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Title: Increasing adoption and wellbeing of clinicians by designing Electronic Medical Records with human-technology mediation lenses.

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In recent decades Electronic Medical Records (EMRs) were implemented in healthcare systems vastly. As an Information Technology (IT) software tool, EMR was thought to provide numerous benefits to patients, healthcare professionals, healthcare systems and governments. EMRs were expected to enable more efficient management, organised data storage and accurate information sharing to mention a few benefits. Countries rapidly adopted these solutions through subsidies provided by governments to help ease the raising costs of healthcare. Despite best intentions, EMRs' reality turned out very differently. They are appointed as the number one distressing factor for clinicians nowadays. Complains involved: "to be chained to computers, "...turning clinicians into highly paid data clerks instead of carers of patients." as presented by medical doctor and thought leader Eric Topol in his podcast from January 2020, from the series Medicine and the Machine. Technology acceptance models (TAM) have provided a framework to create adoption, and user-centered design has improved the user experience for clinicians. However, neither of these approaches have tapped into cultural aspects and human-technology mediation implications of such IT system. Thus, this paper provides a post-phenomenological analysis of EMRs using the proposed mediations by D. Ihde. It takes qualitative studies and literature on the subject matter to shift the current disappointing and ineffective role of EMRs in healthcare systems today. Ultimately, this paper provides a critical and practical guide to design with human-technology mediations in mind to increase more satisfactory experiences and wellbeing of clinicians.

Cartoons of electronic medical records, which explain the sentiment of clinicians and general healthcare staff.



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