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with Dr Hester Wilson

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## 8 reasons to avoid the latest e-health record system

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It is unreasonable to expect GPs to use the proposed MyHealth Record (MyHR) system because it is not fit for purpose, says the AMA.

The organisation has rejected the Federal Government's plan to link GP incentive payments to MyHR, describing the proposal as poorly thought out and premature.

AMA president, professor Brian Owler says there are fundamental issues with the design of MyHR that are yet to be fully addressed, and it is not at a stage where it can be adopted by practices.

The AMA says the model has eight flaws that must be fixed. These are:

- Patients can remove information from view, making the clinical record potentially incomplete and of no clinical value;
- Clinicians are unaware if information has been removed from view;
- Radiology or pathology results are yet to be made available to the MyHR;
- Shared health summaries are static documents and quickly go out of date;
- Inaccurate data uploads present clinical risks;
- Most patients don't have a MyHR, and are unlikely to get one under opt-in arrangements;
- Opt-out trials are yet to be conducted; and
- Other medical specialists are not being supported to engage with the MyHR

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**Andy Piotrowski9** · 3 months ago

I agree between my own MD3 software, the patients piece of paper with their meds written, CDMnet... , reports pending, previous clinics, hospitals, we are turning into administrative clerks. It is a good idea, though as Einstein , everything should be as simple as possible , but no simpler good GP encounters/ relationship, and adequate time to cull through the relevant.

The patient at times think it is " just there".  
The ones that have it up to date aren't the concern, it is the ones - no computer, cognitive problems etc.  
We worry about our children being on the computer too much.....

Andy  
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