

“Going paperless”, “The paperless office”, “A paper-free environment”. Many physician offices move to an Electronic Health Record, or EHR, with the ultimate goal of attaining one of the above states. Most of the leading EHR software products offer a multitude of ways for accommodating most of the incoming and outgoing forms used in everyday workflow. For instance, the ability to fax directly from the software and receive faxes into the software literally saves hundreds of pieces of paper daily per office.

The one office area that is still struggling with the integration of computerization is the waiting room. How to get a roomful of new and existing patients to fill out usually several pages of confidential information without violating anyone’s privacy is challenging. There are some kiosk solutions and web-based solutions but neither one is widely adopted as of yet, especially with all the privacy restrictions regarding email and the requirement of physical signatures, etc. The result is that patients still fill out paper forms which get scanned into the computer, attached to the patient’s computerized chart and then shredded. This is particularly true for the Privacy Policy, Release of Information, Consent to Treat, and any other forms requiring that a physical signature to be on file at all times. Also, these forms don’t necessarily have the corresponding fields defined in the EHR software to be keyed in.

One of the most inventive approaches I have seen to date comes from Donna Sammons at Laurel Gyn/OB in Greenville, SC whose office adopted a comprehensive EHR system earlier this year. Donna has laminated the two pieces of paper every new patient is required to fill out: notice of privacy practices and permission to contact/leave messages as well as the release of information and payment of benefits. She then has the new patient fill them in and sign with a black dry erase pen, scans the completed forms into the computer, and wipes clean for the next new patient. How simple. She keeps two or three sets of these laminated forms on hand at all times and continues to reuse. To date the original set has lasted over two months of daily use without needing to be replaced.

As with any new process there were a few kinks to work out in the beginning. First, the dry erase markers need to be FINE POINT in order to be legible after scanning. Second, red markers leave a residue when used so they were ruled out; blue and green markers did not show up when scanned so they were obviously ruled out. Donna was able to find black dry erase markers that have an eraser on the other end so if there is an error the patient can erase it easily without having to use a tissue (or some other means). She also indicated that the press and stick lamination sleeves do not hold up as long as the thermal lamination process. While Donna is fortunate enough to have a thermal lamination machine in her office, I was able to find them on the Internet for around \$199, or Kinko’s offer laminating service for only a few dollars a sheet. As Donna is an office manager at a busy practice, if you would like more information regarding this process or these forms, please contact me, Carin Slader, at 864-297-8889 or by email at [cslader@mdserv.com](mailto:cslader@mdserv.com) and I would be happy to share them with you.