# FAQs about
## Physician Office Integration™

Providing exceptional care today requires providers and caregivers to have instant access to the most current patient clinical data. Setting up an electronic exchange of patient data with your physicians' offices not only helps patients, but also increases physician satisfaction and reduces your costs.

Exchanging this data across diverse systems, however, can be a challenge. This document has been compiled to show you the answers to many of the questions hospitals and physicians are asking about how they can meet this challenge.

**Q1: Occasionally we have special types of LAB orders generated. Is there a best practice for processing special orders like reflexed tests?**

A1: It is important to define whether your EMR will send the special order information in multiple orders or orders in real-time. Once that is determined you can match up the multiple orders or enter the real-time order at a future date, if necessary.

**Q2: We have patients that come in after visiting several different physicians in the community. How should we handle all the orders these physicians have generated for the same patient?**

A2: The best method to manage multiple orders from different physicians in the community would be to have them collected and viewable on one list for that particular patient. That list would be a holding area so a clinician could review and process those orders. Our customers use the Work List function within our Physician Office Integration solution to improve the patient order workflow.

**Q3: There are times when a patient order is generated at the hospital but then the same order comes over from the patient's physician office. How would you recommend we handle the two separate orders for the same request?**

A3: Your hospital would define the business rules to determine what happens when the order is received. There are two options available, 1) the system that receives the order message could attach it to an existing order or 2) create a new visit.

**Q4: We typically place orders into our EHR Order Entry system but in order to streamline the process, is there a way to place orders directly into other systems like LAB or RAD?**

A4: Most systems provide you the ability to place orders into LAB and/or RAD system as well as your main EHR Order Entry, which provides you flexibility based on your needs.

**Q5: We would like to send provider based billing information from the physician provider's office EMR to our EHR system, is that possible?**

A5: It is possible to have Physician Office Integration receive charges from physician offices and enter that data into your EHR system.

**Q6: How could the providers be able to send the Diagnosis codes with the orders?**

A6: The Diagnosis codes can be part of a HL7 message that is sent to the hospital's EHR.

# FAQs about Physician Office Integration™

The following are answers to specific questions related to the Iatric Systems Physician Office Integration™, a solution designed to help hospitals and physicians more easily exchange patient data.

**Q1: Do all the patient orders get entered automatically into the hospital's EHR, or do they have to be processed from the work queue?**

A1: We recommend that each order category be set up at implementation and to have different business rules based on the hospital's process. Physician Office Integration can either process the order when the order is placed, or process it after it's been viewed on the Work List and approved.

**Q2: Would we need to send HL7 ADT to the EHR?**

A2: This is not usually necessary as we receive enough patient information in the ORM. The results that Physician Office Integration provides will include all the patient information the practices need.

**Q3: What is a typical implementation timeline for results out and orders in?**

A3: Typically it would take 8 weeks for the Physician Office Integration package (orders in/results out), and then 4-6 weeks for testing the interfaces.

**Q4: Who should participate on the implementation team?**

A4: The implementation team for Physician Office Integration would include the hospital, provider office, EHR vendor, and Iatric Systems.

**Q5: Is the Physician Office Integration laboratory feed certified for Meaningful Use Objective Menu Set 6?**

A5: Yes, Physician Office Integration was certified for Stage 2 Meaningful Use, Menu Objective 6: provide structured electronic lab results to ambulatory providers.

To learn more about how Physician Office Integration helps hospitals connect with their physician offices, read the St. Luke's Hospital success story.

Please contact us at sales@iatric.com so we can answer any additional questions you may have or to request a demonstration of Physician Office Integration.

**IATRIC®** systems