M and M Rounds for an Established EMR User

Dr. Rick Senior

Near North Medical Clinic

North Bay ON

Faculty/Presenter Disclosure

• Faculty: Dr. Rick Senior

- Relationships with commercial interests:
 - Presenter for CIS system 15 years ago
 - OntarioMD Peer Leader 10 years ago

Disclosure of Commercial Support

No Commercial Support



Mitigating Potential Bias

• Content of this presentation has been reviewed by a panel of physician and nurse peers to ensure that it remains unbiased and has no commercial representation

Why You Might Want to Listen to Me...



- Engineer in previous life
- Had a Mac at medical school
 - Cost over \$2500 (\$6000 in today dollars)
- Was on Canadian EHR project for a year
- Was peer leader with OntarioMD for a couple of years

Our clinic...



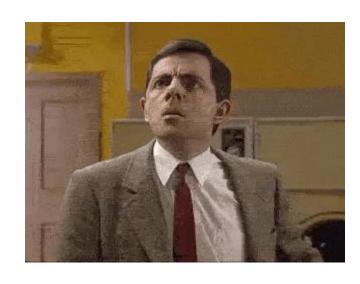
- Opened in 1996
- Beta test site for our EMR
- Pentium II's at start
- Dot matrix lab printer
- 12 workstations
 - Now at 31 workstations

Our first complete crash...



- Hard drive crashed
- Called up vendor
- Instructed us on how to recover
 - Phone support since in North Bay

Guess what...?



- Backup had failed...
- Why?
 - Hard disk had been partitioned
 - Back up was running on wrong side of partition
- AND
 - They blamed us!

So what happened...?



- Patient demographics were relatively intact
- Labs could be reloaded from source
- At this point, we had no true electronic chart, so no data lost there
- BUT
 - We lost the whole appointment calendar
 - The next 2 months were an adventure

You'd think we learned our lesson...



- About 5 years ago
- Second humongous crash
 - Again go to the back up...
 - At this point we had 2 back ups running
 - One onsite
 - One off site

Again, guess what...?



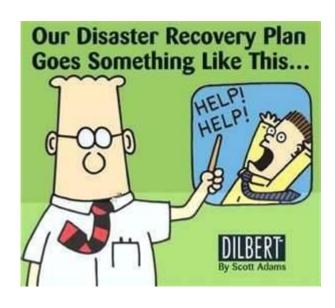
- Onsite backup wasn't running because of a USB key that was in a slot that stopped that process
- Off site backup?
 - Turns out it is backing up the onsite backup

Resolution...?



- We (miraculously) were able to get data off the hard drive platter itself through one of those data recovery places
- Our IT guy drove it across town at 20 km per hour strapped in back seat
- We could have lost at least 6 months of data, maybe more

What lessons can be learned...?



- Most obvious, is be way smarter, right?
- Remember, though when we would check logs..
 - In first case, log said everything backed perfect
 - But wrong disk partition

What lessons can be learned...?



- Remember, though when we would check logs..
 - In second case, log said everything backed up perfectly
 - But onsite didn't note date change
 - Off site was backing up onsite

And in case you still think we were a bunch of dummies...



- University of Calgary had to pay \$20,000 after ransomware attack
- Stratford, Wasaga Beach and Midland all attacked successfully
- In US, Allscripts and City of Atlanta successfully hit

What does a successful ransomware attack mean...?



 At some level, all these places had insufficient backup!

So what can you do?

Nothing can stop automation



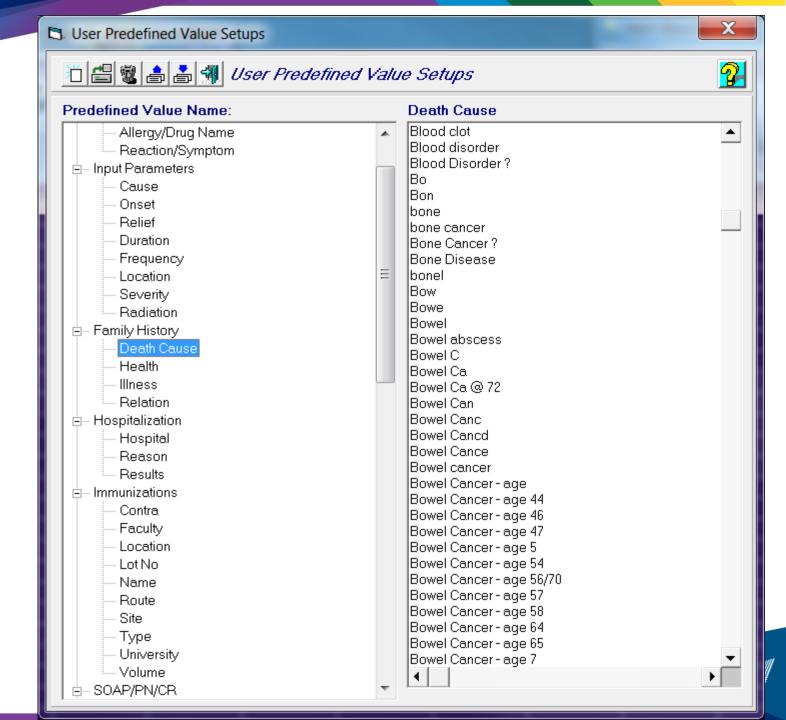
- Usual stuff, backup at least two places in two different media
- Test the back up
 - This does NOT mean looking at file registry or backup log

So what can you do?

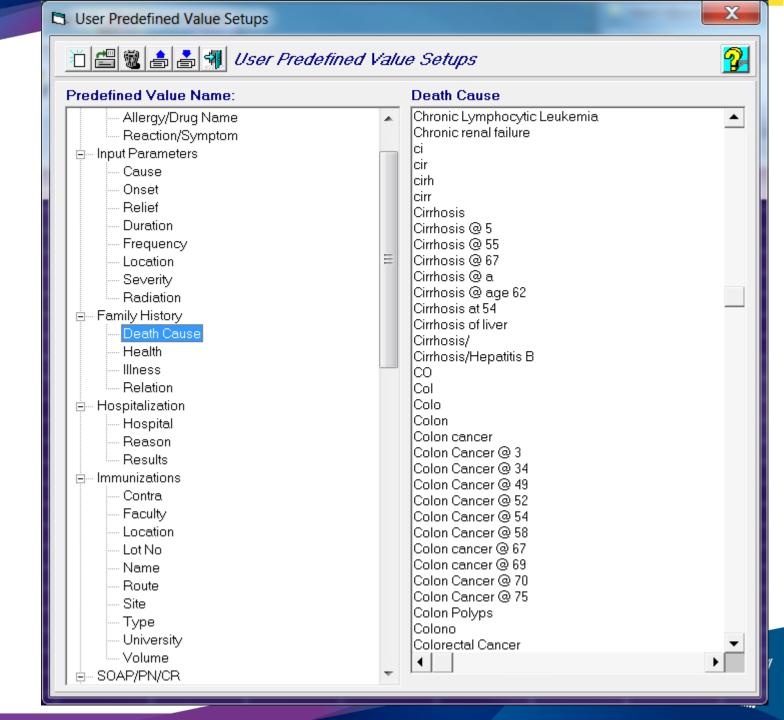


- You MUST trial restoring from the backup
- AND, if possible, not done by person who is responsible for setting it up in first place

A plea for data entry...



But wait, there's more





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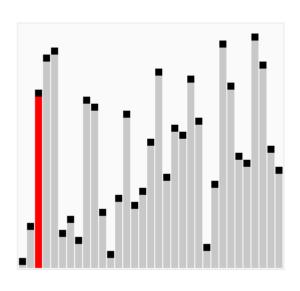
But wait, there's more

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Page: 8

Lesson here...



- Set up your agreed data structures RIGHT away!
- If you are new clinic, meet and WORK THIS OUT
 - "What are we going to call mammograms, an Xray or a screening test?"
 - "How are we going to enter Pap smear results?"
- If established clinic, well it depends...

Summary

• Don't be like our clinic...



Trial restoring your data from your backup

 Ensure that there is clinic or organization wide agreement on data structure entry

