PRACTICE PEARLS

Change your phone message to reduce ER visits

f your patients are ending up in the emergency room (ER) in the evenings for non-emergency issues, the problem may be your after-hours phone message.

Typically, a practice's phone message is similar to this: "Hello, you've reached XYZ Family Medicine. We are currently closed. If this is an emergency, hang up and dial 911 or proceed to the nearest emergency room. If you need to reach a provider after hours, please"

Try changing your message to give patients other options before recommending the ER. For example, "Hello, you've reached XYZ Family Medicine. We are currently closed. If you need to speak to the provider on call, please If you would like us to call you first thing tomorrow morning, please leave a message after the beep. If this is an emergency, please hang up and dial 911 or proceed to the nearest emergency room."

Practices in my area that have tried this have significantly reduced non-emergency visits to the ER.

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Standardize vaccine storage for efficiency and temperature control

toring vaccines within the required temperature range is vital but challenging. We noticed significant temperature fluctuations that we traced back to our residents and medical students, who tended to take more time searching for vaccines.

After considering door alarms or costly glass-front refrigerators, we realized this was an opportunity to standardize how we stored vaccines. The nurses who managed the vaccines first put all the vaccines in small plastic baskets. They labeled the baskets in a standardized way (see an example at http://1.usa.

Q&A

Texting patients and complying with HIPAA

Texting my patients is often quicker and easier than calling or even sending email. But how can I make sure my text messages satisfy HIPAA requirements?

Texting has become the new email, providing a quick, efficient way of communicating and responding to patient issues. But it is also a challenge to HIPAA compliance. The HIPAA Privacy Rule protects all "individually identifiable information, held or transmitted by a covered entity or business associate, in any form or media" (45 CFR, 160.103).

So how do you mitigate the risks? Review the following issues:

- Consider how you will use text messaging. For example, will you use it simply to receive information from an answering service, or will you use it to respond to patient questions? Also, who in your practice will have permission to use and access texting? Limiting texting to general uses that avoid patient health information adds a layer of protection.
- Establish mobile device policies and procedures as part of your **HIPAA compliance plan.** You should also incorporate mobile devices into your security risk analysis required under the Security Rule (45 CFR, 164.308). The Office of the National Coordinator for Health Information offers guidance on these subjects: http://bit.ly/1XZXjdM.
- Work with your IT staff and vendors to determine a secure, cost-effective way to use mobile devices. For example, set up encryption for transmitting and potentially storing patient information, and ensure you can remotely disable equipment if it is lost or stolen.
- Determine if the information you are texting or receiving should be part of the patient's medical record. In general, any electronic protected health information that is used to make a decision about a patient's care should be documented in the medical record. Consult with legal and compliance advisers if you have questions related to documentation. You will need to consider HIPAA policies related to protecting and amending patient health information if you are texting patient diagnostic or treatment information.

Text messaging should be treated like any new patient service: Research your options, educate yourself and your staff, implement the solution, evaluate it, and audit its use.

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gov/1YtyF5G) and placed them in the same location in all of our refrigerators. Then, they posted a photo of each refrigerator's contents on the door to help staff find what they wanted before opening the door.

We posted vaccine schedules near the refrigerators and encouraged

residents to confirm their vaccine choices with the nurses before obtaining them. Not only did we reduce temperature fluctuations, but we also improved the accuracy of our delivery.

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