

# A Patient Portal: The Means to Trusted, Timely, and Targeted Education

In today's world of information overload, great educational material alone is not enough.

BY PAUL C. SEEL, MD, MBA

Whether about home repairs or health care, educating consumers is critical for their success. The better they understand the basics of the service being offered, the more they will benefit. In the case of health care, when the patient's physical and financial well-being are on the line, the stakes could not be higher. Well-informed patients are more engaged, have better results, and are easier to take care of. Increasing their satisfaction also leads to higher retention, increased rates of referral, and more utilization of the practice's services. Do not forget that meaningful use under the Medicare and Medicaid Electronic Health Records Incentive Program mandates that practitioners be able to provide patient-specific educational material, which can include information on therapeutic options and alternative products that may be better suited to that individual. This is where the boundaries between using personal health information for education and for marketing start to blur.

The good news? Educating patients has gotten easier, and the patient portal can be integral in both selecting and delivering worthwhile content at a time when patients are paying attention.

## GOOD CONTENT IS REQUIRED

There is no shortage of multimedia content for patients on a vast array of health topics. A Google search for "glaucoma treatments," for example, yields 6.4 million entries—a testimony to the explosion of medical content on the Internet. Many of these entries will be worthwhile, but intermixed will be the bad and the downright ugly. Fearing a lack of quality control, most clinicians are reluctant to delegate patients' education to online search engines. Yet, according to Pew Internet Research, 84% of patients search the Internet for information on a health topic.<sup>1</sup> Because they generally trust information from their physicians, providing

thoroughly vetted material can reduce misinformation from unreliable sources.

Practices have multiple sources from which to acquire solid educational material, and they can mix and match these resources. A practice's library can include, not just information about disease processes, but also new products or procedures that may address a patient's specific problems (including marketing materials). Practices can create their own content, ranging from print articles and frequently asked questions to video clips and testimonials, or they can acquire information from other sources. Professional societies such as the AAO have extensive libraries available to their members. Additionally, a number of commercial content providers have excellent video-based materials. All of this information can be delivered electronically, in a timely and targeted fashion, via a patient portal. This material has been examined for appropriateness and accuracy, and because it comes from the physician's office, it is trusted.

## HELPING PATIENTS DEAL WITH INFORMATION OVERLOAD

Not only medical content has grown explosively online. The methods for distributing information have also become easier and cheaper. As a result, everyone is exposed to more information than he or she can process. To paraphrase James Gleick in his best seller *The Information: a History, a Theory, a Flood*, when information becomes cheap and readily available, one's attention becomes the limiting factor.<sup>2</sup>

Great educational material is not enough to bring patients up to speed. Figuring out when they are tuned in is necessary to getting a message across. The task is akin to coaxing someone to eat: figure out when he or she is hungry, but otherwise, do not waste time trying to feed him or her.

Limiting information to topics that are pertinent will also help hold patients' attention.

### FACILITATING EDUCATION WITH A PATIENT PORTAL

There is nothing new about providers and their office staff's providing trusted and targeted material to their patients. Unless the office's procedures are extremely well organized, effectively delivering patient-specific materials when patients are paying attention can be a hit-or-miss process as well as labor intensive. Meaningful use rules add another degree of difficulty. The distribution of educational material based on an individual's personal health information must be secure, and records must be maintained of who received those materials. Imagine the implications for a US Air Force fighter pilot if unsecured educational material on a sight-limiting condition were inadvertently intercepted. A patient portal efficiently automates the password-protected distribution and electronic delivery of multimedia. It creates an audit trail of who received what when, satisfying record keeping for meaningful use.

Portals also enable patients to complete their registration paperwork, including a lifestyle questionnaire, online before their appointments. Because the process is more convenient, they can take the time needed and also have the opportunity to access their prior records. Because this process occurs before the appointment, it permits a teachable moment. Patients are thinking about their health issues and are receptive to information. The educational material may be print or video content, or it may be direct contact from the refractive coordinator or other appropriate staff (Figure).

### EXAMPLES OF TRUSTED, TIMELY, AND TARGETED INFORMATION

Following are some specific examples of using a patient portal to deliver trusted and targeted education in a timely manner.

**Example No. 1.** John Smith, aged 68 years, uses his practice's patient portal to make an appointment for a cataract evaluation online. Based on the appointment type, John will automatically receive information electronically about cataracts before his appointment. It may include a basic definition of a cataract and/or more specifics about its removal and various premium IOLs. Mr. Smith has an opportunity to learn about cataracts before his appointment and will likely make better use of the time with his provider.

**Example No. 2.** Sue Jones, aged 32 years, registers online the week before her appointment. She notes in her lifestyle questionnaire that she hates wearing glasses and has been unable to comfortably wear contact lenses for many years. She may receive a brochure outlining

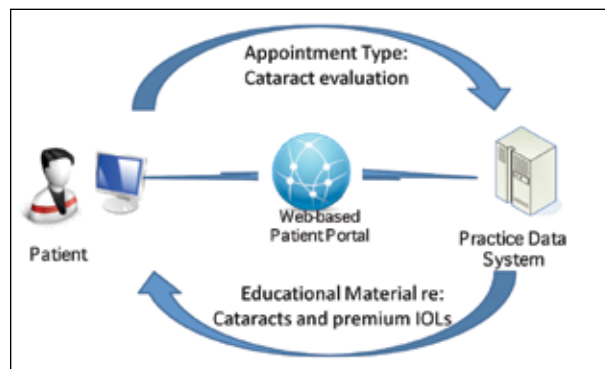


Figure. Communicating directly with a patient portal allows the delivery of topic-specific educational content to be automated.

frequently asked questions about refractive surgery and why she would want her provider to perform her surgery. Because there is time before the appointment, a call from the refractive coordinator may go a long way to demonstrating that Ms. Jones' eye care provider is best equipped to help her.

**Example No. 3.** Bob Johnson, aged 56 years, is a high myope who fills out a lifestyle questionnaire and notes that his spectacles are 7 years old. He might like to know about newer optical materials that might improve his appearance. An invitation from the optical manager to stop by and look at some thinner, more attractive lenses might be well received.

### CONCLUSION

The common denominator of all three examples is that the portal helps to highlight something the patient wants or needs to understand better. These clues may come from information provided by the type of appointment booked, a preference noted on a lifestyle questionnaire, or data mined from the patient's medical history. The practice can then initiate a set protocol to deliver material and/or reach out to that patient prior to the appointment, while he or she is likely to be paying attention. The portal increases efficiency, facilitates education, and improves the patient's experience—and very possibly his or her outcome. ■

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1. Fox S. Who doesn't gather health information online? *Pew Internet*. October 18, 2011. <http://pewinternet.org/topics/Health.aspx>. Accessed November 21, 2011.

2. Gleick J. *The Information: a History, a Theory, a Flood*. New York, NY: Pantheon; 2011.