Letters to the Editor
Letters to the Editor

Dear Dr. Nash,

As a ’74 Jefferson alumnus, I received the most recent Jefferson alumni package, including the Health Policy Newsletter. I read with great interest the MQIC [Medicalogic Quality Improvement Consortium] article (March 2002).

I am a pediatric oncologist and have had a long standing interest in EMR, serving on institutional IS Steering Committees that have evaluated computerization both for the hospital and outpatient areas. We have spent some time in discussion with MedicaLogic for the outpatient piece, and I have looked at the implementation at other sites. We are now seriously evaluating systems only to support ambulatory care.

Securing necessary funds is a challenge for successful implementation of EMR, and often institutions consider pilot projects, rather than attempts to computerize the entire outpatient enterprise.

However, our site will move into new ambulatory space in the next three years, and some would like to transition to EMR by the time of this move.

Many Jefferson alumni will likely have substantial interest in MQIC. Creating a discussion group or network of interested MDs in this area would be very valuable. In addition, contacts for those who have implemented Medicalogic, particularly in pediatrics, would be very helpful to many of us. Best of luck with this project.

William H. Meyer, MD
Ben Johnson Professor and Section Head
University of Oklahoma Health Sciences Center
Oklahoma City, OK

* * * * *

Dear Dr. Nash,

I was very interested in your article in the recent Health Policy Newsletter on MQIC. I think this is a great idea and definitely the future of where we need to go in health services research.

I’m involved in organizing a national network of Logician users to form a national EMR-based practice-based research network. We’ve used Logician at Christiana Care for about four years. I was the lead physician in implementing the EMR here, and I’ve been taking the lead on using the data to do many different studies in quality and outcomes of care. Some are just starting to get funded and/or published. I presented some of what I’ve done at the last national Medicalogic Users Group meeting in Houston.

There are other researchers across the country who have also done this work, some of whom have even more research experience than I do. We decided it was a good
idea to start working together. So I’m working with folks from Michigan State, Baylor, East Carolina and other institutions to build a national network. The plan is to start with the academic users, and then to expand to nonacademic users. I think our two efforts are very related.

James M. Gill, MD, MPH
Director, Health Services Research
Department of Family and Community Medicine
Christiana Care Health System
Wilmington, DE

Dear Dr. Nash,

Your article on MQIC raised a few issues for me. First, if the management group(s) would like to include experts in the laboratory medicine aspects of the focus diseases (asthma, diabetes, heart failure, AMI), the American Association for Clinical Chemistry (AACC) can recommend the top experts in the laboratory diagnosis of each area.

Second, the AACC has developed, and continues to expand, a consumer web site at www.labtestsonline.org. This site is managed by an editorial board from a number of lab organizations that provide experts on each lab test. It is specifically designed to be a resource for patients. This might be a resource for MQIC to encourage patients to understand their diseases and the lab tests to which they may be subjected.

Jerry Goldsmith
Vice President, Marketing Programs
American Association for Clinical Chemistry
Washington, DC

Please note: The comments expressed by the authors in this publication do not necessarily represent the views of the Editorial Board, Thomas Jefferson University, Jefferson Medical College, Jefferson Health System or of the Office of Health Policy and Clinical Outcomes.