



Introduction & Background

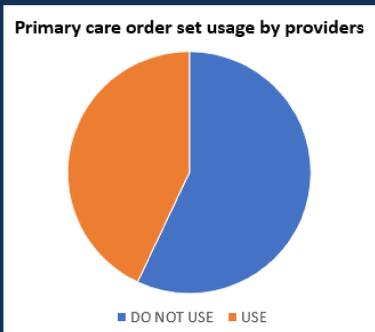
- Computerized Patient Order Entry (CPOE) sets improve efficiency, reduce errors, and allow providers to spend more time with patients.
- However, current systems may not have relevant, up to date, information or may be disorganized and inaccessible to providers.
- We observed that provider at our institution were not satisfied by the existing electronic medical record order sets.

Aim

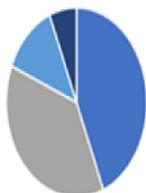
- Create an efficient primary care electronic medical record order set, which 50% of primary care providers will use for 50% of their encounters within the next 6 months.

Methods

Baseline Data:



How would you prefer primary care order set to be organized?



If you could reach the primary care order set in 1 click, would you use it?

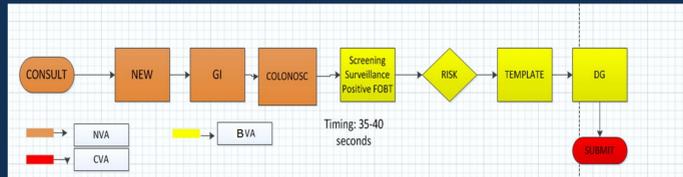


What content is most important to you in an order set?

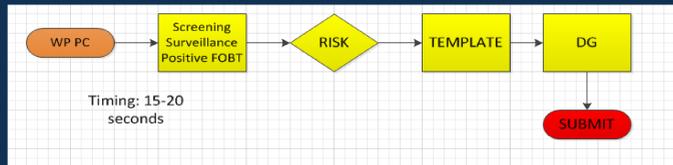


Process:

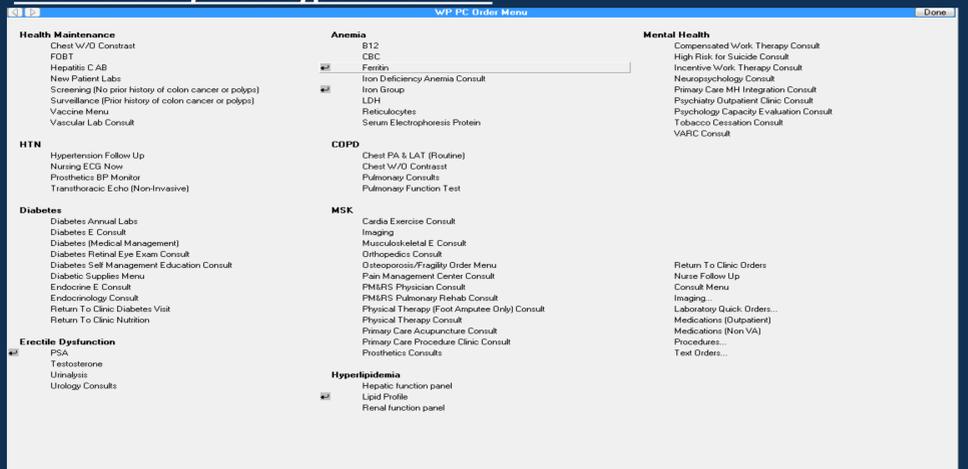
Before (35-40seconds)



Ideal (15-20 seconds)



Intervention/Prototype order set:

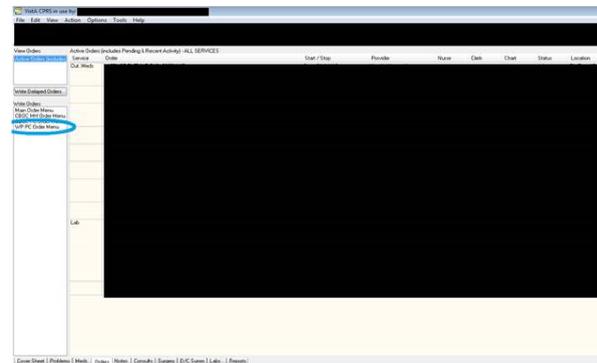


Marketing (Plan-Do-Study-Act Cycle 1):

WADE PARK PRIMARY CARE CPRS ORDER MENU SET

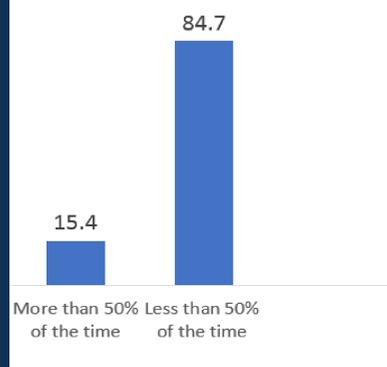
NOW AVAILABLE FOR USE!

STEPS: OPEN CPRS -> SELECT PATIENT -> CLICK "ORDER TAB" -> CLICK "WP PC ORDER MENU"



Results

Primary care order set usage over 6 months by % of providers



Conclusions

- Based on provider feedback we designed a Primary Care Oriented Order set, which was more accessible and organized, with the goal of making visits more efficient.
- We did not meet our goal, and therefore other strategies such as more feedback on the order set, more time for providers to use the order set, and other marketing strategies would be necessary long term.

Lessons Learned

- We learned quality improvement principles such as process maps, fishbone diagrams, provider feedback, Plan-Do-Study-Act cycles to generate and implement a primary care order set prototype.
- Teamwork is an essential part of QI and involves all stakeholders (providers, IT personnel, nursing staff, etc)

References:

1. Niazkhani Z, Pirnejad H, Berg M, Aarts J. The impact of computerized provider order entry systems on inpatient clinical workflow: a literature review. J Am Med Inform Assoc. 2009;16(4):539-49.
2. Koppel R, Metlay JP, Cohen A, et al. Role of computerized physician order entry systems in facilitating medication errors J Am Med Assoc 2005;293(10):1197-1203Mar