

Georgia eHealth Summit



Georgia Health Information
Exchange Inc.



GEORGIA DEPARTMENT
OF COMMUNITY HEALTH

March 12, 2012

Toward Quality Care

Dr. Jim Morrow

Morrow Family Medicine
Cumming, Georgia

Being Proactive

Skate to where the puck is going,
not to where it is.

Wayne Gretsky

We Need To Move From This...

L.S.D.

The men recruited for this (deception - we were encouraged to volunteer to be human guinea pigs) in a noble humanitarian cause - searching for a cure for schizophrenia. These men were told that they could relieve all the symptoms of schizophrenia by a chemical LSD-25 and by trying to deduce the molecular configuration of this ^{drug} molecule. The effort that in time we were told would be the cure.

I joined the Project in - until - by my fingers - total of a year and a half.

I was serving a twenty year sentence and was motivated by a desire for some kind of reconstruction of sentences - I signed all my sentences for each month of participation - also I found the behavior in the government to the degree they would never take advantage of these men also felt that would give something back to society - I felt maybe we could help in a medical breakthrough and if it failed it closed off an avenue other researchers would not have to travel down.

On one occasion I asked Dr. Carl Pfeiffer who founded the Project he told me "was Cole given a large grant to Emory Univ to fund the LSD Project - but that time I felt how generous and thoughtful!

Each a week we checked into the so called "house" project.

...to This!

Weston R Black

06/23/2004 3:19 PM
Location: NFFM - Cumming
Patient ID: TESTER
DOB: 05/25/1969
Divorced/ Swahili/ Hispanic
Male

History of Present Illness (Vicki Dummett; 06/23/2004 5:20 PM)

Patient's words: cough x 3 days

The patient is a 35 year old male who presents for a follow up visit for MRI OF LUMBAR SPINE (72148).

Additional complaint:

Cough

The onset of the cough has been acute and has been occurring in a persistent pattern for 3 days. The course has been increasing. The cough is characterized as dry. The amount of sputum produced is scanty. The cough occurs mainly at night. The symptoms are aggravated by supine posture. The symptoms have been associated with headache, hoarseness, runny nose, sore throat and wheezing, while the symptoms have not been associated with chest pain, fever or hemoptysis.

Allergies (Vicki Dummett; 06/23/2004 3:30 PM)

Keflex. Anaphylaxis
Penicillins. Angioedema, Anaphylaxis

Past Medical History (Vicki Dummett; 06/23/2004 4:25 PM)

Mastectomy; Total

Family History (Vicki Dummett; 06/23/2004 3:31 PM)

Father. CAD
older sister. NIDDM

Or This...



Arundin 4-7-03 GP

...to This!

Morrow Family Medicine
1400 Northside Forsyth Drive, Suite 200
Cumming, GA 30041

NAME: Bubba Rowley **AGE:** 35 years

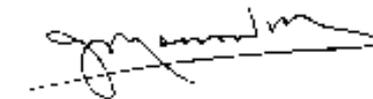
ADDRESS: 123 Any Street, Athens, GA **DATE:** 4/12/2005

PHONE: 706-123-4565 **DOB:** 05/25/1969

Rx:

LIPITOR, 10MG (PO Tab)
#30 Tab
1 Tab, PO, qd

REFILL: x2 TIME(S)



James R Morrow, M.D.
SIGNATURE ELECTRONICALLY GENERATED/PASSWORD ENCODED

The IOM Report

- **Between 40,000 and 98,000 Americans die each year from preventable medical errors in hospitals**
- **Equal to the number of people who would die if a jumbo jet crashed every day, and all its passengers died.**
- **Medical errors cause more deaths than motor vehicle accidents, breast cancer and AIDS.**

So What?

How Can I Be
A Better Doctor?



Search Criteria

Caregiver: All Patients

Patient: Abnormals Only

Dates: Show Labs

Sort: Show Referrals

Status:

Lab Results

Attach to Chart Print All... Pull Chart...
 Results Entry... Web Publish...

Profile/Panel/Test	Status	Value	Units	Range
Michael D Barrett, 005521				
▼ TRIGLYCERIDES	Final(Note)	Collect: 04/15/2005	12:00 AM	
TRIGLYCERIDES	Final	64	MG/DL	<150
▼ CHOLESTEROL, TOTAL	Final(Note)	Collect: 04/15/2005	12:00 AM	
CHOLESTEROL, TOTAL	Final	175	MG/DL	<200
▼ HDL CHOLESTEROL	Final(Note)	Collect: 04/15/2005	12:00 AM	
HDL CHOLESTEROL	Final	44	MG/DL	> OR = 40
▼ LDL-CHOLESTEROL	Final(Note)	Collect: 04/15/2005	12:00 AM	
LDL-CHOLESTEROL	Final	118	MG/DL (CALC)	<130
▼ CHOL/HDL C RATIO	Final(Note)	Collect: 04/15/2005	12:00 AM	
CHOL/HDL C RATIO	Final	4.0	(CALC)	<5.0
▼ COMPREHENSIVE METABOLIC	Final(Note)	Collect: 04/15/2005	12:00 AM	
GLUCOSE	Final(Note)	99	MG/DL	65-99
UREA NITROGEN (BUN)	Final	18	MG/DL	7-25
CREATININE	Final	1.1	MG/DL	0.5-1.4
BUN/CREATININE RATIO	Final	16	(CALC)	6-25
SODIUM	Final	143	MMOL/L	135-146
POTASSIUM	Final	4.3	MMOL/L	3.5-5.3
CHLORIDE	Final	106	MMOL/L	98-110
CARBON DIOXIDE	Final	25	MMOL/L	21-33
CALCIUM	Final	9.6	MG/DL	8.5-10.4
PROTEIN, TOTAL	Final	7.3	G/DL	6.0-8.3
ALBUMIN	Final	4.8	G/DL	3.5-4.9
GLORITIN	Final	2.5	G/DL (CALC)	2.2-4.2

Text Value and Notes of highlighted item:

Collected: 04/15/05 12:00 AM, Reported: 04/18/05 9:53 AM, Accession: AT498793F
 Result Note:
 PERFORMED BY: AT QUEST DIAGNOSTICS-ATLANTA



Patient:
Date of Birth:

Radiology Reports

Transcribed: 04/04/2005

Index Comment General

CT SCAN OF THE CHEST WITH CONTRAST 04/04/05

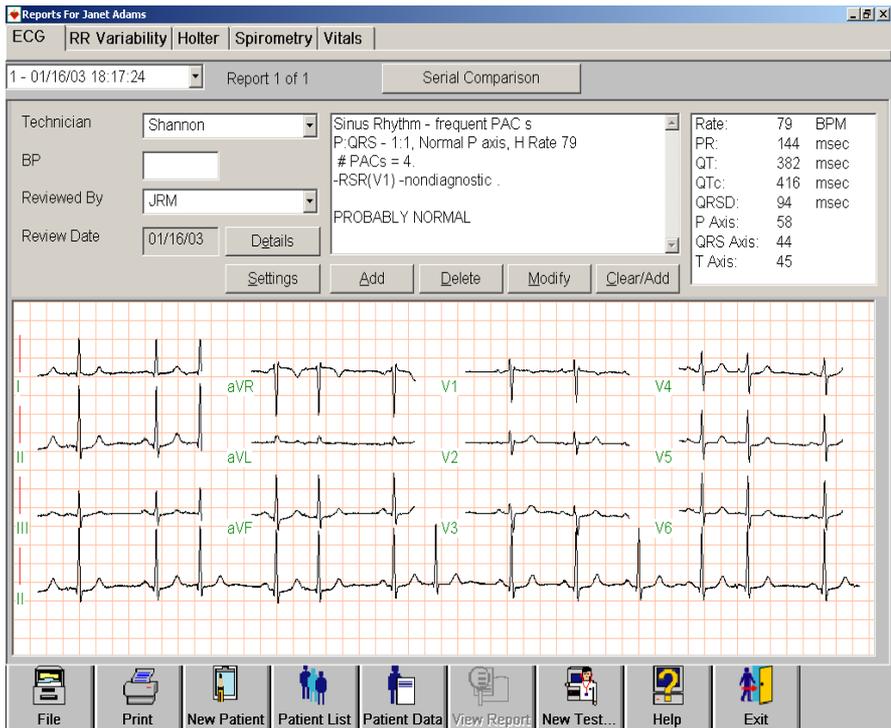
I do not have any comparison studies.

CLINICAL HISTORY- Chest swelling and mass.

TECHNIQUE- Transaxial images are obtained through chest. The patient received 95 cc of intravenous nonionic contrast material without complications. The risks, benefits and alternative of the contrast media were discussed with the patient after which informed consent was signed. The patient was given an opportunity to ask questions.

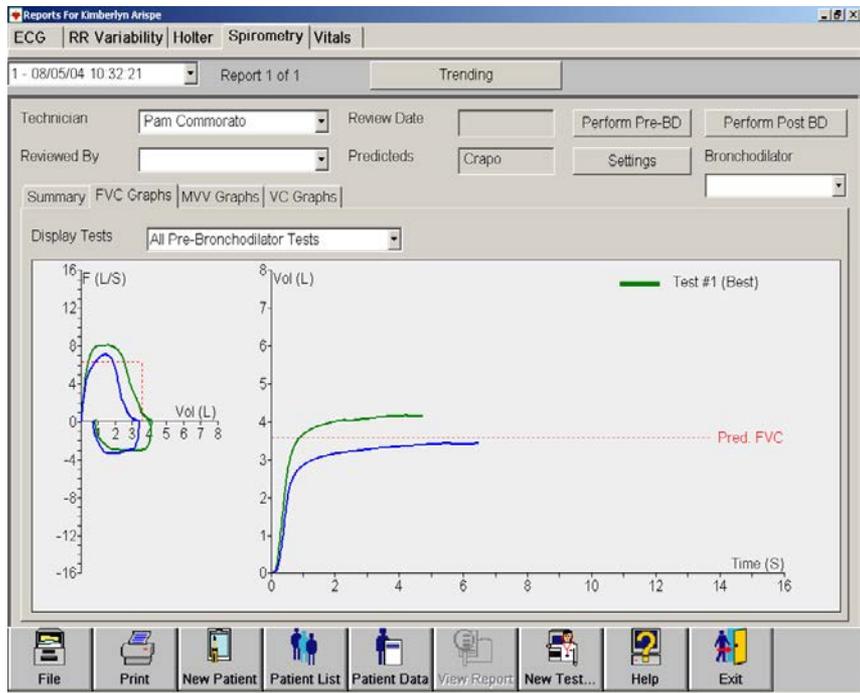
FINDINGS- Imaging of the mediastinum fails to show any evidence of significant adenopathy. Heart, pericardium, great vessels and esophagus all appear normal. Both hila appear normal.

Imaging of the lung parenchyma show at least three nonspecific small nodules on the right. The first is in the right upper lobe peripherally and measures 5.2 mm. The second is in the right lower lobe superior segment peripherally 6.0 mm and the third is in the right middle lobe anteriorly abutting the pleura measuring 5.9 mm. All of these appear to be noncalcified. Malignancy cannot be excluded. Close interval follow-up or PET scan may be helpful. There is no evidence of pleural effusion. There is some mild atelectasis in both lower lobes posteriorly.



Digital ECG

Digital Spirometry



New Mail Message



To:

Webster, Shannon

cc:

Subject:

Mail Message

Priority:

High

Internal e-Mail

Text

Image

Voice

Import



Please be sure to have all diabetics remove their socks and shoes for a foot exam. Every time.

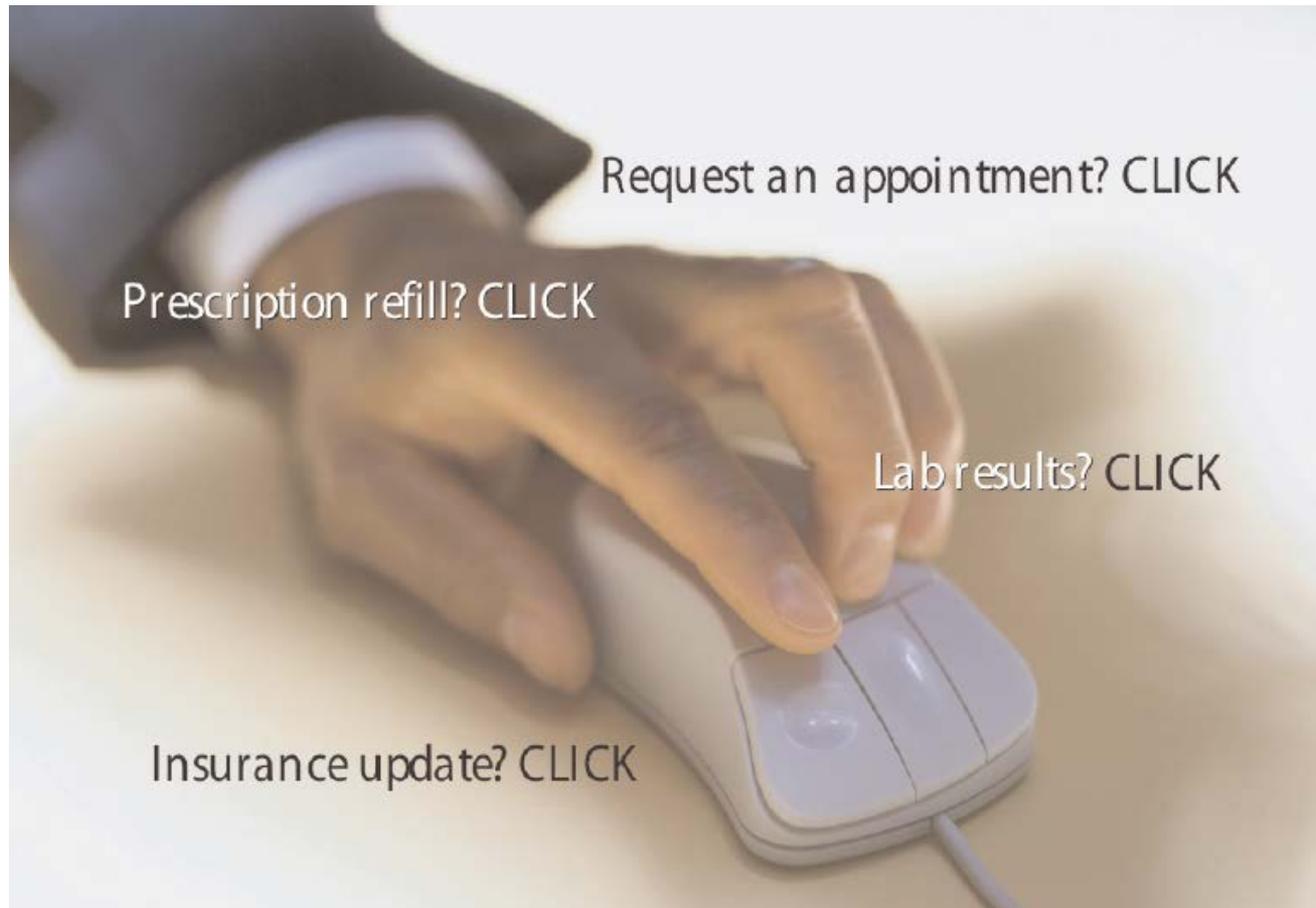
Thanks
Dr. M.



Send

Cancel

Click, Click



On-Line Access

North Fulton F

Thursday, April 14, 2005
Welcome, Jmorrow

My Health Portfolio

- [Messages](#)
- [Appointment](#)
- [Medication Refills](#)
- [Lab Results](#)**
- [Vital Signs](#)
- [Personal Information](#)
- [Insurance](#)
- [Office Visits](#)
- [Change Password](#)
- [Logout](#)

Links

[Back To NFFM website](#)

Select range: Year(s)

Profile/Panel/Test	Value	Units	Range
PSA, TOTAL	Collect: 1/31/2005 10:48:00 AM		
PSA, TOTAL	1.1	NG/ML	< OR = 4.0
TRIGLYCERIDES	Collect: 2/13/2004 9:07:00 AM		
TRIGLYCERIDES	135	MG/DL	<150
CHOLESTEROL, TOTAL	Collect: 2/13/2004 9:07:00 AM		
CHOLESTEROL, TOTAL	174	MG/DL	<200
HDL CHOLESTEROL	Collect: 2/13/2004 9:07:00 AM		
HDL CHOLESTEROL	39	MG/DL	> OR = 40
LDL-CHOLESTEROL	Collect: 2/13/2004 9:07:00 AM		
LDL-CHOLESTEROL	108	MG/DL (CALC)	<130
CHOL/HDL C RATIO	Collect: 2/13/2004 9:07:00 AM		
CHOL/HDL C RATIO	4.5	(CALC)	<5.0
COMPREHENSIVE METABOLIC PANEL	Collect: 2/13/2004 9:07:00 AM		
GLUCOSE	83	MG/DL	65-109
UREA NITROGEN (BUN)	19	MG/DL	7-25
CREATININE	1.3	MG/DL	0.5-1.4
BUN/CREATININE RATIO	15	(CALC)	6-25
SODIUM	140	MMOL/L	135-146
POTASSIUM	5.0	MMOL/L	3.5-5.3

Time is Money

- For Lab Result Notification
 - ✓ From 4.2 calls to zero
 - ✓ Takes only seconds to reply via portal
 - ✓ Work distributed to other than nurses

E-Prescribing

- Electronic refills save approx 8 minutes per refill
- Reduce duplicate work (lost prescriptions)
- Pick up verification
- Reduce fill and legibility errors
- Formulary checking – saves on call backs

And ...

- Reduce costs
- Reduce errors
- Improve cash flow through accurate coding
- Improve workflow
- Reduce overtime, staff needs

And finally...

- Higher quality care
- Be a better doctor
- Now is the time
- Our patients deserve this kind of quality

Toward Quality Care

Dr. Jim Morrow

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