

1 VERMONT MEDICAL SOCIETY RESOLUTION

2 **Electronic Health Records and the Physician-Patient Relationship**

3 *Adopted October 27, 2012*

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5 Whereas, the ability to gather medical history and to apply knowledge about diseases and their
6 treatments lies at the core of the practice of medicine; and

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8 Whereas, the ability of an individual physician to gather a history and effectively engage on a
9 course of treatment with an individual patient depends on their ability to establish a physician-
10 patient relationship based on trust, respect, and a human-to-human connection; and

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12 Whereas, the use of structured electronic health records (EHRs) has become increasingly
13 ubiquitous in medical practice; and

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15 Whereas, EHRs can make a positive contribution to the practice of medicine by improving access to
16 data that can assist patient and physician in medical decision making and that can increase
17 knowledge about diseases and their treatments; and

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19 Whereas, EHRs run the risk of significantly detracting from the practice of medicine by mandating
20 protocols that effectively dictate the content and course of the physician-patient interaction; and

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22 Whereas, the nature of using EHRs, which requires physicians to keep their eyes and their
23 attention on a computer screen, means that often important visual cues are missed to the detriment
24 of the physician-patient relationship; now therefore be it

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26 **RESOLVED, that the Vermont Medical Society create an EHR work group which will be**
27 **tasked with researching the experience of Vermont physicians with respect to the impact of**
28 **EHRs on their practices and report their findings to the VMS Council, including**
29 **recommendations for changes in the design and education in the practical use of EHRs in**
30 **order to increase their usefulness and reduce or eliminate any harm they do to the physician-**
31 **patient relationship.**