

## Re: Electronic Medical Record

**Source:** <http://sci.tech-archive.net/Archive/sci.med.transcription/2004-06/1585.html>

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**From:** 14tonks (mail.2.14tonks\_at\_recurser.net)

**Date:** 06/23/04

Date: Wed, 23 Jun 2004 11:53:47 -0400

LOL! That should say "to make EMRs truly usable".

"14tonks" <mail.2.14tonks@recurser.net> wrote in message  
news:2jtn7vF15baftU1@uni-berlin.de...

- > *I agree technology will advance. However, if they expect it to advance by*
- > *dropping compensation for MTs because they have advanced backwards in*
- > *terms*
- > *of production, they may have a problem. Either they will have to come up*
- > *with systems that really do not require anyone to type into them, they*
- > *will*
- > *have to make it possible to type the information with at least the same*
- > *level of efficiency as is possible today, they will have to pay more for*
- > *what typing is still required, or they will have to export all the work to*
- > *places where compensation is less. Paying more may well leave them with a*
- > *net saving, as there are other efficiencies these systems make possible*
- > *even*
- > *if they slow down transcription production. After all, if you no longer*
- > *need a file clerk pulling charts, you just gained a whole salary. Put*
- > *part*
- > *of that savings towards paying for increased transcription time, and you*
- > *are*
- > *still ahead of the game.*
- >
- > *It is actually quite possible to design in efficient export/import of*
- > *transcription, as the few systems that have bothered to do that*
- > *demonstrate.*
- > *Whether that is the final route taken to make Emirs truly usable is*
- > *another*
- > *question, of course.*
- > --
- >
- > *Sheila*
- > *To reply to me, add the prefix real. to my address.*
- >
- >
- > *"CLJ1219" <clj1219@aol.com57894789> wrote in message*
- > *news:20040623111316.23098.00000532@mb-m07.aol.com...*
- > > *by enabling simple export/import to allow MTs to work with the word*

> > >processors and tools they use now. The latter is probably the  
preferable

> > >solution, but it exists in only a very few EMRs at this point.

> >

> > That would be cool. I personally don't believe that will happen because

I

> > believe technology will advance, even if people don't.

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