Maximizing Your Functionality and Efficiency with PCC EHR

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Course Description

• Review how to use your protocols and task queues to improve charting, patient care and office workflow

• Look at some specialty protocols to help improve efficiency for unique clinical situations

• Tools outside the EHR to help you work faster and better
Disclaimer

• I am not an EHR expert or PCC employee or trainer

• I used to use an EHR that slowed me down and wasn't customizable

• I would need 30-40 minutes at the end of each day just to get caught up

• With PCC EHR, if I need more than 5 minutes at the end of the day to catch up on charting, it's been a really bad day
Flow Tips

(some smiles, some tears)
Flow Tips

- Pre-review of chart for well visits
- Meds
- Previsit materials - CHADIS
- Problem list and family history
- Growth charts, note nutritional status
- Interval visits - consults, urgent care visits
- Tylenol/Motrin dosing
- Be prepared for some issues in advance
Flow Tips

- Sick visits - review prescriptions and visit history in advance
- Chart each patient before going on to the next one
- Ergonomics - consider use of scribe or laptop
Add-on Protocols

- To anticipate unique situations
- Endocrine ROS
- Lymphadenopathy ROS
- Oral health screening
Difficulty swallowing?
notes

Dysphonia?
notes

Neck fullness?
notes

Palpitations?
notes

Visual changes
notes

Polyuria
notes
• Build detailed ROS into particular problem protocols

• Don't be afraid to switch to or add on another protocol on the fly if the cc or reason for appt doesn't match what the actual complaint is
Abdominal Pain

- Lots of detail to make these visits easier
- Can be used for various complaints related to abdominal pain
- Often switch to this if history dictates it
Additional Complex Protocols

• Concussions
• Nutrition
• ADHD
• Asthma
• Down Syndrome
Special Protocol Features

- "Additional Notes" box
- Medical decision making
- Differential thoughts
- Helps communicate thought process to other clinicians
Clinical Summary

• Now that it can print your plan, put lots of details and resources here!

• Use of memory features when helpful - ADHD plan

• Self-help resources
Modifying Pre-Supplied Components

- Follow up by phone --> follow up by phone (nurse to call)
Special User Types

- Holding
- Pending labs
- Pending referrals
Annotations

- Use annotations to be able to quickly get a clinical snapshot of a patient
- Consult notes
- Scanned docs
- Use problem list to track long term issues as well
Outside Tool

- Typeit4me - Mac text expander and (poor) spell checker
- Saves hours of typing
- Allows for addition of detailed instructions when only 10 phrases can be held in memory.
- May use Claritin (loratadine) or Zyrtec (cetirizine) 5 mL by mouth once a day as needed for allergies. May cause drowsiness or excitability.
Reviewed natural history of febrile seizures. This was a classic febrile seizure. Reviewed small chance of progressing to epilepsy and what this would look like. Reviewed if any atypical features, would need additional workup. Reviewed likelihood of recurrence. Reviewed that classic febrile seizures have in impact on neuro development.
• There are so many little ways to make PCC EHR work for you and make you more efficient.

• These just scratch the surface

• Sharing these ideas is what really makes things work
Questions?