

Computer applications in clinical practice

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Purpose of review

The prospects of improved practice efficiencies and better treatment outcomes have recently focused political attention at high levels upon the use of information technology (IT) in routine clinical care in the US, UK and elsewhere. Providers who treat musculoskeletal diseases need to become familiar with emerging governmental policies, IT industry trends, data standards and communication protocols to equip themselves with a basis on which to evaluate and influence the development of these technologies, which in turn will influence the shape of clinical practice.

Recent findings

The articles cited are categorized into the topics of government policy regarding electronic medical records (EMRs), data definitions and databases; computers in outpatient clinical encounters; EMRs; patient self-entry of historical data; computer physician order entry; personal digital assistants; and e-mail, the Internet, and the patient/physician encounter.

Summary

Government agencies in the US, UK, and elsewhere are at various stages in the implementation of national health information infrastructures. US officials are playing a greater role in prompting physicians to use EMRs and in setting standards for EMR systems. A study by the American College of Rheumatology observed, 'Increasing requirements for provider compliance with quality and outcomes reporting, HIPAA regulations, medical error reduction, including Medicare e-prescribing mandates, and downward pressure on practice revenues will ultimately drive the adoption of EMRs in office practice.' Nonuse will equate to a non-viable practice. Rheumatologists who would control their own destinies must acquaint themselves with, adopt, and exert influence on the development of these technologies with all deliberate speed.

Keywords

computerized medical records, computerized patient records, medical informatics

Abbreviations

ACR	American College of Rheumatology
CPOE	computer physician order entry
EMR	electronic medical record
HHS	Department of Health and Human Services
ICM	Institute of Medicine
HIE	national health information infrastructure
PDA	personal digital assistant

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Introduction

The prospects of improved practice efficiencies and better treatment outcomes have recently focused political attention at high levels upon the use of information technology (IT) in routine clinical care in the US, UK, and elsewhere. Providers who treat musculoskeletal diseases need to become familiar with emerging governmental policies, IT industry trends, data standards, and communication protocols to equip themselves with a basis on which to evaluate and influence the development of these technologies, which in turn will influence the shape of clinical practice.

This review of publications between September 01, 2003 and September 15, 2004 uses the broad search criteria of computer literacy, computers, microcomputers, software, software design, or user-computer interface, in English only in OVID/Medline. Most articles discuss molecular biology, patient imaging, or medical education. Fewer than 10 citations among a total of 3131 are specific to the clinical practice of rheumatology. Relevant articles are categorized by the topics of government policy regarding IT in healthcare, data definitions and databases, computers in outpatient clinical encounters, electronic medical records (EMRs), patient self-entry of historical data, computer physician order entry (CPOE), personal digital assistants (PDAs), and e-mail, the Internet, and the physician/patient encounter.

Background

The 2001 report by the Institute of Medicine (IOM), *Crossing the Quality Chasm*, recommended the collaboration of healthcare organizations, clinicians, patients, and purchasers in the redesign of healthcare processes. The report specified the free flow of information, the sharing of medical knowledge, and the use of evidence based decision making. It emphasized the use of outcomes, increased use of patient self-report data and the better use of current information technology in record keeping and information flow.

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