

The Voice of the Physician

Comments: SRS Clients

Name	Practice	Comment
Name provided only to the government at the request of signer		<p>1. Poor adoption of EHR by physicians is not a financial issue; it is a solution performance issue.</p> <p>2. If solutions in the marketplace had performed at the physician level from the standpoints of speed, usability (face to face with the patient) and subspecialty content, then the incentives really would not be necessary...but they would help.</p> <p>3. CCHIT is very, very flawed. I was looking at a web-based EMR built specifically for orthopaedic surgery focusing on the needs listed above. This product was called ClinicSuite and it was quite excellent and can be used on top of document imaging solutions such as SRS or others. CCHIT requires that a clinical case for OBGYN be run through the solution as one of the tests. How can this make sense for a solution built from the ground up for orthopaedic surgery???</p>
Dennis Delaney, Director of IT	Durango Orthopedics, Durango, CO	<p>As the Director of IT for a 10 doctor specialty practice I must constantly be concerned with cost effectiveness as well as ease of use. This is a solution that met our budget constraints and allowed our physicians to continue to spend their valuable time treating patients instead of learning how to run a computer program. We increased security of PHI significantly by no longer having printed items around the office.</p>
Name provided only to the government at the request of signer		<p>CCHIT approved systems are totally inadequate for a large dermatology practice and would drastically reduce productivity--SRS meets our needs extremely well--please allow hybrid EMRs to be included in the government's plans--we want to increase productivity and efficiency not decrease it!</p>

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Karl Stein, Executive Director	Raleigh Orthopaedic Clinic, Raleigh, NC	EHR systems like SRS allow physicians to have the information they need to practice efficiently. To reduce or impede the efficiency of physicians should not be the result of an EHR system. Rather providing information needed to keep physician productivity should be the objective. SRS has allowed our physicians to achieve that goal and remain productive.
Kenneth Low, MD, President	Kenneth C. Low, M.D., A Professional Corporation, Fremont, CA	I have abandoned the 'point and click' program because it took too long to input data. I found myself staring at the monitor more than caring for the patient! My present hybrid system is excellent. I can go back and read an old progress note quickly and record my findings efficiently. The Point and Click system is not an alternative to good patient care.

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Traci Briggs, Practice Manager	Obstetrics And Gynecology Associates, Kissimmee, FL	<p>I have been an SRS user for four years now. I find new uses every time I turn around which allow me to share my patient's information with their healthcare team both within my multi-location practice and with specialists and hospitals. I have eliminated or reduced paper usage in almost every aspect of my practice due to my use of SRS's electronic storage system. We receive lab reports and dictation digitally rather than on paper which has the added bonus of making the information instantly available to our entire team. A specific example is this: Our sonographers produce their reports on live SRS documents rather than on paper now. The reports are forwarded, as an electronic message, to the doctor for review within minutes of the generation of the result. This way, he can send these reports to other specialists with the push of a button instead of waiting three days for the receptionist to find the chart, paper clip the report to the front and lay it on the doctor's desk where he may not sit for the next two days. With our old, paper heavy system, he would then write a recommendation on the report and put it on a nurse's pile of paper charts, along with routine medication refills. There it would wait for her to wade through her mess of papers and realize that there was a priority surgeon referral which needed to be forwarded to the correct staff person to expedite that process. The next staff person would then begin the wading process all over again. A surgeon specialist may have waited a week or more to see an abnormal ovarian scan before we began using SRS. Now he will receive it, in his office, the same day the scan is performed.</p>

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Name provided only to the government at the request of signer		I have investigated many other types of electronic medical records systems and this is the only one I've seen that will not interfere with the productivity of my office and will allow me the flexibility to record patient data in the most efficient way. Typical menu driven EMR systems that may work for primary care would be productivity killers in my practice - increasing costs and making it harder to meet my patients' needs.
Karrie Fields	OrthoMaryland, Baltimore, MD	I have worked extensively with many different EHR products in my career. The SRS Hybrid product within our practice is successful, has 100% physician adoption, excellent communication, E-prescribing, and still allows for the high volume patient care necessary to service the orthopedic needs of our community.
Kenneth Low, MD	Kenneth C. Low, M.D., A Professional Corporation, Fremont, CA	I tried the point and click system for 2 years and found that it was too time consuming, could not get a full picture of the exam, and, most importantly, took away the face-to-face time with the patient. I found myself looking into the computer screen and not talking with the patient. I took a \$75,000 loss and purchased a hybrid system. Both the patients and I are happier and more productive!
Michael Goebel, MD	Blue Ridge Bone & Joint, Asheville, NC	In addition to the inefficiencies of 'Point and Click' EMRs, they do not allow the individuality required to specifically define a patient's condition, instead blending their findings into a predefined set of descriptors.

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John Jarstad, MD	Evergreen Eye Center, Federal Way, WA	In my specialty of ophthalmology the science of vision, we need to be able to record images of what we see that are inside the eye. Any EMR must have this capability to truly be 'paperless.' I strongly urge Congress to consider the needs and flexibility of all physicians, not just primary care in allowing comprehensive EMR technology for all physicians. Thank you for your kind consideration.
Gene Oakes, CPA	The Orthopedic Specialty Clinic, Salt Lake City, UT	In the past year, our practice has invested a substantial amount to upgrade our medical records to an electronic format. We are more efficient and discovering more and more ways to provide better care to our patients. Our system is not CCHIT certified. We evaluated several systems that were certified and found them to be very cumbersome. The physicians using them were not happy with the results they were getting. We invite you to come and see how efficient our practice has become with this system. We encourage you to include in the new standards systems like ours that reward efficiency and focus on the needs of the patient.

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Julie Nam, MD	Pediatric Ophthalmic Consultants, New York, NY	In the past, I've used paper charts and an electronic medical record system that required data entry. When I used paper charts the exam was quick and efficient. However, charts were frequently misplaced and at times the patient and I had to wait for charts to be discovered or delivered from the chart room especially if the patient did not have a scheduled appointment. When I used electronic medical records that required data entry, I never waited for charts and I always had immediate access but I spent too much time entering my exam findings with my back to the patient. I found myself talking to the patient as I was entering the data to save time. This does not make for a good doctor patient relationship. SRS is the best of both worlds. I am seeing triple the number of patients and I have more time to discuss my findings and plan in detail with patients. I have instantaneous access to patients' charts even if their last visit was 10 years ago.
Name provided only to the government at the request of signer		Our current practice of nine vascular surgeons and over 70 employees is a high volume practice. Our current system (which is not point-and-click) allows physicians to see patients in an efficient manner while still eliminating paper records and maximizing electronic capabilities. We have currently not moved to a traditional EHR because of the disruption it would cause to our practice.

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Mark Rosenthal, MD	OrthoMaryland, Baltimore, MD	<p>Over the years we have investigated many full EMR systems. Most of those systems no longer exist (because they were no good). The current state of full EMR systems is that they are possibly acceptable for an internal medicine/family practice office. But for specialists who see patients with complex problems they are totally unworkable. A doctor cannot use a point and click system to generate a full and complete history when that history is complex (point and click is ok for: 'Ms Smith is here for a check of her BP'. It cannot work for a complex history with multiple injuries, operations and variable symptoms. A dictated history is necessary to convey all the details and subtleties necessary to make an accurate diagnosis). SRS allows us to manage a full and complete by managing documents, not point and click. Thank you.</p>

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Name	Practice	Comment
Name provided only to the government at the request of signer		Several years ago, we switched to SRS from paper charts. While cost and simplicity, it took less than an hour to learn to efficiently use the system, the biggest factor was speed. We evaluated several traditional point and click EMRs, but even the best and fastest increased data entry time by 3 to 5 minutes per patient. Since each provider in our practice sees 35 to 50 patients each day, this would have required 2 to 4 hours of extra work by the physician daily. The ONLY way to solve this problem would have been to decrease the number of patients seen daily. Since we are the only large pediatric provider in our area and accessibility is of utmost importance to both us and our patients, this was unacceptable. SRS has provided exactly what we needed. It is a super efficient, inexpensive, easy to implement, secure, and FAST system that did not require us to change our practice style, or decrease accessibility for our patients. No other system on the market does this. ALL point and click or keyboard type data entry systems decrease efficiency, increase costs, and in the long run will decrease accessibility.
Kenneth Arndt, MD	Skincare Physicians, Chestnut Hill, MA	SRS allows our busy and active complex practice to function full steam with high quality and without the cumbersome slow and complex functions associated with other type EMR systems.

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Daniel Dale, MD	Wisconsin Oculoplastics, Green Bay, WI	SRS has allowed me to coordinate my practice based in two locations and access my patient information from anywhere in the world. I can prescribe electronically and review my digital photos. All patient documents are instantly accessible. This has been a great boon to my practice. I looked at many other 'EMRs' and found none to meet my needs with great service from the vendor as I have found with this particular product. The hybrid EMR is a very viable and reliable product. I speak with 7 years experience to date.
Cedric Prange, Practice Administrator	Chatham Orthopaedic Associates, P.A., Savannah, GA	SRS has proven to be a very efficient system. If efficiency is not considered, there is no possible way that physicians will be able to meet the proposed patient services that the current administration is considering.
Sally Finkel	Park Medical Associates, LLC, Lutherville, MD	SRS has the flexibility to allow our doctors to enter data in the Flow Sheet, which contains extractable data elements. Our lab data can also be graphed and reported. We chose a hybrid product so that our physicians could increase productivity and improve patient care. As highly productive internists with declining reimbursements from insurance companies, we need to be compensated for our investment in EMR. The SRS Hybrid EMR provides us with meaningful and useful information even though it is not CCHIT-certified. Please don't let the insurance companies and EMR vendors determine which providers get rewarded for investing in the future of their healthcare delivery system!

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Jim Hammonds, CEO	OrthoNeuro, Columbus, OH	SRS helps our physicians to allocate their most valuable resource, their time, efficiently. Any definition of 'meaningful use' needs to also take this concern into consideration.
Anne Fung, MD	Pacific Eye Associates, San Francisco, CA	SRS is a fantastic system that allows us to organize, store and retrieve the complex data required for ophthalmology. We are a unique medical field in that many of our notes are drawn (the locations of hemorrhages and other findings are hard to describe in words, but quick and accurate to draw). A fast accurate sketch function is not yet available on EMRs which requires us to scan in PDFs of our notes. Furthermore, we have a heavy burden of imaging/testing that need to be integrated - annual visual fields that are automatically transferred without printing to SRS, retina and optic nerve imaging on the OCT, fluorescein angiograms. It's a lot of data to store and organize and SRS does this beautifully. Furthermore, access through the firewall while on call at home improves patient safety. I can see all medications and notes for my partners' patients - and this allows me to better answer patient questions on nights and weekends. Thank you for your time.
Name provided only to the government at the request of signer		SRS is easy to use and able to retrieve the medical records from anywhere through remote desktop connection. It avoids duplication of testing when the patient is in hospital.

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Name	Practice	Comment
Name provided only to the government at the request of signer		SRS is outstanding for secure chart access within and outside the office, allows me to customize templates and document what is important to my individual practice. I shudder to think how I would have to 'adapt' to bureaucratic databases that would force me to waste time filling out forms that have no value for my individual practice. Never forget...garbage in = garbage out.
Name provided only to the government at the request of signer		SRS provides us with the advantages of electronic charts without limiting our ability to provide unique medical notes. We are not forced to use templates or point and click methods. We are building outcome study methodologies for our high risk obstetric patients with SRS. SRS enables us to be creative.

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Name	Practice	Comment
Dale Reigle, Administrator	Rocky Mountain Orthopaedic Associates, PC, Grand Junction, CO	Technology can sometimes get in the way of good patient care. A physician overloaded with non-germane information, distracted by becoming a data entry clerk, and having to rely on information provided by a source whose credibility is an unknown, will be severely challenged to provide patient-centered care. A medical home made of straw is not what we need to improve the affordability of quality medical care. Recently a record auditor from COPIC visited our office. COPIC is the largest medical liability carrier in our state. She noted that our electronic patient chart was easy to use (clinical staff could easily find pertinent data), and contained all the information necessary to support the clinical decisions made by the physician. She went on to say that she has seen a lot of erroneous information in EMRs that use templates to generate notes. Non-pertinent exam information makes it difficult for consulting physicians to find important data and make them less efficient.
Name provided only to the government at the request of signer		The dominant point and click documentation available from most other vendors is deceitfully 'thorough' and the documents generated by these systems for communication between physicians are often undecipherable and of limited value on the receiving end.

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Robert Morisse	Cardiology Associates of New Haven, New Haven, CT	<p>The goal of an EMR is to have medical information about a patient readily available in multiple locations to facilitate the provision of care and to avoid duplicative services and tests. The idea that only 'data in coded electronic format' achieves this goal is wrong. This kind of EMR is very expensive to purchase, is less efficient for the provider to use, is more costly for the practice to enter all this data. What percentage of physician practices can afford such a system? What percentage of practice achieve the goal of an EMR with more efficient products? I strongly believe that the definition of 'meaningful use' should be broadly defined. There is no reason for it to be so restrictive. It should be expanded to those systems that meet the goal while being cost efficient to purchase and operate. How many members of the HITPC work groups that are deciding on the definition of 'meaningful use' have a vested interest in the cumbersome products that require coded medical information? I believe that keeping down the cost of medical care can be achieved by creative and inclusive of many solutions. Thank you for the opportunity to share my thoughts.</p>

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Name	Practice	Comment
Name provided only to the government at the request of signer		We evaluated numerous EMR systems that were the traditional point and click methods and were simply not practical for use in an orthopedic high volume specialty practice. They slowed us down to such an extent that we could not utilize it. In fact, other practices with similar systems had to hire additional employees to act as scribes to input the data, in order to keep the provider on schedule. We just implemented the SRS system and found our production actually improved, our costs went down, and we eliminated the inherent risks of prescribing and treatment errors that occur when using handwritten records.
Name provided only to the government at the request of signer		We evaluated six systems and quickly ruled out the point and click type systems because they very obviously were going to slow us down and limit the direct patient care we provide. The SRS solution has given us the ability to have quick access to our information and respond very quickly to our patient needs. It was adopted in the practice with minimal disruption. We never reduced our patient schedules during implementation. Through the use of electronic prescriptions and the tracking of testing we have seen the potential for mistakes and duplication eliminated. This is truly a solution that works in a medical practice and enhances the quality of care provided to our patients.

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Name provided only to the government at the request of signer		<p>We feel strongly that CCHIT certification SHOULD NOT be a requirement for a qualifying EMR. Further, it is our understanding that CCHIT has recognized the realities of the EHR marketplace. In its statement to the Office of the National Coordinator (ONC), released on June 26th, CCHIT acknowledged the inherent challenges facing physicians, particularly those who have not yet begun EHR implementation-the vast majority of practices. We strongly support the idea that an EMR program must be inclusive of a wide diversity of specialties and not focus solely on primary care. Further we agree that the present definition of 'meaningful use' currently under consideration by the HIT Policy and Standards Committees is only relevant for a limited range of providers, and that is of significant concern. We have utilized the SRS program for all of our physician clients and we find it efficient to use, easy to learn and it definitely makes our providers more productive, versus other EMR products that we have experienced in the past. Present CCHIT programs are cumbersome, not geared towards high-volume specialty practices, and basically impractical for use by busy office personnel, including the physicians. We too support CCHIT's recommendation to simplify "meaningful use" so that a greater number of physicians will be able to achieve successful participation in the incentive program. Finally, we strongly agree that making "meaningful use" attainable, in combination with broadening the certification options as recently proposed by CCHIT, will likely lead to increased EHR adoption rates and greater success of the government's ARRA incentive program.</p>

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Catherine Smith, Executive Director	Pacific Eye Associates, San Francisco, CA	We have avoided common CCHIT EMR systems because they are too labor intense for our high volume practice (we see over 250 patients each day). The SRS hybrid EMR is fast, easy to use, easy to learn (and thus easy to adopt). Currently we have interoperability with the e-Rx module and this hybrid system will keep pace with many standards yet to be adopted, and will continue to be a system of choice for high volume practices.
Michael Kaminer, MD	Skincare Physicians, Chestnut Hill, MA	We have recently spent over \$100,000 to implement meaningful EMR changes in our practice. Unfortunately, the proposed federal legislation would make our EMR obsolete, and force our practice to change to a system that we have already determined to be woefully insufficient. It seems incredibly inefficient for the government to legislate how we practice medicine, especially if that legislation causes us to spend even more money on technology we know to be flawed. There is effective electronic technology available in the marketplace, but unfortunately not all medical practices (or hospitals) are created equal. What works for one might not work for another, and it is incumbent on the United States Government to ensure that physicians are free to choose electronic technology that is suitable to the way they practice medicine.
Name provided only to the government at the request of signer		We originally had a point and click one that would be certified and were very unhappy with it and quit using it as it did not meet our needs as a specialty practice. As it always used canned phrases there was no individuality in patient notes. SRS has allowed us to maintain individuality in our notes and maintain an electronic environment.

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Jeff Holm, Administrator	Northern Carolina Orthopaedics, Roanoke Rapids, NC	We very effectively use a system not on your discussion list. Our practice has tried 4 certified systems and failed with everyone, please help practices like ours as we move our practice into the future. Your proposals as they stand presently will affect our practice in a very negative way. We are implementing electronic prescription, and we communicate very effectively with our referral doctors with our present system (SRS) and unlike most EMR programs, 100% of the practices buying SRS are using SRS. Try asking the industry how effective their system is, and if they all fail, where will all the government money have gone....
Patricia Levin	Greater Chesapeake Hand Specialists, P.A., Lutherville- Timonium, MD	We were committed to purchase a 'certified' EMR product from a different vendor but fortunately figured, before it was too late, that SRS would be more user friendly and affordable. Some of the physicians in this practice were reluctant to go electronic but after seeing their partners embrace it, they tried it and love it. It makes the whole office much more efficient. The doctors can access the chart from any location. Charts don't get lost. Papers get electronically filed automatically. Everyone can find what is needed easily. With every three physicians who go live with the system, we have been able to reduce a filing FTE. There are more efficiencies to be had. Now we have the tools we need to do e-prescribing. This is the only system of which I am aware that the physicians in this practice would find easily usable and not boycott altogether. Please reconsider your criteria for what is a certifiable EHR.

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J Charles Henry, MD	Little Rock Eye Clinic, Little Rock, Ar, AR	30 years ago, I did some work for a rural primary care doc. His records were 1 (sometimes 2) 5 x 7 cards which recorded problems and treatment from birth to grave. Clearly that standard is not appropriate now, but I promise you that such a record was more useful than some of the 5 page exams that are generated by point and click systems. More pages is not 'better'. Getting providers 'connected' is not the problem. Allowing them to 'communicate' is the goal.
John McBeath, MD, Vice President	South Coast Retina Center, Long Beach, CA	A hybrid system allows all the documentation required in a digital format that is searchable with the individualized entry necessary for good medical care in a scanned format that is readily adaptable to all the various elements of different medical practices.
Name provided only to the government at the request of signer		A system such as SRSsoft actually prevents some of the abuses in coding that seem to be encouraged by systems that code for the physicians.
Name provided only to the government at the request of signer		An added plus of SRS - the progress note is not coded electronically therefore over coding is not automatic. EMRs with coding systems usually prompt all bullet points to be met to optimize the code which costs everyone more money.
Name provided only to the government at the request of signer		Flexible, efficient
Name provided only to the government at the request of signer		Helps me keep track of my patients' data and allow me to provide better care.
Name provided only to the government at the request of signer		I just want to support the EHR product that we are currently using as being very reliable, convenient, and confidential.

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Name provided only to the government at the request of signer		<p>I represent a sub specialized orthopaedic surgery practice composed of seven physicians. We have high volume of patients that must be seen here on a typical day and until August 2008 we were utilizing paper charts. We converted to the SRS hybrid EHR solution to get this practice out of the inefficient paper charts into the digital realm. Documents in the SRS system are scanned into the system and are retained as a picture of the original. This will cut down on valuable time in data entry (and corrections of errors in data entry) freeing up staff and doctors to see patients. The orthopaedic surgery office visit is relatively simple as compared to other specialties and as such we did not need to over purchase software accessories we will not use. Our doctors are now much more efficient and have the medical records they need when they need them. This system is also interfaceable with release of information software to expedite release of record requests without having to copy to paper. We use the digital EHR full time.</p>

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John McBeath, MD	South Coast Retina Center, Long Beach, CA	I tried menu driven option and voice activated option in our practice at own expense and found them either technically deficient or medically unacceptable requiring me to 'fit the mold' rather than accurately describe patient complaints and findings. The hybrid of digital data for RX, diagnosis, billing codes, etc. coupled with scanned notes specific to my patient is the best solution and we are in our second year of completely paperless documentation. I would be very resistant to switching again to an inferior 'government sponsored' system taking a step backward to menu driven 'search and destroy' data entry in which the final product becomes cook book 'junk in and junk out' results.
Name provided only to the government at the request of signer		I work for a very large medical specialty practice and SRS enables the physicians to save time with patient prescriptions and further refills, finding test results and being able to communicate with patients in a timely manner. It alleviates loose paperwork in the office making for a more organized work place.
Karen Michels, Administrative & Transcription Assistant	Regional Cardiology Associates Medical Group, Sacramento, CA	It helps us to increase productivity, it helps medical records prep charts and make sure all test results are available to the physician for the appointment, it helps knowing that all paper/ tests/ reports that come to the office are immediately scanned in so when looking and treating the patient, all available records are there and not waiting in a bin to be filed.

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Name provided only to the government at the request of signer		Open path technology allows us to incorporate not only the core applications within the EMR but many other peripheral applications to create a highly integrated system that communicates on many levels and gives us reporting features and options within the system that are tailored to our specialty and subspecialties.
Barbara Robinson, Supervisor	Pine Medical Group, P.C., Fremont, MI	Our staff responded very well to the training and use of SRS, it has been phenomenal for our practice.
Name provided only to the government at the request of signer		Point and click EMR has not been perfected enough to be useful in orthopaedics. SRS allows us to remain productive and yet have an electronic record.
Tina D'Amico	County OB/GYN, Branford, CT	SRS allowed our group to successfully bring in an electronic record without a decrease in productivity. It was essential for my doctors to continue seeing patients at the same pace while using this new software. We could not afford a slow down in services monetarily or for our response to medical needs. In addition, the staff was able to be trained on all modules with very little effort allowing them to respond to all of the demands that come up during the day. For us, it is the perfect EMR.
Calvin Mein, MD	Retinal Consultants Of San Antonio, PA, San Antonio, TX	SRS allows me to practice efficient medicine using digital charts.
Paulette Laing	Center For Joint Surgery & Sports Medicine, Hagerstown, MD	SRS has allowed our practice to be efficient and most importantly meet the needs of our patients.

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Name provided only to the government at the request of signer		SRS has converted all our written charts into electronic forms that can be viewed from any location in the office and at home. We are adding the electronic Rx module in a few days that will allow electronic connection to pharmacies. This system avoids the 'boiler plate' issues with other electronic records as the doctor's note is scanned in at the end of the day and no modules are used.
Steve McCollam, MD	Peachtree Orthopaedic Clinic, Atlanta, GA	SRS has revolutionized our work flow in our practice removing barriers to information access and drastically cutting paper use.
Tim Krahn, MD	orthomemphis, Memphis, TN	SRS has streamlined our practice and has tremendously improved the way we manage our patients' records. They can be accessed any where in the world with internet access. Our group is very diverse with fourteen physicians, ten therapists and over one hundred employees and the implementation was simple and easily accepted. I cannot imagine our practice without SRS software. Thanks for you attention.
Name provided only to the government at the request of signer		SRS is a wonderful tool that adds tremendously to the office efficiency. It allows all the staff and the physicians to locate the chart immediately from any location. This promotes accurate and effective care for patients. This is the most important thing for patients.
Peter Hanson	Cardiovascular Associates of Northern Wisconsin, Wausau, WI	SRS is superior to many current 'EMR' systems, especially in physician acceptance and utilization. A broader definition of what constitutes an EMR needs to be developed.

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Name	Practice	Comment
Name provided only to the government at the request of signer		SRS makes seeing patients efficient. It allows me to continue practicing medicine the way I want to, looking patients in the eye not looking at a computer and typing. I can review years of information on a patient in minutes and assess progression of disease reliable easily and quickly. No charts are missing as they were previously. Electronic medical records are meant to help the physician accurately and quickly assess a patient; SRS accomplishes this.
Name provided only to the government at the request of signer		SRS totally currently meets our every need and is easy for the providers to use.
Name provided only to the government at the request of signer		SRSsoft is an example of an electronic medical chart that offers the user a wide range of use. It allows the physician to continue seeing patients efficiently, rather than forcing them to change their care process.
Name provided only to the government at the request of signer		The point and click systems depersonalize the physician-patient interaction and discourages flexibility in assessing and analyzing patients in an individual manner. The essentially results in a 'form letter' approach to medicine which I think is harmful in the long run. The SRS type system allows for personal notes/dictation while at the same time allowing for digital records/computerized information that can be accessed from anywhere at anytime through appropriate computer use and authority.
Colette Sabot, COA, Tech Supervisor	Dakota Eye Institute, Bismarck, ND	The powers at be making the rules need to be in the trenches to understand clinic flow. They should think about the wait times that are already too long at times without all the regulations in place. There is already enough i's to dot and t's to cross that slow down patient care.

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Name provided only to the government at the request of signer		The SRS program is easy to use and allows patient information to flow through from chart and current chart pages.
Name provided only to the government at the request of signer		The SRS system essentially allows the physicians to have all the patient data in a well organized chart, with all the information at their fingertips with a simple click of the mouse!
Stuart Bender, MD	Connecticut Dermatology Group, Norwalk, CT.	The SRS system is specialty specific and user friendly to our specialty. More efficient than other systems because it allows us to have greater patient contact.
Gladys Pendleton, RN, Nurse Manager	Jefferson Surgical Clinic, Inc., Roanoke, VA	The SRS-hybrid EMR system allows the physician to have data at his fingertips to increase productivity. It is intuitive, user friendly and not labor intensive like some EMR systems I have used. It serves to enhance patient care by the physician, not have the physician looking at a computer screen while 'seeing' the patient.
Name provided only to the government at the request of signer		This hybrid system allows for handwritten backup notes to be scanned and is much quicker than point and click; in addition I am able to look and listen to the patient rather than having to be working on some machine which frequently has glitches or is dependent on electrical availability at all times.
Name provided only to the government at the request of signer		We are a 75 provider multi-location, multi-specialty clinic and currently have deployed the SRS Hybrid EMR successfully to 90% of our providers. Of those providers 100% are utilizing the SRS Hybrid EMR to improve the quality of patient care. The 10% of providers not on the system are scheduled to be added by end of Q4 this year.

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Name	Practice	Comment
Name provided only to the government at the request of signer		We are a surgical consultation practice. Collecting data points is not our way of practicing. We spend most of our time in detailed discussion with patients relative to a proposed operation after being given the workup done by the referring MD. We may order one or two confirmatory tests. We then send our consultation with our suggestions to the referring doctor.
Cathleen Edmonds, CNMT, Supervisor	Regional Cardiology Associates Medical Group, Sacramento, Carmichael, Folsom, Lodi, CA	We are currently implementing SRS EMR in our group and have found their software to be very intuitive and user friendly. The software is very flexible, allowing us to follow patients as we have chosen to practice. We are able to 'data mine' patient information from the clinical summary page and we have experienced reduced time, anxiety and effort in locating patient charts. If the goal of the government is to reduce errors, increase appropriate access to patient medical histories resulting in better care and in most cases reduced patient costs, then SRS EMR is exactly what we need.
Name provided only to the government at the request of signer		We have and continue to establish policies and procedures that help us to provide ever improving quality care for our patients. As a matter of fact, three years ago our group applied for and received accreditation with the NCQA Bridges to Excellence quality recognition program. We were able to achieve this quality standard without the use of a 'point and click' EHR application.
Name provided only to the government at the request of signer		We have been quite happy with the SRS record system. The physicians have not had to change the way they practice yet the office efficiency has gone up dramatically.

The Voice of the Physician

Comments: SRS Clients

Name	Practice	Comment
Wayne Fung, MD	Pacific Eye Associates, San Francisco, CA	We have had the SRS system for five years. It is a system which allows me to quickly sketch the appearance of either RETINAL PATHOLOGY OR ANTERIOR SEGMENT PATHOLOGY. I do not have to search a data base and punch my answers with a stylus. At the end of the day my notes and sketches are scanned and because each clinical sheet is marked with the patient's individual bar-code, the record automatically joins the rest of the patient's history. Our practice of 13 Ophthalmologists has over 100,000 records. The system is reliable and not one record has been lost.
Name provided only to the government at the request of signer		I have extensive experience in using electronic data bases for documentation of information for medical research studies. I have first hand experience that one electronic data base does not necessarily work for all health care providers or for different medical research studies. As long as guidelines for required information are provided and interface of different data bases is assured, various options for EHRs is needed in medical practices throughout the U.S.
Jack Mann, MD, Clinical Asst Prof Of Med Weill Medical College Cornell University	Small Group, Nyc, NY	The government always knows best-they had it correct with ships and missiles in Cuba, the weapons of mass destruction, how to control Madoff, etc. They certainly know about EMRs after all they have asked academic physicians and HMO DOCs for advice-people who care for patients could never know anything about EMR's or anything.
Ayman Boutros, MD	The Eye Center, Sterling, VA	Total integration of eye care across N. Virginia with 4 locations. Easy access to patient records and streamlined follow up.

The Voice of the Physician

Comments: SRS Clients

Name	Practice	Comment
Name provided only to the government at the request of signer		We can use SRS as an EMR to communicate through online presence at various offices and fax from the program to communicate with other systems.
Name provided only to the government at the request of signer		We just spent a lot of money for a new system and we did a lot of research before investing that much money into our system. The money we spent will take us years to repay. We tried to cover all the bases in anticipation for the coming changes and we believe that combining systems from SRS and Entergy by Sage made the most sense and met the requirements we knew about.
Panos Vasiloudes, MD	Academic Alliance in Dermatology, Inc., Tampa, FL	We need an electronic data base containing any relevant info regardless how is produced and generated to be stored and be accessible at anytime. I found SRS to meet this goal.
Name provided only to the government at the request of signer		When our system is working efficiently then this is very effective.
Name provided only to the government at the request of signer		Works Great, we are now much more efficient and patient friendly.