Obtaining the medical history of patients in a emergency department with a digital Self-Check-inanamnesis-tool – a case study



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Introduction and Aims

Doctors an nurses should spent most of their working time focussing on their core competencies: Practising medicine and dealing with patients. Unfortunately we have to notice a general increase of time consuming bureaucracy in healthcare, obviously distracting

us from those precious activities. Our aim was to evaluate the the use of a digital Self-Check-in-anamnesis tool in our emergency department and evaluate its potential to prevent the drift from medical practice to bureaucracy.

Methods

We collected our data using a digital self-check-in-anamnesis tool (sublimd/swiss company), which was handed out (software on a tablet) to those of our patients, who seemed to be able to handle a tablet and answer questions on it (age, comorbidities, language english or german). The patients completed an anamnesis questionnaire followed by a short and simple second questionnaire to give us feedback. A continous text describing the patient's anamnesis was generated automatically by the software and could be used as a source of information before seeing the patient as well as for the final medical report. We provided another voluntary electronic questionnaire for the responsable doctors.



Results

Within 3 month we collected 370 questionnaires from our patients. According to our data, medical history taking with the software turned out to be a widely accepted approach among our patients. Patients would use the software again¹ and confirm, that the questions are easy to understand². Most patients also are confident that using the software helps doctors to prepare themselves before they contact the patient³ and expect an improvement of the quality of their treatment using the software⁴.



Unfortunately the return rate of the doctor's questionnaires was too low (37) to commit oneself to reliable statements. Trends show, that subjectively doctors seem to need less time when they use the software (12 min average less/patient) and the provided report of the software could be used in most cases (28 of 37). The automatically generated text was often used in the final medical report with no or only few changes. Most reports were proofread and corrected in 1-2 minutes.





pports4I think this software improves the
quality of my medical care



3 I think, the software supports doctors preparing for their patients



We consider the software as a very useful and widely accepted tool for a certain group of patients (able to use the software, not too much complaints, not too complex medical history). We believe in an improvement of the quality of the treatment due to priorly informed doctors resulting in a more focussed consultation. Patients

are wisely engaged during waiting times and prepare themselves for the medical consultation. Furthermore it seems to reduce time doctors need for administrative work per patient, but we will need further data to prove it.

