Discoveries of Distinction

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The Effect of Data-Entry Template Design and Anesthesia Provider Workload on Documentation Accuracy, Documentation Efficiency, and User-Satisfaction

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This study used observational data collection and psychometric instruments (for perceived workload and user satisfaction) at three hospitals that each used different methods of data-entry for perioperative documentation (auto-filling with unstructured data, computer-assisted data selection with semi-structured documentation, and paper-based documentation). Documentation quality is important because the information is used to guide clinical decision making and can have an impact on patient safety/outcomes. Nurse anesthetists at each hospital (N=30) were observed completing documentation on routine abdominal surgical cases. Auto-filling with default values that have to be manually corrected had the lowest documentation quality because the default values were often not corrected. Computer-assisted data entry (drop-down boxes, radio buttons, etc.) had the highest documentation quality and efficiency. Paper-based documentation had the highest perceived workload. There was a large effect size correlation ($r = .67$, $P < .001$) between perceived workload and the time spent documenting. Using default values or forcing clinicians to document during patient care events resulted in poor documentation quality. ∎

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