# **Integration of Hospital Medical Records**

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## Background: Complaints from Users of Hospital Charts

#### **Patients and Families**

When patients are seen by physicians in the hospital, they do not make a distinction between seeing their doctor privately, or as part of a hospital clinic. Similarly, if they have tests or procedures done in the hospital, they assume they are patients of the hospital.

When these families subsequently contact medical records to obtain access to their charts, as provided for by the law, they are surprised and annoyed to learn that their hospital chart contains no information about some of their doctor visits or some lab results, and that medical records has no way of accessing this information.

## Clinicians

When a patient is seen in clinic or the emergency department, it is often learned that they are being followed by a hospital department which maintains its own charts, rather than using the hospital chart. Although the chart may be accessible during regular working hours, it is usually difficult to get, and essentially impossible outside of regular working hours.

When it comes to obtaining information from a physician's private chart for an office visit, the fact that the office visit took place in a hospital office means that extra effort has to be expended to explain to the patient why one does not have instant access to this information; that it requires telephone calls and faxes, and depends on whether the other physician is available or not. However, this is essentially no different from attempting to get information from a physician who saw the patient in his or her office outside the hospital, except in terms of the patient's perceptions.

## Analysis: Two Distinct Problems

The above complaints arise essentially because of two separate and distinct situations:

First, some hospital departments maintain patient charts separate from the hospital chart. The implicated departments include:

- Herzl Family Practice Centre
- Medical Oncology Clinic; when patients are receiving chemotherapy, the lab test results must be available immediately to the oncologist for making treatment decisions. The hospital medical records service had been unable to put lab results into the charts rapidly enough to meet the oncologists' needs.
- Psychiatry Outpatient Service; the rationale originally had to do with maintaining confidentiality of psychiatric information, but a more important reason nowadays is the physical separation between the hospital proper and the Institute of Community and Family Psychiatry.

Second, medical specialists who have private offices in the hospital, maintain charts for their patients which are independent of any hospital chart. In fact, their patients may not even be registered as hospital patients. When these physicians request lab tests or x-rays, the results are sent back to those physicians, but copies are not put into the hospital charts.