Objective: Upon completion of this presentation participants will be able to identify important points to consider when evaluating electronic record programs for a women’s center and how to begin the implementation process.

Summary: An electronic record for a women’s center should have the flexibility to be able to change from one anesthetic to another (i.e. labor epidural to cesarean delivery) quickly and easily. Identifying such a record keeping system which is compatible with any existing computer systems already in place at your institution requires careful evaluation of how workflow occurs.

Important workflow issues can be identified by running through scenarios such as the basic epidural placement or cesarean delivery. How these are documented may have an impact on billing and input by coders should be taken into account. Physical aspects of workflow should also be taken into consideration. Are there computers in every delivery room or will the provider bring a portable computer into each location? Uncomplicated wording that fully describes procedures which can be “clicked and dragged” rather than typed for each may allow for quicker and potentially more thorough documentation.

Training individuals begins with identifying the target audience. It may be helpful to choose a few of these individuals for early intensive training to become “super users” that can aid in the training process. They may also test the system and bring new insights the planning team may have missed. Overview training of groups can be done in a classroom setting, but most of the learning process occurs during parallel testing. It is important during this time that an auditor keeps track of frequently made mistakes. These may be addressed during follow-up classroom training or may lead to program changes.

Going live with the program can be stressful to the end-users. Choose a time during which support staff is readily available to answer questions. Instruction sheets and/or training videos for off-hour access are helpful. Auditing for frequently made mistakes should continue until the staff is comfortable with the program.

Key Points:
1. Identify appropriate electronic record programs based on departmental workflow, target users, and pre-existing computer system compatibility within the institution.
2. Physical aspects of daily work such as location and type of computers as well as how different scenarios will require different documentation as well as change in patient location should be planned for.
3. Implementation should be done in a step-wise fashion to identify problems that are not anticipated during the programming phase. Help should be available for the end users when the program goes live.

References: