

"Doctor, the patient won't answer his phone, or return my calls. Can't we just email the results?"



By: William Palisano; President, Lincoln Archives

Wow, good question. Sure, email is easy, and we pretty much all use it now, but...should we send that information via email? OK, you're at Pandora's Box. What do you think? Open it, or don't?

I've done a fair amount of research on this topic. You might be surprised at what I've found. Unless I've missed it (and I may have – I actually thought McCain had a chance), I have not found a definitive answer (at the US Department of Health and Human Services website, the American Health Information Management Association website, the New York Health Information Management Association website, and the New York State Assembly website) as to do it, or don't. For now, it's one of those 'gray' areas, you might say. Kinda like driving through a somewhat empty mall parking lot – you know you should drive down the rows, but heck, it's a lot faster cutting across all those rows of yellow stripes to get out, and, hoping you don't run into another person doing the same thing (travelling faster, in a much larger vehicle than yours, and on the phone to boot).

Some of the PRO'S are: Cost Effective – Fast and Cheap, It Creates a Record of What You Communicated, EXACTLY (No he said/she said), Convenience – Gives You Time To Think Of What to say and How to Say it (No Getting Caught Off Guard/Off the Cuff Comments which you regret later). Somewhat Secure: Encryption, but that's pretty technical, both parties have to have the encryption key, can be pretty slow, and don't lose that key (mainly concerning long term storage).

Some of the CON'S: Risk. Risk. And risk. An email may be intercepted

which compromises privacy. Content can be altered and forwarded to an unintended recipient. Mis-addressed email may be accidentally delivered to a 'totally innocent bystander', while never reaching the intended recipient. Correctly addressed email might actually be filtered by the recipients' mail server – and the patient never gets it. If an email is sent from a computer from a providers home, PHI (especially if there's an attachment) is now stored on the home computer – Uh oh. And the last (for this article, although there really are many more risks) has to do with Murphy's Law. There is a commonly accepted belief that (if you haven't done it yet – you will) at some time, although you intend to send a private email, but instead you accidentally send it to EVERYBODY in your address book. Oops. It takes about a nanosecond from the time you click 'send' for your brain (realizing what you just did) to send instructions to your mouth to say "OH SHHHHOOOOT." (C'mon, we both know that's not what you said, but this is a professional publication. Also, my 10 year old daughter edits everything I write).

So, are there any uses of email that present little to no risk, but communicates information cheaply and conveniently? Here are some of the uses I've read about: Scheduling/ Cancelling/Rescheduling Appointments, Clinic/Provider Changes, Provider Network Information, Insurance Inquiries, Benefit Information, Billing Information (watch the coding & language on the bill, it presents a story/facts), and other Non-Urgent Communication. One article I read said these were also appropriate (yet speaking to some of my medical friends, we disagree): Prescription Renewals (again, tells a story) and Non-Urgent Medical Advice (medical advice is medical information

is health information is Protected Health Information, whether urgent or non-urgent. Would you want your mom, spouse, boss, priest, or total stranger to know this about you? I don't think so.). The last thing is a bit puzzling. Some (in your industry) believe Test Results are OK to email. I guess if you're willing to accept the risks, and the news is good – maybe. But wouldn't you rather give good news in person, how good does that feel? If the news is bad? You probably wouldn't even think of it.

In conclusion, with today's internet technology and lack of security, you probably wouldn't email any PHI. But, perhaps some of the items in the paragraph above do make sense. In the future, as the internet matures, there probably will be a more secure method to email (w/o encryption) which will take some or most of the risk away. You'll know when that day comes, because everybody will be saying things like: "Remember when we couldn't email the important stuff?"

The comments of Mr. Palisano are his alone and do not reflect Medical Society policy.

In Memoriam

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