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Forms, forms, and more forms...

We've probably all been hospitalized at one time in our lives, and during whatever span of time we had to spend there, we probably experienced one or two moments of concern when we were repeatedly asked the same questions by a variety of well-meaning practitioners. Several times during

my own recent stay in the emergency room, I wanted to ask: "Are you guys talking to each other?"

There was also quite a bit of confusion. Despite the fact that the shin bone is connected to the knee bone, and so on, I'm still not sure why the date of my childhood tonsillectomy was significant to an MRI on my shoulder.

Now imagine these scenarios expanding over months of care — maybe even for the rest of your life — when suffering from a chronic disease or a disabling injury. Most of us in the industry have more than a working knowledge of the healthcare system and we can even be overwhelmed by the paperwork, confusing forms, etc. Imagine the stress and difficulty faced by those who don't have this background.

If we believe our face-to-face encounters are not satisfactory in getting the important information about us to the right people, what happens when it is all put on paper, or, as is hopefully more the case, in an electronic medical record (EMR)? Will these disparate records that hold important clues as to how to, or not to, treat us ever be able to talk to each other? The push is on from many levels with multiple stakeholders — individual patients, government agencies, and healthcare professionals and organizations — to come up with a solution to expand the implementation of EMRs. Even as some hospitals and physician offices begin to more aggressively support EHRs (electronic health records) and EMRs, the problem of interoperability still remains as these records are being generated and maintained across an ever-broadening spectrum of healthcare delivery systems, none of which can successfully exchange information with one another.

Two particular categories of patients are at the forefront of this crisis: those who have been diagnosed and told they have a terminal disease, and our country's severely wounded military service members, who are forced to transition from the Department of Defense to the Department of Veterans Affairs and into the civilian healthcare system.

The idea of not being able to have all the medical records of a loved one in one easy-to-navigate place is also very troubling for caregivers. And in some cases, caregivers cannot even get the medical data needed to provide proper care for those they love. Any system that denies information access to a caregiver or patient is not providing the best care for said patient. For patients to get the best out of our healthcare system, a sustainable and complete medical history that gives each patient the opportunity for better care is a necessity.

There are many ideas on how this can be accomplished and who is responsible for making it happen. With more than 38 million people being hospitalized each year, now is the time for everyone to stop theorizing and get to work.

Record busting