HearForm10

Office Management Software

Electronic Medical Records

HearForm offers an efficient process to implement Electronic Medical Records

How does HearForm work with Electronic Medical Records?

(Please see the end of this document for a detailed definition of Electronic Medical Records -EMR.)

HearForm10 Office Management Software is without question the best choice for hearing healthcare professionals. Our competitors offer only a fraction of our EMR capabilities.

With HearForm, you have the best of all worlds.

You can access your patient's electronic records locally or over the internet. Now, using FileMaker Go 1.2, you can access HearForm on an Apple IPad and even record digital signatures.

HearForm's data is searchable by any individual field or combination of fields.

HearForm can transfer data electronically from NOAH, QuickBooks, Excel or your electronic clearinghouse. No paper is printed in the process. Every form and letter in HearForm can be quickly converted into a PDF document and either emailed or Faxed directly from HearForm. Adobe Acrobat Professional is NOT required.

Please see www.hearform8.com/noah.pdf for information about the NOAH transfer option. An account with www.MyFax.com or EFax.com (or similar) is needed for E-Faxing. QuickBooks and Excel need to be purchased separately.

HearForm blows the lid off of limitations.

HearForm allows up to 64 quadrillion electronic patient records and allows up to 1 billion characters per text field. That means you will likely never have to worry about running out of space in HearForm.

The HearForm can store your documents in "Container Fields."

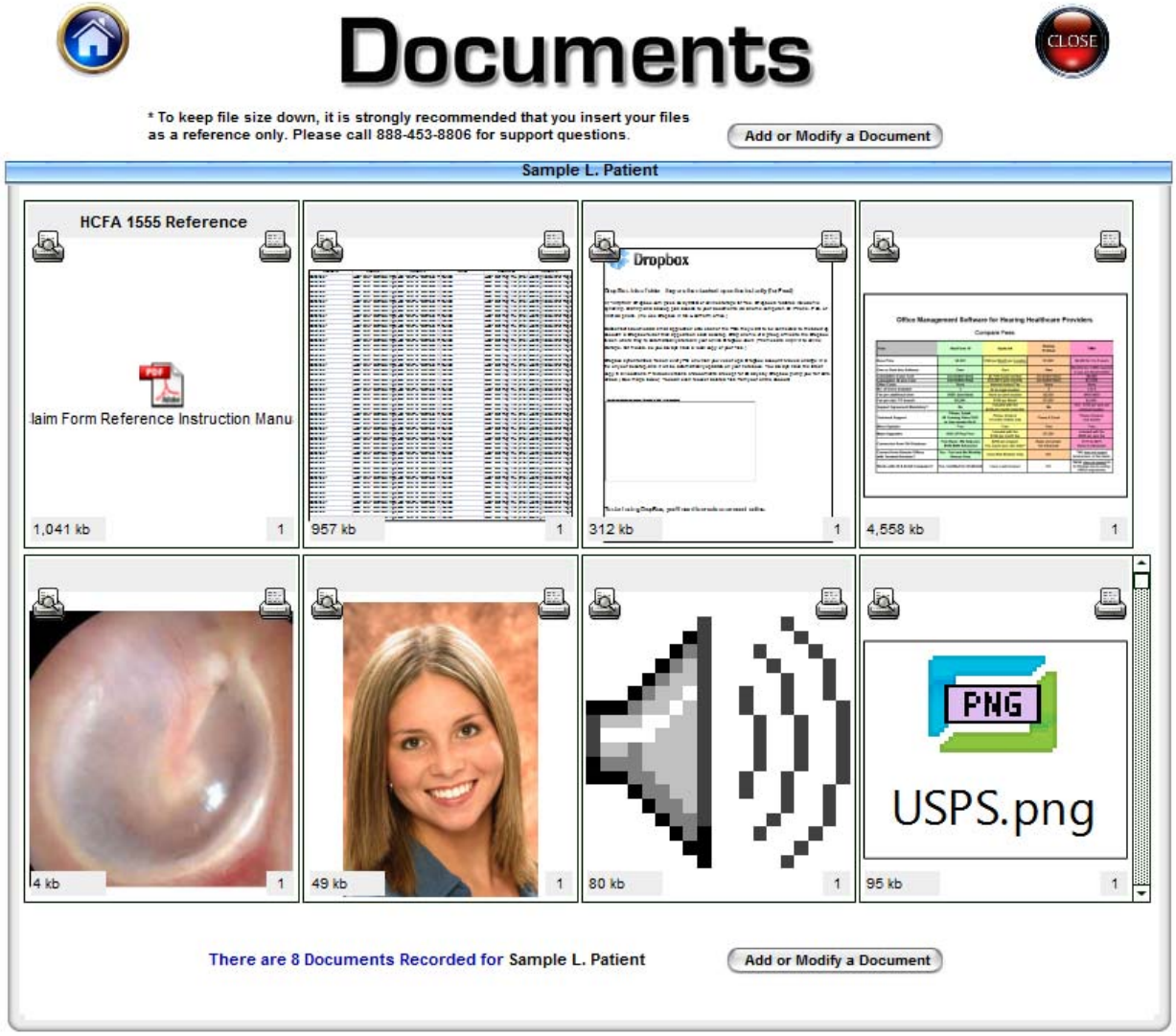
A container field can store pictures, QuickTime files, sounds you record, OLE objects (Windows) or any other type of file that you want to track in a database. The way you insert the data determines how you see and interact with the data in the container field.

- Insert a picture or QuickTime file: FileMaker Pro displays the picture or the contents of the QuickTime file in the container field. If you insert a QuickTime movie or sound file, you can play the movie using the standard QuickTime controls. For a list of the picture and QuickTime formats that FileMaker Pro supports, see the table below.

- Insert a sound: To insert an existing sound file into a container field, choose Insert > QuickTime and select a sound file in a supported format (see table below). Choose Insert > Sound to record a sound and store it in a container field.

- Insert any file: You can use a container field to store files of any type, such as PDF files, word processing files, or any other file type that you want to track. When you insert a file, FileMaker Pro displays the file's icon and name in the container field, but not the actual content.

Use the “Documents” module to store any number of electronic files.



The file types below can be stored into HearForm Software

WORD, Excel, PowerPoint, CSV, Text, .zip, .rar, lotus, Database files and **almost any scanned file.**

Additionally, you can store the following image and Multimedia files…

Picture formats	Multimedia formats	Sound formats
Encapsulated Postscript (.eps)	AVI (.avi)	AIFF (.aif)
FlashPix (.fpx)	Cubic VR	AU
GIF (.gif)	DV (.dv)	Audio CD Data (Mac OS)
JPEG/JFIF (.jpg)	FLC	MIDI (.mid)
JPEG 2000 (.jp2) (Mac OS)	Karaoke (.kar)	MP3 (.mp3)
MacPaint (.mac) (Mac OS)	Macromedia Flash 5	SoundFont 2 (.sf2)
PDF (.pdf)	MPEG (Playback)	Sound (.snd)
Photoshop (.psd)	QuickTime Movie (.qtm)	WAV (.wav)
PICS (.pcs) (Mac OS)	QuickTime VR	
PICT (.pct)	Virtual Reality (VR)	
PNG (.png)		
QuickTime Image File (.qt)		
SGI (.sgi)		
Targa (.tga)		
TIFF (.tif)		
Windows bitmap (.bmp)		
Windows Metafile/Enhanced		

Definitions

From Wikipedia

Electronic Medical Record (EMR) - A computer-based record containing health care information. This technology, when fully developed, meets provider needs for real-time data access and evaluation in medical care. Together with clinical workstations and clinical data repository technologies, the EMR provides the mechanism for longitudinal data storage and access. A motivation for healthcare entities to implement this technology derives from the need for medical outcome studies, more efficient care, speedier communication among providers and management of health plans. This record may contain some, but not necessarily all, of the information that is in an individual's paper-based medical record. One goal of HIPAA is to protect identifiable health information as the system moves from a paper-based to an electronic medical record system.

Computer-Based Patient Record (CPR) - A term for the process of replacing the traditional paper-based chart through automated electronic means; generally includes the collection of patient-specific information from various supplemental treatment systems, i.e., a day program and a personal care provider; its display in graphical format; and its storage for individual and aggregate purposes. Also called “digital medical record”.

Contrast with paper-based record

Paper-based records require a significant amount of storage space compared to digital records. In the US, most states require physical records be held for a minimum of seven years. The costs of storage media, such as paper and film, per unit of information differ dramatically from that of electronic storage media. When paper records are stored in different locations, collating them to a single location for review by a healthcare provider is time consuming and complicated, whereas the process can be simplified with electronic records. This is particularly true in the case of person-centered records, which are impractical to maintain if not electronic (thus difficult to centralize or federate). When paper-based records are required in multiple locations, copying, faxing, and transporting costs are significant compared to duplication and transfer of digital records.[citation needed].

One study estimates electronic medical records improve efficiency by 6% per year, and the monthly cost of an EMR is offset by the cost of only a few unnecessary tests or admissions. Jerome Groopman disputed these results, publicly asking "how such dramatic claims of cost-saving and quality improvement could be true".[4]

Handwritten paper medical records can be associated with poor legibility, which can contribute to medical errors.[5] Pre-printed forms, the standardization of abbreviations, and standards for penmanship were encouraged to improve reliability of paper medical records. Electronic records help with the standardization of forms, terminology and abbreviations, and data input. Digitization of forms facilitates the collection of data for epidemiology and clinical studies[citation needed].

In contrast, EMRs can be continuously updated. The ability to exchange records between different EMR systems ("interoperability"[6]) would facilitate the co-ordination of healthcare delivery in non-affiliated healthcare facilities. In addition, data from an electronic system can be used anonymously for statistical reporting in matters such as quality improvement, resource management and public health communicable disease surveillance.[7]

Under data protection legislation, responsibility for patient records (irrespective of the form they are kept in) is always on the creator and custodian of the record, usually a health care practice or facility. The physical medical records are the property of the medical provider (or facility) that prepares them. This includes films and tracings from diagnostic imaging procedures such as X-ray, CT, PET, MRI, ultrasound, etc. The patient, however, according to HIPAA, has a right to view the originals, and to obtain copies under law.[11]