How One Librarian Succeeded in Integrating Access to Medical Resources into the Physician's Electronic Medical Record

Learn what you can do to increase usage of electronic resources among practitioners, instructors, and students at your institution.

Donna Flake, Library Director of North Carolina’s Southeastern Area Health Education Center (SEAHEC), located at New Hanover Regional Medical Center in Wilmington, NC, noticed that physicians weren’t taking full advantage of the electronic resources available to them. So she and her team carefully cultivated relationships with librarians at other North Carolina institutions, the New Hanover CIO and his technology team, as well as the physicians themselves, to find out why usage was low and to come up with and implement an effective solution. The result? Library usage among physicians has increased by over 250%, aided by the timely introduction of OvidSP’s Basic Search.

The Problem:
Meeting often with physicians led Donna and her team to the discovery that usage of the AHEC Digital Library (ADL)—the portal for accessing electronic resources—was low primarily because physicians were required to remember and use an additional login and password when accessing the ADL “off campus”—at their offices or at home. Having to remember their password seriously hampered their online research activities, even if they did eventually log in successfully. In fact, many physicians simply gave up spending the time trying to log in.

The challenge, then, was to find a way for physicians to use the ADL without entering an additional password.

The Solution:
Having identified the problem, the SEAHEC librarian team turned their attention to the New Hanover Information Technology Department. Donna met frequently with its new Chief Information Officer to brainstorm ideas and come up with the idea of allowing each physician’s username and password to be bypassed or auto-filled when they connect to the ADL resources—including Ovid MEDLINE® in OvidSP Basic Search—via their Physician’s EMR, which they access daily for patient medical resources, a formulary guide, antibiotic therapy guide, and administrative links such as the hospital’s physician directory. Long-standing relationships with colleagues at other institutions also paid off. Librarians at the North Carolina AHEC office, including those who developed the ADL, provided valuable input on implementing the technology fix.

See side 2 for more details.
Marketing is Key!
Once the link to the ADL was put on the Physician’s EMR, Donna and her SEAHEC librarians began an extensive marketing and promotion program (still in use!) to position the library as a reliable source for critical, life-saving information. The program includes many easy-to-implement tactics—all involving face-to-face encounters with physicians:

- In-person demonstrations and presentations in the physicians lounge
- Physicians’ and library newsletters, plus personalized letters promoting specific resources in a physician’s specialty
- Appearances at Physician’s IT Committee and Cardiology Department meetings, among others
- Quarterly breakfasts with physicians
- Other grass-roots efforts

OvidSP’s Basic Search
As the link to the ADL in the EMR eased access to electronic resources, physicians discovered the convenience and efficiency of OvidSP’s Basic Search, which allows users to quickly enter a simple query in everyday language and retrieve the most relevant results available. In particular, physicians enjoy quick access to full-text via OvidSP MEDLINE. With no need to remember special syntax rules or search conventions, they can quickly and easily generate specific information about a topic, procedure, or technique.

The Result:
ADL Access Via the EMR Increased Usage of E-Resources by 255%

Average Monthly Hits by Physicians Before Access via the EMR: 67
Average Monthly Hits by Physicians After Access via the EMR: 238

Conclusion
By working with users, colleagues, and other institutional stakeholders, the SEAHEC librarians identified a problem—too many passwords hindered physicians’ access to important electronic resources—and developed and implemented a solution—linking the Physician EMR with the AHEC Digital Library to provide seamless access to Ovid MEDLINE and other critical resources. By reinforcing the solution to the physician user base, through meeting with and getting in front of physicians as much as possible, SEAHEC librarians drove awareness and usage of important medical literature for improving patient care—and gained invaluable recognition for the value they provide to the hospital staff.

Though unique, the SEAHEC experience outlined here can be adopted at other institutions with the similar challenge of increasing content usage. To do so, be sure to think of the following tactics that worked well for SEAHEC:

Think outside the box for creative solutions to increase usage. You may want to ask yourself:
- How does research fit in to your users’ everyday work activities?
- Where do users conduct most of their electronic research?
- Who can you contact for support?

Cultivate relationships with other individuals and departments within and outside the institution:
- Information Technology
- Specialty departments within your hospital, such as Cardiology or Oncology
- Librarian colleagues at other hospitals

Market e-resource availability to hospital staff with activities such as:
- Attending physician meetings
- Communication and promotional vehicles like newsletters and targeted emails
- Grass-root activities like free food/snacks, prize drawings, etc.