First, every item of the draft strategy pertains to the software developers. Require that physicians be in charge of developing the software, and not physicians who have never practiced medicine. Require the usage of the new products by select practitioners prior to any release of the product. Allow the entire record to be searchable rather than only the few checkboxes or fields. With the paper record a physician could fairly easily search the entire record, not just select portions, therefore, this functionality must be included in any new product.

To the extent that the software has dictated the usage, to the same extent the usage has dictated leaving out the patient. The ultimate purpose of the EHR is to be able to track the almighty “population,” since all reimbursement will be based on “populations.” Once the paper record went away, the individual patient had to be dispensed with also and become just another record in the database.

The primacy of the patient and the physician-patient relationship must be re-established in any reinvention of the EHR. Until that happens, there will be no satisfaction in the usage of EHRs, by either providers or patients.