



## Service Priorities and Programmes Electronic Presentations

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**First step for electronic AED – Migration from hand-written AE card to electronic clinical documentation in Clinical Management System (CMS)**

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**Introduction**

Traditionally, a hand-written AE record, one paged A3 sized card, has served an important role for all kinds of documentation across a patient journey in AED. However, the documentation on AE card might sometimes be misinterpreted because of poor hand writing. Besides, the sharing of information among clinical users by one specific card would be limited. The subsequent use of data, especially for free text data, on AE card would not be possible at this moment. To improve aforesaid limitations, development of electronic documentation form for AED would be the first step to establish electronic AED could be of help. As anticipated that change of practice in existing AEDs would be a great challenge, a new AED would be a more suitable pilot site. North Lantau Hospital (NLTH) AED has implemented the A&E Clinical Documentation Form in September 2013 upon its opening. It is believed that the nurturing of electronic data entry environment at early stage would facilitate development of electronic AED in later future.

**Objectives**

To explore the feasibility of electronic documentation in AED and the way forward for subsequent AED management with data captured in system.

**Methodology**

Due to the limited time for development, only part of the AE card could be migrated into four tab pages in A&E Clinical Documentation Form, including Triage Assessment, History & Clinical Findings, Investigations, and Reassessment. It was foreseeable that touched-screen monitors or handheld mobile devices would be required to facilitate AED clinical workflow, some unique features were incorporated into the form, e.g. pop-up numeric pad for inputting vital signs, free text template for documenting history & clinical findings and investigations in a more structural and descriptive manner, etc.

**Result**

After the implementation of the form, positive feedback was received with a nearly 100% utilization rate was noted in NLTH AED. It was found that further incorporation

of other sessions of AE card, e.g. treatment & management, and disposal statistics, into the form would streamline the clinical workflow with all necessary data could be captured in the system. Therefore, the enhancement work for the form has been started in January 2014. Other than the form design, there are many aspects that would need further consideration. For example, the clinical workflow for communication between AED colleagues would need to modify if without the card. Although free text template has been developed, data was only in free text which could not be subsequently used for preparing clinical decision support or data analysis. Development of more structural or disease specific templates should be taken into consideration in future plan.