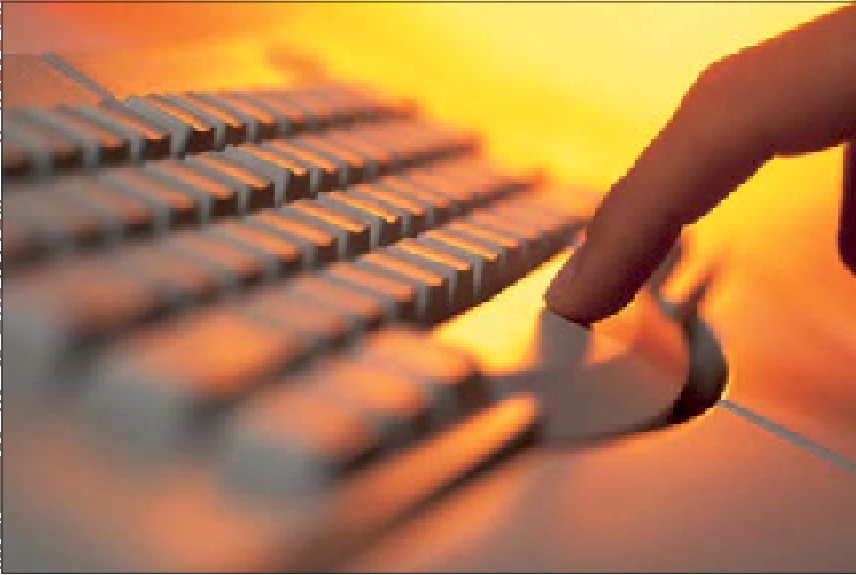


INNOVATIONS IN PRACTICE



Minnesota practice offers patients wireless Internet access while they wait

AFTER OPENING THE first private dermatology practice in Minnesota to use electronic medical records three years ago, Charles E. Crutchfield III, M.D., owner of Crutchfield Dermatology, decided to make enhancing the experience of patients a top priority. With fresh-cut flowers, a flat-screen television, classical music, and a wide selection of current magazines in the waiting room, he and his staff of 25 employees had already pleased the 175 patients who visit the practice's clinic, phototherapy center, and spa and laser center on an average day. But Dr. Crutchfield saw an opportunity to offer something more.

"Every once in a while I would see somebody working on their laptop in the waiting room," he said. "I thought, I was just at the coffee shop the other day—why don't we have Internet access for our patients like they do for their

customers?" Dr. Crutchfield asked his information technology department to set up a wireless network that patients could use; now patients who visit the practice, located in Eagan, Minn., a Twin Cities suburb, can connect to the Internet with a properly-equipped laptop no matter where they are in the building.

The response has been very positive, Dr. Crutchfield said. "The patients who have embraced it wholeheartedly," he said. "I've been thanked many times, both by patients and by the people that accompany patients. They think it's really progressive and innovative and it makes their office experience much nicer." Parents bringing their children in for a regular acne visit, for example, can make productive use of the time they spend in the office waiting room. "They're out there getting all kinds of stuff done," Dr. Crutchfield said.

Use of the service, which is free to anyone visiting the office and does not require a security code or password, has grown in the months since it was installed. "When we first put it in a couple months ago it might be one patient a day who used it, and then a couple a day," Dr. Crutchfield said. "I've seen it steadily build to the point where now it's kind of fun, I'll poke my head into the exam room to tell a patient 'I'll be with you in a minute,' and they'll say, 'Oh, take your time, I'm on the Net,' and they're typing away on

their laptop." That attitude can be a big help in a busy practice, he said. "If things get really busy or hectic, you can fall a few minutes behind and this really makes the wait time less painful." Dr. Crutchfield estimated that five to ten patients a day were using the service as of mid-May, a number he expected to keep growing as more patients see others using it and decide to take advantage of it themselves.

To ensure that patients have the opportunity to make use of a feature they might not expect in a dermatology office, they are reminded of the availability of the wireless Internet connection when they are called prior to each appointment. Dr. Crutchfield's office also sent an e-mail to each member of its list of active patients letting them know about the new amenity.

Amid concerns about maintaining the privacy and security of patient records and complying with the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Dr. Crutchfield said that his system raises no such issues. "I had the wireless broadcast set up on a whole different system," he said. "It has its own system so patients have no access to protected information at all." Even with the separate system, he said, "The initial investment to get everything up and running was about \$900, so it wasn't cost-prohibitive. The patient satisfaction that we get is worth it to us."

According to Matt Meinke, a senior technician at Next Level Café Technology Support, the firm that handles Dr. Crutchfield's technology needs, the \$900 investment bought an advanced wireless router that plugs into the practice's existing DSL line. The router can be configured to require a user name and password, and it provides a firewall that prevents patients from accessing any of the information the practice is transmitting or receiving through the Internet connection. While Crutchfield Dermatology currently

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allows open access to its wireless connection, Meinke noted that if unauthorized connection by persons outside the practice became an issue, a password could be provided to the practice's patients and outside access could be prevented. The router can also be set to limit the amount of bandwidth an individual user can occupy, preventing patients in the waiting room from delaying the online operations of the practice. •

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tems streamline correspondence and information sharing with other physicians, improving patient safety; this advantage will only grow as interoperability standards develop and more physicians adopt EMR in their practices.

Evaluating readiness

Before they can take advantage of such benefits, dermatologists need to evaluate their readiness to adopt an EMR system. According to health care consultant Margret Amatayakul, author of several books related to electronic health care transactions and principal of Margret\A Consulting, all of the recent discussion of EMRs and EHRs may be leading some practices to rush towards technology adoption before they are truly ready. "I'm concerned that we've gone from almost nothing to so much that people are in panic mode and thinking they've got to implement an EMR in the next month," she said. "They're not taking the time to really assess their readiness, look at what they really want, and think about what their expectations will be for the change." Amatayakul said that many physicians who look at adopting an electronic system simply want to do the same things they currently do in practice, but do them electronically. "They understand that there will be change, and that there will be helpful features like E/M coding support and reminders about health maintenance and click-through prescription writing," she said, but often fail to invest the time needed to adapt to such changes in daily practice and end up growing frustrated with the system they have just purchased. "If physicians are going to make this level of investment, they have to make a bit more time to plan, to learn how to use the new system, and to adapt to the change," Amatayakul said. "If they do, they'll find they're gaining tremendously. The investment in time is as important, or more, than the investment in dollars."

As Dr. Brailer and others push to make adoption more attractive to physicians, Dr. Basch suggested that for the majority of dermatologists who have not already adopted, the time has come to start evaluating options. "I think dermatologists should start looking seriously now at the products that are out there. It's very clear that we are at the point where there is no going back," he said. "It's a long process to do the research and come up with what may fit best, but dermatologists should start looking now because the first CCHIT certification standards will be released soon enough. You don't want to wait until the last minute and make a rushed purchase decision."

Next month, *Dermatology World* will provide dermatologists with practical information about what to look for as they contemplate implementing EMR systems in their offices. •