

BY JOHN D. HALAMKA, MD



Your Medical Information in the Digital Age

The U.S. is moving toward electronic health records. Here's how to make that work for you.

YOU PROBABLY TAKE for granted that you should manage your own résumé. After all, it catalogs *your* professional history and accomplishments – who else would manage it well? But chances are you don't oversee your own medical records. Until now, doing so has been difficult because bits and pieces of your information are probably scattered across the files of several doctors, hospitals, labs, and pharmacies. That's an inconvenient – and potentially dangerous – state of affairs, but one a new federal law may help to remedy.

The American Recovery and Reinvestment Act is providing about \$30 billion to improve the exchange of health care information. One trickle-down effect will likely be greater access to your lifetime medical information through a *personal health record* in electronic form. The underlying idea is simple:

Compiling your medical data in one place lets you be the steward of your health information.

Like first writing up a résumé, creating a personal health record takes time, but there are several payoffs. Having the record can prevent unnecessary testing and treatment (and, in turn, save you money), reduce the chance of a medication error, and instantly provide vital information in an emergency. It also can be used to keep track of your weight, blood sugar, and much more. (For a list of the minimum information that your record should contain, see the sidebar, "Tracking Your Health.")

So far, four types of electronic personal health records are available:

■ **Hospital- and clinician-hosted records** are great if all your information resides at a single institution. One example is PatientSite, used by more than

40,000 patients of Boston's Beth Israel Deaconess Medical Center to view their hospital records, send secure e-mails to doctors, make appointments, refill prescriptions online, and the like. But this kind of service is not widespread. A recent study in the *New England Journal of Medicine* found that only 9% of the acute-care hospitals surveyed had an electronic-records system in place in even one clinical unit.

■ **Payer-hosted records**, such as HPHConnect from Harvard Pilgrim Health Care, give you access to claims information relating to your medications, doctor visits, and hospitalizations. Some let you share information with family members or doctors. On the downside, you may not be able to access all of your lab and radiology results, and there's no guarantee that you can take your record with you if you change insurers. ►

■ **Employer-sponsored records** are typically hosted by a trusted outside firm, creating a firewall between the employer and the medical data. For example, computer storage giant EMC partnered with WebMD to offer claims-based personal health records to all of its employees. Employer-sponsored systems aim to keep you healthy and productive by, say, recommending an exercise program if you are overweight. They can also help you manage your health care–spending account. However, you may not be able to take yours with you if you change jobs.

■ **Commercial offerings**, such as Google Health and Microsoft HealthVault, allow you to link to your electronic records stored at participating hospitals, pharmacies, and laboratories. In addition to collecting existing data, you can add your own, search for information about medical conditions and drug interactions, and share information with your

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doctors and other appropriate parties. These services let you keep your health record for life, regardless of your job or insurer. Google recently implemented secure “social networking” for personal health records. Call it Facebook for health care. It allows you to invite caregivers or family members to access your personal health information. Invitees can be removed at any time.

What about privacy? Each of these products has strict policies stipulating that the host companies will not mine personal health data, share them, or use them for targeted advertising. Hospital and payer data are covered by rules in the Health Insurance Portability and Accountability Act of 1996. Google’s and Microsoft’s offerings are outside HIPAA’s scope, but both firms have developed policies that are even stronger than the legislation mandates. I trust those policies enough to have stored my lifetime medical record on

Google Health and Microsoft HealthVault. (I share it with you on my blog – <http://services.bidmc.org/geekdoctor/johnhalamkacddocument.xml> – at my own discretion.) Whatever record system you choose, make sure it has robust privacy policies that keep you in control of your information at all times.

This new world of connected health care has tremendous potential to increase both personal and systemwide efficiency. What’s in your interest complements what’s in the interests of the larger health care system as we all try to reduce costs and improve care. ☞

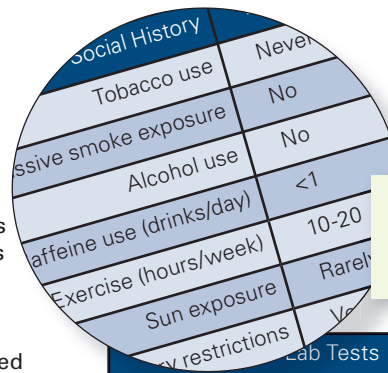
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Tracking Your Health

A personal health record can store everything from how often you work out to lab test results and medication lists. At minimum, it should contain:

- » Your name, date of birth, and vital statistics such as height, weight, blood pressure, and pulse rate
- » A list of emergency contacts, as well as contacts for all of your health care providers
- » Information about your health insurance
- » A brief history of your health, along with a list of illnesses and conditions your parents, grandparents, and siblings have had
- » Information about allergies or sensitivities to medications
- » A dated list of significant illnesses and hospitalizations
- » Your current health conditions and how they are being treated
- » An inventory of the medications you take, including dosages and frequency
- » Lab test results
- » A dated list of immunizations
- » Copies of your living will and durable power of attorney for health care, if you have them



The Complete Picture:
An electronic form creates a shared space for details – big and small.

| Lab Tests | 10/22/07 | 10/24/06 | 9/13/05 |
|-----------------------|----------|----------|---------|
| Cholesterol (mg/dL) | 135 | 143 | 137 |
| Triglyceride (mg/dL) | 121 | 80 | 59 |
| HDL (mg/dL) | 40 | 47 | 43 |
| LDL (mg/dL) | 71 | 60 | 62 |
| Homocysteine (umol/L) | | 9.6 | 9.6 |
| Platelets (10*3/mm3) | 277 | 286 | 256 |
| Sodium (mmol/L) | 140 | | |
| Calcium (mg/dL) | 9.7 | 10.1 | 10.2 |

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