Providing Expertise About Your EMR Can Make You Popular

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Background

• Largest purchase group of EMR in Canada
• Rollout out 3-4 sites every 3 weeks for 6 months
• Support needed to come from within FHT as vendor did not have staff for such large group (and funds)
• Have IT specialist, IT hardware specialist, IT admin
• 65 doctors, 38 sites, 350 users
Why did pharmacists get involved

• Needed clinicians to be using EMR so that we could work remotely
• Pharmacists have been working with various software vendors-comfort level
• Prescribers were looking to pharmacists to be the experts on the medication software part
• Pharmacists were visible and accessible to help in the MD office
How do pharmacists support EMR Rollout involvement

- Provided with “expert” training from vendor
- Met with offices to help with planning of implementation- offices knew we were a resource from the onset
- Provided classroom training to FHT staff
- Member of the EMR committee
- Also know labs, referral letters, scanning, and reporting functions of software
- Entered refill RX into system for some MDs as a way of increasing pharmacist knowledge of software
Pharmacy enhancements

- Built more than 2000 aliases-prescribing shortcuts eg. amo500tid10d=amoxicillin 500mg tid x 10d
- Built compound aliases
- Built aliases with the LU codes included
- Built aliases with antibiotics based on pediatric weights
- Built templates around drug prescribing ie accutane protocols at 0,1,2,3 months
- Built in defaults for common drug allergies
- Created new default frequencies to make prescribing easier
Results

- Compound alias now used as a database to prescribe
- Doctors asking about 5 questions/request/week/pharmacist around more enhancements
- Medication writer being used to prescribe and update profile
- Pharmacists are liaison with vendor when missing drugs or inappropriate interactions are identifies
Results Continued

• PRESCRIBING PRACTICES HAVE BEEN IMPROVED- DRUGS ARE BEING PRESCRIBED PROPERLY WITH APPROPRIATE QUANTITIES!
• Reduced frustration of MDs – less resorting to handwriting RXs
• MD support staff entering meds to keep profile current (with refill RX)
• Pharmacists became valued and popular as such an accessible software expert
• EMR adopted by most physicians. Communication now possible with MD electronically
Next steps

• Involved in developing documentation standards for all IHPs
• Receiving referrals through EMR
• Using EMR for stats collection
• Using EMR to extract medication data
• Teaching prescribers how to keep med profile current
• Using the EMR to manage INRs
• Managing the Drug Interactions function in the EMR
Learning About Your EMR

- Other FHT pharmacists with the same EMR
- IT specialist for your FHT
- Software vendor
- Vendor’s manual (ok usually >1000 pages)
- “Superusers” of the system in your FHT
- Spending time “fooling” around with system