Noteworthy addition

Some physicians find using scribes improves their interactions with patients.

BY JEANNE METTNER

Eighteen months ago, Lance Silverman, MD, was at a crossroads. An independent orthopedic surgeon with a growing private practice, he was passionate about giving each patient individualized attention. But in his personal life, he was paying a price. After a full day of seeing patients, Silverman would spend countless hours dictating notes. “I wasn’t sleeping much; I would kill the weekend finishing the days’ clinic dictation because it would take so long to record it to my expectations,” recalls the founder of Silverman Ankle and Foot in Minneapolis. “And I was missing out on precious family time.”

Silverman had watched scribes migrate from emergency rooms to clinics. He talked with some orthopedic colleagues who had successfully incorporated them into their practices and in January 2014 decided to try using one.

Silverman says working with the scribe allows him to have the best of both worlds: extensive one-on-one time with his patients and more personal time. “Adding one person to my clinic has led to an exponential improvement in my life,” he wrote in a March 2014 blog entry on his website.

A role born of necessity
Scribes entered the health care workforce about 10 years ago and secured their place after the American Recovery and Reinvestment Act of 2009 introduced “meaningful use” incentives to ensure widespread implementation of electronic health record (EHR) systems. (According to 2013 data published in *Health Affairs*, nearly eight of 10 office-based physicians are using some form of EHR technology.) But the move to EHRs, which require physicians to enter and access patient information using a computer rather than a paper chart, has left many feeling overburdened. A 2013 study by the Rand Corporation and the American Medical Association found that physicians are “frustrated by systems that force them to do clerical work or distract them from paying close attention to their patients.”

Scribes help remedy that, as they sit in on the patient-physician exchange and enter information into the patient’s electronic record. Except in cases where a physical examination requires confidentiality or privacy, the scribe will stay throughout the visit to document exam findings and treatment recommendations, pull up relevant medical record data and
test results, order labs, enter billing codes and write preliminary summaries of the patient visit. Although scribes free physicians from the tether of the computer, the question remains as to whether their presence has an effect on the physician-patient relationship and on the way physicians practice medicine.

Third wheel?
In emergency departments, where scribes were first used, the physician-patient relationship isn’t as much of an issue, as physicians rarely see their patients more than once. But when scribes started moving into outpatient clinics, some experts became skeptical. In a March 2014 Medscape video commentary, medical ethicist Art Caplan acknowledged the potential allure of scribes in the clinic setting but ultimately denounced their use, concluding that bringing a third party into the clinic visit may introduce errors and is simply putting a Band-Aid on the problem of “not having enough time in medicine to pay attention and listen carefully when we are face-to-face with our patients.”

Not all would conclude that. “I have a panel of 650 patients, and in the last three years, I have had only three individuals ask not to have the scribe present,” says Frederick Townsend, MD, FACP, an internist with Sanford Health’s Broadway Medical Center in Alexandria. He says on the rare occasion when a patient indicates they want to speak with him privately, he will ask the scribe to step out. Townsend, who has been in practice for 37 years, says that although practice will never be the same as it was before EHRs, having a scribe gives him more freedom to interact with patients and focus on the exam.

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“By not having to organize things on the computer in the exam room, I have more freedom to think diagnostically and try to reach a conclusion without worrying I might forget to record some significant symptom or finding at the end of the visit.”

Productive and patient-friendly
Before integrating scribes into his cardiology practice, Alan Bank, MD, director of research at United Heart and Vascular Clinic of Allina Health in St. Paul, decided to investigate their effect on his practice. He led the first prospective, controlled study evaluating the effect of using scribes on a clinic’s productivity, revenue and patient interactions. During the research period, four of the clinic’s 24 cardiologists spent 65 clinic hours with scribes and 65 hours without them (standard care). Although patient satisfaction was high both...
with and without scribes, when the physicians used scribes, they appeared to have more high-quality interactions. Among the differences: Physicians who used scribes had, on average, more than five extra minutes of face-to-face time with the patient, and the quality of their interaction—as assessed by an independent, experienced observer—was significantly better than without the scribe present. In an article in a 2013 issue of *ClinicoEconomics and Outcomes Research*, Bank and his co-authors noted that “a number of patients commented to clinic staff about the benefit of having the physician’s full attention without distraction from the computer.” In addition, when the physicians used scribes, they saw 81 more patients and generated more than $205,000 in additional revenue for the health care system over the 60-day period following the clinic visit.

**Sticking with scribes**

As a result of what they learned from the study, 10 of the 24 physicians at Bank’s clinic are routinely using scribes. Bank is one of them. “What I am hearing from patients is that I focus on them more now, rather than stare at a computer screen,” he says. Of his 1,500 patients, only one has requested that he not use the scribe during the visit.

Silverman, too, thinks his patients have accepted scribes. “No patient has ever looked cross-eyed at her [the scribe] and said they didn’t want her in the room,” he says.

Both agree that using scribes can be beneficial for patients and physicians alike. “There is a lot of good care that we are giving patients because we are using scribes and no longer being inefficient,” Bank says. “We are sleeping better, for one thing, but they are also allowing us to be more productive and improve patients’ access to care. The bottom line is that every hour you save of doctors’ time is huge.” MM

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