

## **Dictate in front of your patients**

### **Technique saves time, improves care at no extra cost**

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Tired of seeing a stack of charts every time you walk into your office? Is spending 30 to 60 minutes at the end of the day to update those charts getting old?

What if a solution to that hassle could be implemented tomorrow? And, what if it wouldn't cost you a penny extra? The answer could be as simple as doing dictation while you're still in the exam room with your patient. More and more physicians are using this technique to boost productivity, raise patient satisfaction and improve patient care while reducing malpractice risks.

**Why “on-the-spot” dictation works.** You will save time in the long run. If you are in the habit of scribbling quick notes during the visit, you must spend some additional time later on – normally 1 to 2 minutes per chart – to recall the details to flesh out the notes. That time adds up quickly. For 30 patients, the recall time alone can be up to an hour. Dictating in front of your patients won't add time to the visit. It will bring the added benefit of eliminating all that time you now spend at the end of each day to rewrite and update encounter notes. That's time you could use to see a few more patients and increase your income, relax with your family, or do personal errands.

**Why you should try it.** Few ideas to improve practice operations are free, but this is one of them. Because dictating in front of patients requires no investment, it's an idea you can try for a week or two, and then stop if it doesn't work for you or your patients.

Some patients will interrupt frequently to ask questions or add comments. In those cases, note in their record: “no IRD (in-room dictation).” It will remind you not to waste time dictating in front of them in the future.

**When you shouldn't dictate.** If witnessing live dictation seems to intimidate a patient or perhaps raises some fears about being recorded, make a “no IRD” note in the record and go back to written notes. It also might not be appropriate to dictate during procedures. Other situations in which to avoid dictation include suspected domestic violence or child or elder abuse. You might not want to announce your opinions in front of a suspected abuser who accompanies the patient during the visit. In those cases, delay your dictation until after the exam. For some physicians, this may be a patient or two a week; for others, it may be

one or two a day. In neither case should it prevent you from adopting this new work process for the rest of your patients.

**It improves patient care.** Several research studies indicate that patients leave their physician's office with less-than-complete retention of the physician's assessment and treatment plan. Dictating in front of patients means they will hear your advice more than once. Furthermore, it offers patients opportunities to clear up any misunderstandings, which is particularly important if the misunderstanding would have led to an inappropriate treatment plan.

**It enhances your ability to manage malpractice risk.** Dictating in front of patients gives them more opportunities to clear up misunderstandings and help you make the record as accurate as possible. How would it look if you had to admit during a deposition or in court that you had dictated your notes several hours after you examined the plaintiff? Dictating at the time of the encounter eliminates this concern. Furthermore, recording the phrase "dictated in the presence of the patient," into the record provides additional risk reduction for you. This note in the record may make it harder for a plaintiff to successfully argue that your instructions and/or diagnosis were unclear.

**Patients embrace it.** Most patients, especially those under age 50, want to participate in their health care. Lift some of the "mystery" of medicine by letting them hear what you're recording. To alleviate the concerns that some patients may feel when seeing you dictate, state, "I would like you to hear my assessment and treatment plan again as I record them for your medical chart. May I record them now? Please feel free to interrupt me if you feel there are any misunderstandings on my part." You'll please patients who want to be more involved in their health care. You'll also give patients a better sense of how much time and effort you put into their visit.

**Getting started.** It doesn't matter if you have an electronic medical record (EMR) or still make notes on paper charts. You can use a small digital recorder, voice recognition software or whatever other technology your practice transcription process requires. Put the recording devices in your exam rooms, and use start using them. If you still prefer to record patient encounter notes by typing or writing, then summarize aloud as you write or type the information into the record.

Dictating during the exam benefits the patient -- and you. Try it, and you'll never have to walk into your office at the end of the day to face that stack of charts again!