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Cause of Death: Sloppy Doctors

By Jeremy Caplan

Doctors' sloppy handwriting kills more than 7,000 people annually. It's a shocking statistic, and, according to a July 2006 report from the National Academies of Science's Institute of Medicine (IOM), preventable medication mistakes also injure more than 1.5 million Americans annually. Many such errors result from unclear abbreviations and dosage indications and illegible writing on some of the 3.2 billion prescriptions written in the U.S. every year.

To address the problem—and give the push for electronic medical records a shove—a coalition of health care companies and technology firms will launch a program Tuesday to enable all doctors in the U.S. to write electronic prescriptions for free. The National e-prescribing Patient Safety Initiative (NEPSI) will offer doctors access to eRx Now, a Web-based tool that physicians can use to write prescriptions electronically, check for potentially harmful drug interactions and ensure that pharmacies provide appropriate medications and dosages. "Thousands of people are dying, and we've been talking about this problem for ages," says Glen Tullman, CEO of Allscripts, a Chicago-based health care technology company, that initiated the project. "This is crazy. We have the technology today to prevent these errors, so why aren't we doing it?"

One of the reasons is that doctors haven't invested in the needed technology, so it's being provided to them. The \$100 million project has drawn support from a variety of partners, including Dell, Google, Aetna and numerous hospitals. "Our goal long-term is to get the prescription pads out of doctors' hands, to get them working on computers," says Scott Wells, a Dell vice-president of marketing. Google is designing a custom search engine with NEPSI to assist doctors looking for health data. Insurance companies such as Aetna have pledged to provide incentives for physicians using e-prescription systems.

Although some doctors have been prescribing electronically for years, many still use pen and paper. This is the first national effort to make a Web-based tool free for all doctors. Tullman says that even though 90% of the country's approximately 550,000 doctors have access to the Internet, fewer than 10% of them have invested the time and money required to begin using electronic medical records or e-prescriptions.

By providing doctors with free tools and support—and perhaps a little prodding from the big insurers who pay the bills—the NEPSI alliance hopes to encourage a quickening in adoption of electronic prescribing. Because the new program is Web-based, no special software or hardware is required, and NEPSI says the new system takes 15 minutes to learn. Sprint plans to give away 1,000 web-enabled phones to be used to transmit e-prescriptions and to demonstrate the technology's ease of use. To keep pharmacies plugged into the new system, SureScripts, which links pharmacies around the country much like the national ATM network connects banks, will handle the e-prescriptions traffic from doctors to the country's 55,000 pharmacies.

Automation should eliminate many of the errors that occur when pharmacists misunderstand or misrecord medication names or dosages conveyed messily on paper or hurriedly by phone. Given that there are more than 17,000 pharmaceutical brands and generics available, a spoken request for Celebrex, for instance, can be mistaken for Celexa, or a notation requesting 150 milligrams of a drug might be read as 1500. In electronic systems, drugs and dosages are selected from menus to prevent input errors, and pharmacists don't need to re-enter information.

SureScripts CEO Kevin Hutchinson says one key to reducing medication errors is to get the most prolific prescribers to transition to electronic processing. "Not a lot of people understand that 15% of physicians in the U.S. write 50% of the prescription volume," Hutchinson says. "And 30% of them write 80%. So it's not about getting 100% of physicians to e-prescribe. It's about getting those key 30% who prescribe the most. Then you've automated the process."

Wider adoption of e-prescribing could lead to further efficiency in medical record keeping, which many believe is vital to both improving health care delivery and lowering costs. "Electronic prescribing could be an on-ramp for physicians beginning to use a full-featured electronic medical records system," Hutchinson says. "That's the holy grail."

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