

## COMMENTS ON CURRENT ACCESS METHODS

All by Clara Should there be an alert system for grossly abnormal blood or radiology results?

A few private patient reports are sent by paper and I don't access them often on clara because of difficulty finding them by doctor on clara and the mass of ward results listed under my name when I am on call.

all paper, infrequent access to clara means password forgotten. Using paper system allows results to be pushed Clara does not

Already discussed at length with John Macrow

As I ceased clinical practice at RCH more than 8 months ago it is unlikely I will resume. The current proposal seems very sensible.

ask for paper copies for important results to follow up; if "my patients" had prompts then this would take over.

Blood results on clara. TTE results on paper because I do not know how else to access these results  
Checking results in the NNU relies on a (rather unique) 'push' system: at the point that RCH pathology results are loaded onto CLARA they are also printed on the local printer. Results are therefore checked immediately, and paper put into the secure recycling. When the formal paper version is then sent out 1-7 days later it is already too old to be of any use.

clara

CLARA most accessible, quick, up to date. If not available on clara (mainly radiology) will go to radiologists. Paper results take too long, especially for ward patients. By the time I have received paper results, often difficult to remember clinical context of pts

Computers being used in ward, patient history in front of me will use the history. Usually access Clara

Convenient, serves as active prompt that results have returned, can be notated with actions without requesting history, easily photocopied in comparison with poor formatting of clara results,

Cumulative micro results come to ED to be checked by one of the consultants. As these results are not available whilst the patient is in ED, they are not checked by the clinician who orders them.

Depends on what job I'm doing (we rotate jobs). With inpatients I always use Clara. When doing outpatient / community jobs, I don't necessarily know when the patient is going to get their tests done so I wait for the paper copy.

Entirely on Clara, it is so much easier than looking through volumes for specific pieces of paper

For outpatients and especially for outpatients when I don't know when the bloods will be done, I often wait for the results to come to me in the department rather than continually checking CLARA. As a back up I get parents to call me for results so things don't get missed.

Generally Clara and would prefer only Clara.

Genetic tests particularly on parents are often not on CLARA.

Send-away specialist test results are often not put on CLARA even after the result arrives via the lab

I access all results on CLARA.

I access many results using CLARA particularly when I am on ward service. I rely on both CLARA and paper results when dealing with outpatients. I do find paper reports for 'laggard' results (eg. send aways) to be very useful - it ensures that I see the results.

I access outpatient results using CLARA and use acknowledgment function. I also receives numerous paper reports (often for patients who are not mine)

I am only part time at the hospital, and have been unable to establish access to the network from outside the hospital despite several attempts to set this up. Without paper reports, I cannot get results for my private patients treated at RCH when I see them in the rooms for follow up.

I cannot get most genetic health (eg. FISH/Karyotype) and complex metabolic results from CLARA as I think the labs don't use CLARA. I think CLARA makes finding results very easy, especially in comparison to the systems used at some other hospitals, especially that at MMC which is utterly hopeless!

I do check the filed section, but only about 30% of my test results for refugee patients end up being filed, and are frequently misfiled because of similar names, hence safer to use clara (which I do)

I don't know whom my Junior Doctor(s) has ordered results for, unless they notify me by adding my name to the Internal Referral form. I need to see ALL results from 'My Patients' and have no other way to track them.

I find accessing results on CLARA simple, quick- much easier than trawling through the file! Results from CLARA are usually available immediately, while it can take some time for histories to become available

I generally only need to see results in CLARA but might on occasion want a hard copy to send to another clinician. Am I able to print a properly formatted result from CLARA to do this?

I have to access EEG results by paper (and usually a few phonecalls), which I think has to change. The same applies to Cardiology as I don't have a Cardiobase password. Otherwise, CLARA is excellent.

I just make sure that the paper results I receive are ones I have already checked using clara.

I like to get some paper results as trigger for action.

I need to be able to access the hospital information system using macintosh computers. Currently not supported!!!!!!

I only access results on paper because they arrive in my inbox that way. I have always seen them on Clara first.

I rely on paper to detect results which come back more than 1 week after the sample is taken.

i SEE PATIENTS IN CLINIC, THEY THEN GO TO HAVE A BLOOD TEST, AND OFTEN DON'T RETURN FOR SEVERAL WEEKS,

I usually try to remember to look up results on Clara especially if there are the tests are urgent. Paper copies arrive and are a good prompt to chase up any outstanding results.

I very rarely use any method other than clara, except if i'm seeing a pt in o/pts then it's quicker to turn to the notes in the UR than to open clara, but i do have a computer available to use at that time

ICU receives results printed as they become available. This is (presumably) different to the type of fileable paper result in question.

In PICU results are recorded on a (paper) spreadsheet. Actions are taken on the basis of results recorded on that sheet. The bedside nurse transcribes results from the paper record (from pathology via the PICU printer) to the spreadsheet. If results were only available via Clara, there would have to be 2 transcription steps with twice the opportunity for transcription error: one from Clara to a bit of paper and a second, from the bit of paper to the spreadsheet. Because of the (lack of) space available close to a computer screen, direct transcription from Clara to the spreadsheet does not happen now, and seems unlikely to happen in future

investigations on out-patient

Look them up at the time of ordering, look them up at the time of seeing the patient in outpatients, always re-book an outpatient for whom i've ordered tests.

Look up most results on CLARA. The exception would be where a routine test comes back abnormal (eg TFTs) requiring a non-urgent change in medication. I wait for printed results for these - a 'paper push'.

Mainly access results on clara however all paper results require sighting and signing therefore I regularly go through a sheaf of these also. In addition to the required signing I do find it helpful to "catch" those results which have taken some time to return (cultures/specialist investigations that have been sent to an external laboratory) which have been "forgotten about" for a variety of reasons (time/change over of medical staff etc)

Make a note of when results will be available and then access CLARA - really use written reports other than for things not available on CLARA eg EEG results

May look at results filed in medical record when seeing patient in ED or OPD. Paper records also used as a 'double-check' for ward patients - ensure results have been seen

Never wait for paper copies, as only at work part-time. Problem is that I can't access clara from home.

no

Not all results are available on CLARA

occasional need reminder about tests that take a long time to process-could be linked to CLARA

Often paper arrives before I see the child at the next appointment

Often working in community and ordering non-urgent tests. I don't have external access to clara and I often don't have the patient files on me to access clara on the days I am at RCH. Would require much more forethought to bring in details and remember to look them up. Esp for tests which can take weeks to come back eg chromosomes.

Only Clara, but I spend approx 1-2hrs/week sorting through paper results sent to clinicians who no longer work at RCH.

Only through Clara because I work only the ED so it suits to look things up that way - fast, efficient, complete and the easiest way to scan through to find only what you need. I absolutely love it.

only to access results from < 5 years ago. I need to look at a paper result in the file. I never have to print out a result however.

Paper occasionally, mainly Clara.

paper printout of blood gases in theatre (on gas machine) THEN PASTED INTO ANAESTHETIC RECORD

Results for cardiobase printed out and taken to cardiac theatre as not all computers enabled (I know not specific to CLARA but the same paper issue)

Some longer term test results posted to me from outside - muscle biopsy, cholinesterase activity - sent out to other labs and long turn around time

Paper results provide aide memoire, rather than relying on remembering to check CLARA

Paper results remind me of tests I have ordered.

Paper results tend to be from:

EEG not on clara & normally very delayed

Microbiology results - final culture results are sufficiently often changed to require double checking

Investigations on infants who have already been discharged (sometimes found fortuitously)

The nnu computer prints out most clinical chemistry results which for haematology are again printed once the result status changes from interim to final. We throw all these results away at the end of the day in the confidential bin!

We double check all paper clinical chemistry reports before filing, but often days after they have arrived on the ward

Paper results to remind me that a test has been ordered

Patients seen in rooms ( small percentage of total patients seen) - I need paper versions. Happy to use clara for public patients - although I am frustrated at times by this systems as i seem to have multiple codes - ( I have not been at RWH for years, neither at my Carlton private practice....and anyway it would be far, far simpler that if I am checking things on computer I could simply see everything - and not need to check under a range of codes that have been created by me...

PICU: All on CLARA or via bedside chart.

ENDO: Outpatients mostly via printed/posted copy. Inpatients all via CLARA.

Previously accessed all results on CLARA but in the NICU paper results come out regularly so I check those as well as CLARA

Results from outside labs on paper. Most of RCH labs on clara but certain results want hardcopy of (could print from CLARA) eg histopathology, initial imaging for staging diseases, so that kept in UR.

Results on paper for patients having tests at the RCH that are private and seen elsewhere.

Tests reporting time varies from hours to weeks. Remembering to look up results days or weeks later is a problem unless electronically notified. Only a few are printed off and most especially if normal remain on CLARA

Paper test results are sent to me ie I get the result. I don't have to remember to look them up a few days later.

It would help to be notified electronically that the result is available rather than me relying on my memory.

Some are requests I order for patients to do when convenient and /or results are slow (eg endocrine) and the paper arrives as a prompt. I also have my own system of checking (eg when patient comes back to clinic, note in my diary etc). Both are imperfect.

Tests done at another provider (other than RCH pathology) require paper copies.

The current system causes duplication, however CLARA has filed my results under a number of different doctor names.

The paper "push" triggers my reaction, unless I am concerned and check CLARA independently. E.g. I await the Vitamin D results, will take around 2 weeks to come back sometimes.

The results on paper are sent to me via mail.

Unfortunately some tests organised through the Murdoch and Genetic Health are not accessible on Clara and on occasion have to wait for the hard copies.

Often soem results are obtained by ringing Adelaide and askign them to fax results across to us as once again they are not accessibel via CLARA.

use paper for EEG, Echo, often radiology and similar non-accessible investigations. very frustrating and sloooooow.

Usually only old results that are already in file - not new ones.

very occasionally there are results which are from pre-clara time so i will access them via the UR

Via Junior staff at RCH.

Paper from my Rooms which are not electronically set up for direct access.

When I initiate an access to a result, I use Clara but I rely on receiving paper results to remind me of the results I have not remembered to check - most of them!!

work in different places at different times, no access to clara form 1 private location

## Comments on obstacles to paperless reporting

1. Many results which are not daily routine (eg certain drug levels, some endocrine test) are difficult to track down on CLARA. a) the search engine is not intuitive and one can often not be sure if a result is not on CLARA or simply needs to be looked up differently - waiting for the paper or lengthy 'phone searches' then become necessary

b) a number of tests are reported as sent (usually out of house) on CLARA but it appears unclear if or when a report may be expected on the electronic system

2. the 'saved searches' option is a nice bypass to having to repeat the unpleasant and uncertain search for particular tests - limiting this to just 5 saved searches is a pity

A "push system" for late results would be useful if paper was eliminated.

A prompt for available results would be useful for OP.

also clara won't work on my iMac so i need to go down corridor.

AS above the print-out is a vital prompt. Also all results are transferred manually to patient bedside notes, until the RCH catches up and makes the bedside notes electronic (at least in part), paper copies will be necessary.

As above, for outpatient tests especially those that are not done immediately or take many more than 2-3 days to come back with a result.

As above, with non-urgent tests, much time can be wasted looking up results every few days which may take weeks to come back. Separate community files are kept outside RCH where the results are needed

Clara is not a viable option to access results from > 2 years ago. Therefore they need to be in a paper format in the file. The computer system at the Alfred where i worked in 2002 had a much quicker way of accessing old results.

Clara is okay, but could be improved (when compared to other software available)

Need more computers and / or PDAs

The PDA's wireless network needs to be faster and with improved organisation of results

CLARA needs to have an inbox for the physician ordering the test. I could then check this daily, obviating the need for paper.

Currently all culture (even if negative) results printed in Ed for chasing of positives. There would need to be a system of positive culture results feeding back to departments to save this current paper system

Currently they are automatically sent to me. I would welcome all results to be out on CLARA and paper reports to be generated only when requested. They do not prompt me to take action as I look all results on CLARA.

delay in a number of tests being done or reported thus danger of missing result if relying on memory or keeping log

difficult to sort through if many test results, as often when you click on the test you want using the advanced search it comes up with no matches and then you need to scroll through mountains of other test results.

failure of clara to provide active prompting of results, poor presentation of clara with every result needing to be opened to identify abnormal results, difficulty in accessing very old results likely to occur in 5-10 years time (paper records infinitely better in this regard), difficulties in doing distant clinics with hospital records and accessing hospital clara outside hospital, problems with patients who convert to private rooms, very slow printing off clara.

For Immunology patients - multiple immune function tests are ordered for each patient, each investigation taking a different length of time before becoming available, particularly if being sent to a different centre for testing (common scenario in immunology). Hence paper results are VITAL in serving as a prompt that a result is available, and because of the high volumes of patient referred, ensure we do not overlook an abnormal test result.

Although, it is not essential for paper results to be filed in the UR, results which have been promptly filed do improve clinic efficiency (I would change to I 'prefer' paper results to file in my own records, rather than 'need'). Certainly patients with lengthy ICU and hospital stays do not need their results filed, as we keep track of this on CLARA daily.

For Allergy patients - bloods are rarely ordered, but usually in the setting of needing an allergen-specific IgE where skin prick test is not able to be performed. Because of high volumes of patient seen in clinic, this again is an efficient way of serving as a prompt when results are available, and ensuring important results aren't missed. Results do not need filing in UR in this situation.

For the tests that take a while to come back eg cytogenetics and therefore paper results are a prompt is there a role for email prompting that the result is through?

Genetic/metabolic tests often take an unpredictable length of time to become available so checking on CLARA 4-5-6-7++ weeks down the track for a number of patients would be open to errors of omission, and

paper provides a safety net in those cases

I am an infrequent user and the patients are often day stay or outpatients. An email to me once a day telling me I have path results waiting and then an electronic link to all path results waiting would overcome the paper push that I currently use.

I don't want to have to check Clara every day for all my outpatients who are due to have blood tests (they don't all get them done on the day of being seen). I would prefer just to use Clara because I hate having bits of paper to file, but I would like an email reminder with the URs of patients who have recently had blood tests performed.

I strongly believe we should move to a reduced paper system.

If I had an electronic file which would prompt me to check all tests ordered by me, and then tick a box re normal/abnormal, and the process intended to follow up this result, that would be brilliant, and also would decrease the number of abnormal results missed in the hospital.

I use it relatively infrequently and sometimes forget my Clara password as it is changed regularly.

I wonder if some results would get missed if not on paper

I would be very concerned about a system that relies on clinicians remembering whose results they need to look up when - seems to me that it would be begging for important errors of omission.

If CLARA could be assessed off-site, this would make things much easier (as long as this didn't contravene privacy).

If not looked up on Clara, important test results could be missed. Should there be an alert in Clara for results the lab want to flag for me???

It has been more reliable than CLARA.

It would be good to have a reminder system via email.

main obstacle is difficulty finding a computer, especially on the wards.

Must be a push system that meets different clinical practice needs ie medical record at time of reviewing result

Need a better system for prompting & to ensure someone has taken responsibility for the test - not so important for inpatients.

Need for a push to remind me

Nil

nil

no

No other easy way to link results in record. An electronic anaesthetic record would be ideal.

Some tests turnaround is weeks so a prompt is helpful - in absence of secretarial and clinic support (this is changing in our dept) THIS IS VERY RARE HOWEVER

none

Not all results are available on CLARA

Once again the only limitation are with regards to sending tests outside RCH and accessing results by ringing the labs directly.

online access( clara and drugregister) for each PICU patient at bedside in the future? digital 72 hours overviews of results and medication prescribed would be really informative( no paper to be used at all)

Only re micro

Other than the fact that EEG and ECHO's can't be accessed on CLARA.

Outpatient results are usually checked by paper prompt. In outpatients it is very helpful to have copies of recent results in the patient history.

People need to change their practice and take responsibility for following up test results. This becomes more difficult in a shift environment where a test to be followed up may not have been ordered by the person working. In a normal 8-5 job, you would handover outstanding results or remember to check the following day. In an acute care setting, there are so many more results to check that we will have to be vigilant in following these up.

Prompt that new results available would save time in repeatedly re-checking on CLARA.

Remote access to the network needs to be improved first for consultant staff. I know some consultants have been able to arrange this but only with difficulty and only by bringing a laptop physically to the IT department. I work in a university department and our IT officer has been unable to arrange access for me, passwords given to me by the RCH IT department simply don't work. I have given up for now trying to arrange access.

See above.

Seems like frequent change of password. If only use occasionally as I do, it is annoying, but I understand privacy implications

Some genetics results etc are not released on Clara

Some tests eg Dexa Scans aren't available on CLARA

The Linacre Hospital rooms are working on computer access. Progress is slow.

Email to my home computer or via RCH webmail would work well.

The need to change CLARA passwords at 3 monthly intervals means I am sometimes locked out. I find this aspect of Clara the most frustrating and time-wasting. Is there some way this can be made more user-friendly to encourage people to use CLARA?

The only time I can think of when a paper result is useful is for outpatients when there is a long period of time between the test being done and subsequent followup - an abnormal result arriving in your in-tray may prompt you to chase up the patient earlier than otherwise - this may be even more important for patients who get lost to followup - often results only get looked up when you are seeing them in clinic (particularly busy clinics with large turnover of staff and little continuity) - if a patient fails to attend then their abnormal result may never get seen.

The 3rd problem is with tests that take a long time (eg many weeks) to get results (esp inpatients who are discharged home, not necessarily to be followed up in clinic) - I suspect that if one of these results came back positive it may never be seen without a bit of paper turning up on someones desk

The 'push' or prompt is useful for an abnormal result if I have forgotten to check

The way that results are reported on clara (reverse chronological by date of request) mean that it is sometimes possible to miss an important one because so many others have been requested since. It would be useful to have an alert at the top of the screen for the new arrival of a test result.

There needs to be the ability to access hospital information using macintosh computers, not just pc's. Mac uses are currently not supported!!!!!!

To have a system in Clara or otherwise that you could log into to get all results that you have ordered.

However, the lab or radiology need to identify from the request slip of patients who are not Public RCH PATIENTS AND SEND RESULTS TO ME AT THE ADDRESS IDENTIFIED ON THE FORM.

We have a number of complex investigations sent to other hospitals which often don't become available until the patient is discharged and have had one instance of a missed group B strep UTI in an infant discharged and the result not followed up. We would have to have a watertight running list of all

investigations ordered to check that no results have been neglected to be looked at.

## COMMENTS ON PROPOSED MODEL

A good idea

A good move and useful to have an optional paper possibility

Agree in principle. If computer system fails then labs will need a contingency plan ie. More access in wards will be needed.

An excellent idea

Need to address GP access as often printed to send with GP letter

appropriate and timely

As i currently only use clara to access pathology the new proposal would work

Because children in PICU have so many tests per day, and because so many, if abnormal, require immediate action, some effective system would be required for immediate notification of the PICU registrar or bedside nurse that the test result is now available on Clara. Otherwise, unless a paper copy of the result arrives as a reminder, the test and its result will be forgotten in the flurry of other activity. These paper reminders need not be filed, but they still use paper.

But we still need the micro reports, but ? could be a folder on Clara, like the radiology review folder?

Clara is not always as readily accessible as the UR.

Definitely the way to go for the majority of staff

Especially important to reduce resistance to system changes to have the two 'opt in' options

excellent idea-often I just sign off the paper knowing the result already.

Excellent concept - I find the paper results frustrating as i have already accessed Clara

Excellent idea

Excellent idea and would be happy to trial the model

Excellent suggestion.

Fantastic idea

Fantastic idea and practical.

For me, would not lead to any change in current practice, as I access all results via Clara and find receiving paper results delayed and unnecessary. Do think it is important to have the option of getting paper results in some circumstances, as proposed.

Go for it. The outside test results will need a way of being stored and linked to the anaesthetic preop system ie risks from MH or sux apnoea need a UR alert as well as a result stored in CLARA. Dept access to these patients is not 24 hours. Can CLARA have some results that flag as an ALERT (would still require to be opened on any subsequent admission and that would require a system prompt elsewhere in the absence of a new test/result to check - if that makes sense)

good

good

good but see concerns above

good idea

good idea in principle, as a first step. however, more reliance on computers means we need better computers, more of them, upgraded more regularly with faster repair. eg. very nice to have radiology on every computer, but if you have to walk to a different ward to access it, what's the point?

Also, CLARA is a pretty crap program, non-intuitive and needs to be better integrated (EEGs, cardiobase, CCC database, pharmacy would be really nice - like peter mac)

good idea provided the system ensures that we are alerted that the result is back especially those that take a long time to process eg chromosomes etc

Good idea- will allow people to have to 'opt-in' to get paper results.

good idea, paper should be unnecessary.

good idea. Can reports be posted as well as faxed?

good start

good. The key is having appropriate control of the listing of physicians on the path database which is currently a disaster, phillips being listed under about 7 different variants and codes.

Great idea

great idea

Great idea - but having a prompting (push result) system is essential in improving efficiency and also ensuring important results AREN'T missed for our department. Overall, happy for a trial of having results not being filed in the UR.

Great idea - Less paper, less pointless menial filing, less cumbersome medical record

I believe it to be an excellent model and would dramatically reduce paper wastage. It would be important however that the correct ordering doctor (usu trainees for inpatients) be recorded in Clara (ie Peter Barnett doesn't order all ED results!) to ensure they are printing (or not) for the correct person.

I believe this would work very well.

It would be important in the future to continue to have access to old test results though. This would require CLARA to store result for many years - is this currently done?

i didn't see the proposed model before starting this questionnaire

i don't think this would change anything about how i check results

I have already worked at a hospital where this is done and it works fine.

I like it

I like the idea. How about developing a "push" method for electronic results via clara? Similar to ozescribe, when transcription is ready, it emails an alert to notify that it is ready.

I like the option of different provider number for rooms if needed but would still use clara anyway

I resent that a response is required!

I see the proposed model as a good move. It does, however, require the junior medical staff to take responsibility for acknowledging a test result and I feel that this should be encouraged (it seems that there is a fear of repercussions if something untoward occurs and their name is present on an acknowledged request which hasn't been followed through when needed)

i suspect there will be significant problems which will lead to difficult in managing complex patients but have little impact on patients with "minor" illnesses and hospital contact - ie GP type contacts

I think a combined push and non-push system is what is needed.

I think a mangement strategy for dealing with abnormal results needs to be built into the system.

I also find it cumbersome scrolling through all the results on Clara

I think any path/imaging ordered should be emailed or the doctor ordering notified that the result is available. Otherwise test results may not be followed up.

With metabolic and genetic tests, results are usually NOT available on CLARA anyway and I actually find this extremely frustrating to get results. It would be great if these results could also be availalbe on the CLARA system. Eg) VLCFA, lysosomal enzymes and other sendaway tests.

I think it is an excellent idea - I don't look at paper results

I think it is time we omived to reduced paper reporting. Often a number of copies of the same reults ( some may be incomplete) get filed and adds to confusion especially in patients with complex conditions. It is important to provide a prompt for the clinician to look up the results esp if working in a number of different clinics.

I think it will work and is environmentally responsible.

Just need to make sure CLARA is adequately backed up to have no paper filing!

I think it will work.

I think it would be good if an electronic alert can be sent to the ordering physicians e-mail if a test is abnormal. This doesn't have to be on all tests - maybe a box on the form could be ticked if the physician would like this to happen for that result.

I think that the use of CLARA for reports is much more efficient and is already the mainstay for accessing pathology and radiology results for patients. It is also useful for occasions where the patient's file might not be available. I am not sure at present how easy it is to arrange external access to CLARA, but this would be an important component for those seeing patients off site. Also, particularly for those tests where results take some time to come through, a system to flag the arrival of the report at the time of log in would be very useful.

I think that this model would work well because some patients are seen in both the private and public setting

i think that's a great idea and think it would work

I think the amount of paper produced currently is extremely wasteful. I fully support any move to reduce waste in medicine.

I think the Interim plan sounds very workable and I think it would be great. It would certainly work as a good transition to a fully electronic system (which I've used before in the UK, and is in no way faultless!).

I think the proposal would work as long as there was an option as mentioned, to request paper copies as needed. As junior medical staff, very few of us would ever look at paper reports.

I think the trial is worth implementing. Specific requests for paper copies will remain an important component.

I would be very happy to have to specifically request paper results and would also find fax or emailed results perfectly satisfactory.

I strongly support your initiative.

I would prefer all previous path results to be available - not just from previous admissions.

I would prefer if there was an option for a notification by email could go out to say that a result was ready. I am aware there are privacy issues in sending the actual result, but a notification that a result is available would be useful. I am not in the hospital using CLARA every day and sometimes don't use it for a couple of weeks at a time.

I WOULD PREFER TO JUST REGISTER MY HOSPITAL PROVIDER NUMBER FOR PUBLIC PATIENTS AND DO ALL THEIR RESULTS ON LINE. HOWEVER IF ACTION IS TAKEN I WILL STILL WRITE ON A continuation sheet for filing.

I would tend to tick the box to get the prompt and hence it is not an advantage.

Ideally the system should allow the pushing of results only if requested by the ordering physician with the option of pushing the result to a colleague if the circumstances require it. Definitely not wanting

indiscriminate pushing of all result via email as I am already overwhelmed by email traffic

If I can set up so the occasional results to my rooms come by paper, and if i can be reduced to only one person entry on clara would be very happy ( being 4 or 5 of myself is trying!)

If we could have computerised ordering of tests, the results could be made available to the person ordering to check electronically. This would make the person ordering the test more responsible for the result than is currently the case.

Results for all investigations form all departments should be made available in a timely manner on clara (eg EEG & ECHO reports). This would also save the time spend having to ring the departments.

it is a fantastic idea and i wish it had been introduced years ago

It sounds very reasonable.

It would work perfectly for me (and already does). However, see concern above - I would support it becoming the standard of care if results were flagged to the clinician in some way.

its a fair model

Long overdue

Looks good

Looks good.

Makes good sense

Most junior staff probably rely on CLARA rather than print outs because the print outs come so much later than the result on CLARA

Most ward & clinic based patients do not have paper results available in a timely manner- wastes time later when received as well as paper.

no

No Comment

No Problems

Only reservation is that sometimes results are required by several physicians, and if they never make it onto CLARA and are not filed either then there could be a problem... This is already an issue with some genetic test results. Should be fine for straightforward Path tests in the first instance.

Please do it, the paper is a waste and I don't need it

Potential problems when computer systems are down.

Problem 1: When paper prompts are used (outpatients). A tick box for paper copies of results would be great for outpatient result chasing.

Problem 2: Looking through previous results. Summaries of results should still be filed in the history as

they are frequently searched when reviewing patients, and it is much easier to find particular results in the history than on CLARA when a patient has had a large number of investigations. Printing a cumulative summary intermittently for the history would still save paper but allow for some results in the history without a printed copy each time an investigation is done.

Problem 3: CLARA has a problematic idiosyncrasy in that if the window is closed before someone logs out, or if you log in and move to another computer without initially logging out, or if you type in the wrong password a few times (which occurs as the passwords need to be changed quite frequently) it locks, thereby impeding clinical care until you wait for ages on the phone to get IT to unlock out. This is really inefficient. How many cases of unauthorised looking at results have these measures actually avoided? Or are they just impeding the efficient provision of medical care?

Seems like a good idea.

seems like a good stepwise trial

seems like a great idea, with opt-in policy for those clinicians who still need paper.

Another suggestion: Perhaps some investigations may automatically be "pushed" or sent for action in another way if considered very important. (eg: HIV results, grossly abnormal or unexpected results etc.) I imagine that some of these tests would already be phoned through by the relevant lab as another "system" of accessing important results.

seems like a logical step to take

Seems OK

Sensible proposal well worth considering

Should work very well - see above comment for prompting

Should work well Are there any medicolegal problems? either real or presumptive

Sounds good but these things always seem to end up generating paper anyway

sounds good!

Sounds great. Look forward to it

still some possibility of results being missed, especially for outpatients.

Straight forward approach that still enables (easily) a paper copy if required

Strongly approve of this move. My only concern is that I have become so reliant on CLARA that when the system goes down I find there is no contingency and the lab gets extremely frustrated and aggressive at having to report urgent results over the phone. Surely such a contingency is essential if we plan to remove paper reporting all together.

the current intensive care handwritten charts will need accurate input and without bedside

digital access, paperprinted results are more accurate.

The options to ask for a paper record if required will help overcome some of the obstacles.

The problem may be with abnormal outpatient test results that will not necessarily be accessed on Clara unless a patient rings up for results (eg Thyroid function tests). At the moment the paper copy gets sent to the requesting physician and abnormal results can be recognised and acted on. reduced-paper model may be missed.

The proposed system will reduce the paper for the majority of outpatient investigations but will not affect the paper for my outpatient investigations as I will need a reminder for all.

The push method is a useful second check that the result has been accessed and acted upon. Without this there would be a significant risk of results going un-reviewed. Paper results however are not necessary for this to occur, but the system for defining who ordered the test in CLARA needs to be improved.

The tick box for paper reports has 2 'people-related' problems.

It requires a clinician to tick the box. Currently there is extremely poor compliance with filling in extra information on pathology requests. Labs are lucky to get patient demographics and tests requested. Dr Name, location, contacts, urgency, clinical notes, drug times, pregnancy status, transfusion needs etc etc are rarely completed. (For tick boxes its usually nothing ticked or everything ticked)

The second issue is that a data entry staff member will be required to complete an extra step. Look at the tick box and electronically record whether a tick is present to then initiate a process of report printing. Data entry is already a labour-intensive multistep process and errors are likely to occur.

Think appropriate to tick on request if want paper result and where it should be sent to.

This appears satisfactory.

This trial will affect inpatients results more than outpatients, as it doesn't improve the electronic delivery system.

This will work as long as old results are archived in the file. Otherwise to see a child's MRI result from say 2001 would be impossible because no one has the time to wait for that result to appear on clara.

Very much in favour, with access readily available from home/other offices.

We would still require to print out the results, although it would save us having to deal with the second, formal, paper copy that gets mailed out.

WHy can't the results be sent electronically to me as occurs with many private providers using appropriate software

will need to be a work in progress but is a good initiative that will help inform us when looking at future clinical systems

Will need to make sure results for outpatients are checked in Clara - make a note to self or add patient to "my patients" list in Clara

Would be a great step, particularly if you could access results of tests that you have personally ordered separately eg filed in an inbox which appears whenever you log onto CLARA, or sent as an email.

Would be much better if you could opt to get an email when you have results to check.

Would still need to print some of the results from CLARA to put in community file but could be more selective. Would need to be able to access CLARA externally more easily