Do Your Patients Understand?

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Video: "Making the complex simple"
Our Patient Portal and Open Notes Journey
What We’ll Explore Today

Do we provide care via MyAtriumHealth:

• In a way that is understandable to patients?

• In a way that is sensitive to their perception, culture, and education?

• In the language they prefer?
Definition:
“The degree to which individuals have the capacity to **obtain, process** and **understand** basic health information and services needed to **make appropriate health decisions**.”

— Source: Healthy People 2010
Is Information Easy to Understand?

Online Health Portals

Schedule an Appointment
Easily schedule an appointment that works for you or your family.

Send a Message to Your Doctor
Send a secure health message to your care team.

Have an eVisit
Get a diagnosis and treatment plan by secure message for minor illnesses like flu or colds.

View Your Health Record and Doctor's Notes
See your lab results, doctor's notes, radiology reports, and visit summaries.

Need Flu Relief? Get care now without leaving home. Start an eVisit or an online video visit.

Thanks for using MyAtriumHealth. You have been logged out.

MyAtriumHealth Username
Password

SIGN IN
Forgot Username? Forgot Password?
New User?
SIGN UP NOW

Need Help?
Call 855-799-0044 toll-free
8 a.m. – 5 p.m., Monday – Friday
MyAtriumHealth@atriumhealth.org
The information below reflects the information in the health record. Notes created as of Sept. 1, 2015 generally will be available here. If anything looks incorrect, please contact your care team.

Request your medical records to send a copy to your healthcare provider or for yourself.

Medical Office Visit (IM, FM, Peds)
est/gerd, etc

Date Created: Jul 10, 2018
Chief Complaint
3/5/2017 10:27 EST    pt c/o coughing, fatigue, sinus congestion x 5 days

History of Present Illness
The patient presents for.
pt states symptoms started on Wed (3/1/17). pt reports coughing since Wed and seems to be getting worse, especially at hs, cough drops have helped sometimes. pt reports cough is productive. pt states some relief with mucinex d. pt reports nasal congestion/stuffiness since wed, denies sinus pressure. pt reports having PND since wed, some relief with nettipot. pt reports had a sore throat initially, but has since resolved on own. pt reports having clogged ears, but denies ear pain (0/10). pt denies fevers. pt denies vomiting, does report a decreased appetite. pt reports having some sneezing and watery eyes last wk, was taking her claritin, but has stopped a few days ago. pt reports she has continued to take her flonase. pt has not taken any ibu or apap today.

Location: nasal congestion
Pain Intensity: 0/10
Quality: stuffy
Onset: 4-5 days
Radiation: none
Aggravating Factors: worse at hs
Alleviating Factors: some relief with mucinex d
Associated Symptoms: ear pressure, cough

Review of Systems
Constitutional: No fever.
Eye: No icterus, No discharge.
Ear/Nose/Mouth/Throat: No ear pain, No sore throat.
Respiratory
Gastrointestinal: No nausea. No vomiting. No diarrhea.
Lab & Test Results

Lab and Test Results

The information below reflects the information in the health record. Results are available 24 hours after they are available to your care team and may be viewable before your provider has the opportunity to review and discuss with you. Some results may be available sooner than others. If anything looks incorrect, please contact your care team. To learn more about lab and test results, visit LabTestsOnline.

Viewing health record for [redacted]

Most recent results

Filter by date range

Start date: 07/03/2018
End date: 07/10/2018

Enter date in MM/DD/YYYY format.

Show all results

Blood Pressure
<table>
<thead>
<tr>
<th>Test</th>
<th>Value</th>
<th>Date</th>
<th>Reference Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>MCV</td>
<td>90 fL</td>
<td>Jun 01, 2018 09:47 a.m. EDT</td>
<td>80 fL - 99 fL</td>
</tr>
<tr>
<td>MCH</td>
<td>30 pg</td>
<td>Jun 01, 2018 09:47 a.m. EDT</td>
<td>26 pg - 34 pg</td>
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<tr>
<td>MCHC</td>
<td>33 g/dL</td>
<td>Jun 01, 2018 09:47 a.m. EDT</td>
<td>32 g/dL - 35 g/dL</td>
</tr>
<tr>
<td>RDW</td>
<td>12.4 % (Low)</td>
<td>Jun 01, 2018 09:47 a.m. EDT</td>
<td>12.5 % - 15.7 %</td>
</tr>
</tbody>
</table>
What Our Patients Are Saying

I enjoy the technology that provides the portal and the text and email communications.

Love the portal messaging!

I made my appointment through the web portal and it was very fast and easy. Stress free!

I was able to schedule my appointment online and speak to my Dr through the portal!
Web portal patient navigational ease of usage should be closer to simple arithmetic; it is closer to calculus.

Don't care for web portal—that's generational

I am signed up on your website portal. I never received an email telling me my doctor's notes or labs were available on the website. No one ever called me to go over labs. Yes, I can see on the report all my numbers were "in range" but I didn't know what 1/2 the markers were.
Patient Education

The following documents from the health record are available to view or download, sorted by date created. To view or download a document, you must have a PDF reader.

Patient Education

Date Created: May 11, 2018
Date Updated: May 11, 2018

Patient Education

Date Created: Dec 04, 2017
Date Updated: Dec 04, 2017
Sinusitis (No Antibiotics)

Home care

- Drink plenty of water, hot tea, and other liquids. This may help thin mucus. It also may promote sinus drainage.

- Heat may help soothe painful areas of the face. Use a towel soaked in hot water. Or, stand in the shower and direct the hot spray onto your face. Using a vaporizer along with a menthol rub at night may also help.

- An expectorant containing guaifenesin may help thin the mucus and promote drainage from the sinuses.

- Over-the-counter decongestants may be used unless a similar medicine was prescribed. Nasal sprays work the fastest. Use one that contains phenylephrine or oxymetazoline. First blow the nose gently. Then use the spray. Do not use these medicines more often than directed on the label or symptoms may get worse. You may also use tablets containing pseudoephedrine. Avoid products that combine ingredients, because side effects may be increased. Read labels. You can also ask the pharmacist for help. (NOTE: Persons with high blood pressure should not use decongestants. They can raise blood pressure.)

- Over-the-counter antihistamines may help if allergies contributed to your sinusitis.
Is the patient’s perspective really that big of a deal?

Do we think about their point of view when it comes to their:

• Culture?

• Education?

• Perception?
Patient Story: Lag time in Lab Results

*Elements of this story have been changed to protect the patient.*
In reaction, what did we do to avoid this in the future?

- Compact Cause Analysis (CCA) showed message from patient was misrouted.
- Our current Lab Policy is being reviewed to be updated for abnormal labs to require a phone call from the practice.
Preferred Language

What does the law say about this?

Title VI of Civil Rights Act of 1964 (among others) requires the written translation of materials to:

• Limited English Proficiency (LEP)
• Deaf
• Hard of Hearing (HOH)
What type of material do we need to provide to patients who are LEP, Deaf, and HOH?

• Discharge instructions
• Vital documents
• Patient Education
However, ethically speaking, what should we provide?

Does a patient have the right to understand their care in the language they prefer and most easily understand?