

Healthcare Documentation Creation Best Practices

Sample Orientation Procedure for New Dictators

Definition of a Health/Medical Record

The health/medical record is the compilation of pertinent facts about a patient's medical history, illnesses, and treatments. By law, the health/medical record is a legal business record that must be created and maintained in accordance with applicable public health laws.

Clinical documentation is used for many purposes, including:

- Communication with other care clinicians treating the patient
- Communication with family members
- Understanding the patient's expectations
- Hospital reimbursement
- Ensuring quality of care
- Legal attestation of care provided
- Medical statistics/research

Rules for Completion of Health/Medical Record Notes

- All entries in the health/medical record must be dated, time-stamped, and authenticated.
- Progress notes must be completed within 48 hours of visit.
- All notes pertaining to the care of a patient written by a resident require co-signature by the supervising licensed practitioner.
- History and physicals must be completed within 30 days prior to or 24 hours after admission.
- Brief operative notes must be completed immediately after surgery/procedure.
- Operative reports must be completed within 24 hours of surgery.
- Discharge summaries must be completed within 24 hours of patient's discharge.

Policies for Review

- Electronic Signature for Medical Records Documentation Policy
- Record Completion Policy

Dictation and Transcription Options

- Organization's medical documentation is completed by (outside vendor or in-house).
- Templates (macros) can be set up in the transcription vendor's system for dictators upon request.
- Reports dictated through transcription vendor's phone dictation system are sent to the provider's EHR InBasket for review and signing.
- Transcribed reports upload to organization's EHR in Draft and Final Signed status.

Dictation Options

- Partial Dictation is possible within the electronic health record note. Look for the microphone icon in the toolbar. In the templated note, click in the area where the dictation is to be inserted. Then, click on the microphone icon. The dictation box will open, which allows dictation to begin. Click the record button. When finished dictating, click the Accept button. This inserts a hyperlink into the note. The recorded dictation can be heard by clicking on the hyperlink.
- Phone dictation will be completed by transcription services and uploaded to the electronic health record for review and authentication/signature. The transcribed report will file into the EHR. (See separate sample phone dictation instruction card.)
- Front-end speech recognition allows real-time completion of a note by the clinician, with review and editing completed by the clinician prior to signing.

Resources

Ensure appropriate healthcare organization contact numbers are provided, for example:

- HIM Contacts & Phone Numbers
- Help Desk