Of **EPIC** Proportions

**e-Health Mobile (mHealth)**

It is clear that many of the changes coming to us through electronic health records are difficult adjustments. One aspect of EHR non-providers fail to understand is just how clinician workflow is disrupted by the new technology. E-Health Mobile is a refreshing aspect of EHR that will directly impact clinicians in a beneficial manner. E-Health mobile will allow clinicians to have access to all kinds of clinical data such as EKGs, ventilator data, real-time obstetrical data, lab work, patient records, all from your mobile devices. (this is a good time to remind you to check **EPIC** compatibility with your personal device, it’s on the IHS and Finley web sites) Your smart phone should allow you to evaluate digitalized data from where ever you are, which will increase patient safety and improve response times to important changes in patient health status. If you have any questions regarding this technology or wish to discuss elements that may help your practice, please feel free to contact the CMIO office.

**CMIO Report**

This month we are preparing for our go-live experience in Cedar Rapids. This will be one of the opportunities most accessible to Dubuque Clinicians in the event you wish to get a “head start” on your **EPIC** training. The Des Moines and Fort Dodge areas have both successfully completed the initial phases of go-live. The training itself is 12 hours, likely spread over two days, to be followed by a quiz. The quiz takes roughly 15 minutes to complete and asks 25 basic questions regarding what was learned in the 12 hour training course. This quiz will be a hurdle for no one.

**Physician updates.**

The super user team is being developed and there are still a few slots available for membership. This position is critical to the success of the implementation. We are looking for twelve clinicians that are available to help colleagues train on the **EPIC** program during implementation, and promote adoption for the few years thereafter.

What differentiates super users from **EPIC** provided trainers are that they are physicians. This is critical as you begin to use the system. Trainers from **EPIC** know the system well, but treat most discreet data as equally important. They can maneuver around the program, but do not have the clinical experience of knowing what a **positive** review of systems means and as such, would not understand why we would stop documenting positive responses after the 20th “yeah” collected during the ROS. This will occur an unusual number of times during the process and the super user will understand how these issues apply in actual clinical scenarios.

"A good plan violently executed now is better than a perfect plan executed next week."

- G. S. Patton

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I got up with my wife, I sat down at the computer when she went to work, and I didn’t stop until she got home.”

-George Stephen

Meaningful Use
Stage One objectives are all required. Each stage one objective is thought to be a basic function of any EHR program and would have the most impact on both patient safety and ease of information flow. **H116** requires EHR implement one clinical decision support rule related to a high priority hospital condition along with the ability to track compliance with that rule.

Drivers for mHealth
The latest technology in mHealth has potential to give the clinician elements of care not previously known. That freedom does **not** come at the expense of patient care and safety. The drivers of mHealth are many and include reducing costs of care, communication with real-time and historic access, ease of use with intuitive user interface, device applications coming down in costs, and timely bandwidth approval by congress. Hospitalist and sub-specialists will appreciate the ability to offer suggestions on EKG or radiographs that prove problematic.

TIMELINE
- **October 2010** System-wide launch of IHS EPIC
- **September 2011** 100% of order sets sent to EPIC for embedding
- **March 2012** Second facility go-live Des Moines
- **June 2012** Cedar Rapids go-live
- **June 2013** Finley Go Live

Don’t forget...
The super user group is coming together with now just one year to go-live. This group will be responsible for at-elbow training for many of your colleagues. This is a critical role for local clinicians to provide to their peers. The training to use **EPIC** is going on throughout the state for the remaining four Iowa Health System affiliate go-live sessions. This role is critical as many applications in **EPIC** do not directly affect physicians. As such, the local physicians will be able to provide clinically relevant support for these peers. If you are interested in playing this important role, there are still a few spots available to fill. If you wish, you may train early on the product and begin using it in a playground format set by **EPIC**.

For more information
The CMIO office is available any time to clarify questions you may have regarding the EPIC implementation and adoption. Please contact Jody at the CMIO office to arrange a meeting.

Web links
- [http://www.ihs.org/body.cfm?id=476](http://www.ihs.org/body.cfm?id=476)
- [http://www.finleyhospital.org/body.cfm?id=250](http://www.finleyhospital.org/body.cfm?id=250)