



PODCAST

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# EDIS

**As you look at the landscape for EDIS systems today, how do you see an EDIS solution helping to reduce a hospital's ED costs and increase ED related revenue while improving patient care and satisfaction?**

**F**irst, any EDIS solution must be able to function efficiently in an ED's hectic, fast paced environment. Once you work in an ED, you realize that for any ED staff member, time is his or her most valuable asset. Therefore, any EDIS must be easy to use, fast and comprehensive. ED staff acceptance is the key, and speed and simplicity are essential to gain that acceptance. Obviously, a partially or unused EDIS is a waste of the hospital's money. When developing our Touch Medix Touch ED product, we focused on these criteria. Our motto is 100 percent use of your documentation to effectively treat illness and preserve health is a measure of our success – nothing less.

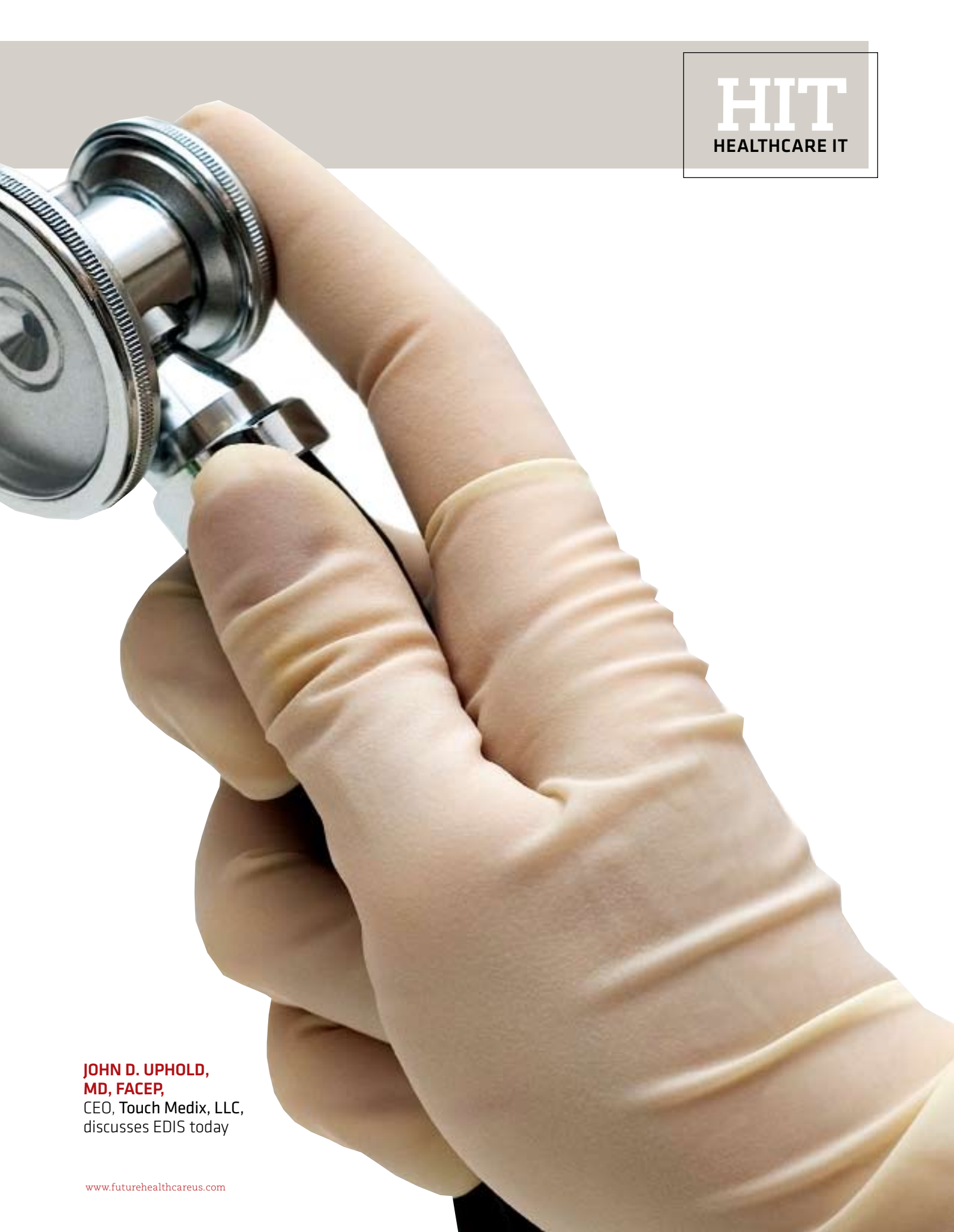
**You are saying that a simple, fast and comprehensive EDIS is the solution. Those seem to be diametrically opposed system attributes.**

It might seem that way, since most EDIS systems out there address one or two of these attributes, but Touch ED addresses all three. Without simplicity, an ED's harried staff will resist using an EDIS and in some cases, additional FTEs have actually been hired to handle charting for the providers in the ED – hardly a cost effective solution.

Increased ED revenue should be a fundamental result of implementing an EDIS solution. However, if it is slow and cumbersome, charts will be inaccurate, per hour patient volumes will be decreased, levels of service will be

lower and corresponding patient reimbursements will also be lower. Provider satisfaction and retention will likewise suffer because of the increased charting time required during or after their shifts.

Patient satisfaction in ED visits can be greatly enhanced with the speedy staff interaction with Touch ED. Touch Medix utilizes an integrated nurse and practitioner charting system that allows multiple users to work on the same patient record simultaneously. Easy, fast access to previous visit history, the ability to clone past data forward and templates that are built with medicolegal considerations that satisfy known billing criteria are all important. Then, being able to supplement a report real time with voice recognition gives providers the best of a template and dictation environment. »



**JOHN D. UPHOLD,**  
**MD, FACEP,**  
CEO, Touch Medix, LLC,  
discusses EDIS today



“REMEMBER, THE KEY TO THE ED STAFF’S USE OF AN EDIS IS SPEED AND SIMPLICITY. COMPREHENSIVENESS IS WHAT INCREASES THE REVENUE, BUT ONLY IF THE STAFF USES IT.”

#### Why do you use the new Microsoft .NET, SQL database and other newer technologies?

We believe that staying as current as possible with cutting edge technology keeps us at the forefront on our market. Data interoperability and interface to external health platforms are the future. Evolving systems such as the Microsoft HealthVault and Google Health are here now and inevitably will improve. Using .NET programming technologies, XML, along with SQL server 2005 and soon SQL server 2008 provide significant programming interfaces to insure connecting people, data, and diverse systems for interoperability. Also, because of many different interface platforms and continuing changes in the environment, Touch Medix has begun using virtualization in its testing and demonstrations. As we developed this use, we found that virtualizing our customer machines provided us with reliable and accurate testing environments. We also see virtualization as the ability to provide a cost effective system backup and recovery platform that will provide a 30 minute outage recovery far more economically.

#### Isn't it true that to have an EDIS system that is as complete as you just described would require quite a bit of interfacing with the hospital's in-patient system? Won't that take quite a while before you find out if it works well and if the staff will embrace it?

Remember, the key to the ED staff's use of an EDIS is speed and simplicity. Comprehensiveness is what increases the revenue, but only if the staff uses it. For that reason, we believe an EDIS should be available to key ED staff members for charting and to see if it will work in the ED's real world. Touch Medix makes loaner laptops and touch screens available for about a month to provide the opportunity to those sites with serious purchasing consideration to test drive Touch ED.

#### So you will allow interested hospitals to effectively trial your EDIS to prove staff acceptance prior to going

#### through the entire implementation process?

Yes. Touch Medix feels strongly that for any hospital to get the maximum benefit from an EDIS product, the ED staff needs to know that it will work for them and accept it. Our Touch ED product was designed by ED providers for the real ED world. That is why it works so effectively and efficiently in that environment.

#### What do you see as the biggest barriers to administration purchasing an EDIS for its ED department?

A large barrier to purchasing an EDIS is appreciating the ROI, that is, realizing how much revenue the hospital is losing by not having an EDIS in its ED.

We know of a five hospital group's ED billing increased by \$1,000,000 a month after implementing an EDIS. Their ED physicians are fee for service and originally complained about the concept of changing to an EDIS. After they started getting substantially higher professional service payments due to their comprehensive charts supporting higher levels of service, they stopped complaining and have become advocates. Now they want to know how to make it do more.

It is sometimes difficult to get an agreement to include all current costs and lost revenue estimates into the ROI. For example, there are transcription costs, lost ED supplies and the fact that the hospital billing departments are not billing experts for ED professional services if their hospitals employ ED providers. Many hospitals fail to recognize the unique nature of the emergency department, believing their legacy enterprise systems will work effectively in the ED environment – in other words, the square peg into a round hole syndrome. While we understand the desire to have a “one system fits all solution,” it is not practical in today's ED.

The physicians and nurses with Touch Medix actually work in the ED and understand what is important to ED staff, practitioner, nursing and others. Our Touch ED product provides the essential tools needed in today's busy and hectic ED. **FH**



**JOHN D. UPHOLD, MD, FACEP**, CEO has practiced full time Emergency Medicine in Southern California for over 30 years and is currently the Medical Director of the Emergency Care Center of Beverly Hospital in Montebello, California. He is a past President of the Los Angeles County Emergency Medical Directors Association and remains a member of its Board of Directors. Dr. Uphold completed his medical training at Baylor College of Medicine in Houston, Texas and is Board Certified in Emergency Medicine. In 1999, Dr. Uphold founded Physicians' Choice, LLC (PC), a medical billing firm that specializes in emergency medicine accounts receivable management.



*Touch*ED<sup>®</sup>

**EDIS...**

**Clinical Features:**

- Physician, Nursing Charting
- Electronic Medication Reconciliation
- Easily Editable Templates
- Tracking
- Order/Results
- Voice Recognition
- Easy To Learn...Really!

**Facility Features:**

- Rapid ROI
- Eliminate Transcription Costs
- HL7 Interfacing
- JACHO Compliant
- On-Site Trial Program
- Easy IT Implementation

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MEDIX<sup>®</sup>

**EDIS !!!**

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