

Bringing Physicians and Patients Together Via Smartphone? Dr. Church Has An App For That!



I am always excited when physicians design products for other physicians because they “get it.” Here’s the tale of a Midwest physician, Dr. Fred Church, who has developed a **free** app to communicate one-on-one with his patients via email or text.

Mary Pat: *Dr. Church, tell me how you came to design [e-Consult My Doctor](#), an app that lets physicians and patients communicate with the ease of email and text in a secure environment.*

Dr. Church: I suppose the axiom of “necessity is the mother of all innovation/invention” applies here. I saw a growing need and had a growing [entrepreneurial passion](#) to solve the problem for more physician-patient interaction between scheduled visits. I believe we are at the precipice of still greater demand for mobile connectivity and services in America.

The premise of private communications to enhance doctor-patient relationships is not a novelty, but how to do it in a HIPAA-compliant manner that is also simple and convenient is a significant challenge. We are delivering an elegant smartphone app that uniquely understands a busy doctor’s and patient’s lives and works to serve them. We have created a utility that enables any doctor to be a concierge-service doctor and every patient to be the beneficiary of that great personalized care – care that is direct from the doctors that know them and whom they trust.

Mary Pat: *You describe [e-Consult My Doctor](#) as a tool to augment the physician-patient relationship, not replace the traditional office visit. Can you give some examples of this?*

Dr. Church: In no way is our communication management tool intended to replace the face-to-face interaction and

assessment between a physician and his established patient.

We have terms of service that users will explicitly understand and agree to prior to participation. Doctors will not have to worry about this being crystal clear to patients. Most reasonable people understand that emergency situations need to be dealt with in-person and this tool is not intended to deliver emergency communications.

Example Scenarios:

1. "Doctor, can you give me an evaluation of this mole as I think it has changed since you last saw me for my physical? You told me to watch it and document it myself on my phone... should I be seeing you now or wait until my next physical?"
2. "Surgeon, I am three days post-op and it's Sunday afternoon and I'm scheduled to see you tomorrow for follow-up. Can you take a look at these two pictures of my wound to tell me if I need to go to the urgent care or ER tonight before tomorrow's follow-up? I'm not alarmed but a little concerned at how it looks and I want to have your opinion before my scheduled follow-up."
3. "Doctor, one month ago I described to you during Betsy's well-child visit the rare sounds and behavior changes I was hearing and seeing from my 3 month-old daughter and felt like I was having difficulty adequately explaining it to you. Guess what, I was able to capture it on this video with audio. Can you listen to it and tell me your opinion if I should be concerned about it? Should I bring her back in after you view this so you can examine her again and/or do more lab workup?"
4. "Doctor, we talked about considering certain omega 3 supplements and I want your opinion on this particular supplement (see picture of label) from XYZ that the pharmacist recommended. Do you think it's a good one also? I appreciate your opinion before my next follow up with you."

Mary Pat: Foremost in everyone's mind is the privacy and confidentiality of texting and emailing – how does e-Consult My Doctor achieve HIPAA compliance?

Dr. Church: Our smartphone app technology uses best practice standards for data at rest and in transit using [AES 256-bit encryption](#). Doctors and patients will have a secure login to their app so that if their phone is stolen or misplaced, the data is still encrypted and cannot be viewed without a user's password. If a user's account is somehow compromised, administratively we can suspend his account, his e-consulting relationships, and access to the information between those relationships.

Mary Pat: Do you see this product replacing the traditional function of a nurse triage in the medical practice?

Dr. Church: Absolutely not. In fact, it is intended to offload the burden that triage is often overwhelmed with. Traditional healthcare will always need people to properly triage communications at a doctor's office. Unfortunately, high volumes and increased costs mean that calls are not always responded to in a timely way. Doctors need communication tools that are portable and flexible and this describes e-Consult My Doctor.

Mary Pat: Your software has some interesting features, including a mini-EMR or PHR (Personal Health Record.) Can you describe the benefits of a mini-EMR available from a smartphone?

Dr. Church: Because our solution is much less complex than an EHR (Electronic Health Record), a single adult patient user may keep and manage all of his dependents' information on one app securely. Our well-designed smartphone app stores all related health event reminders, vaccine history, and [PHR](#) information. The PHR on our smartphone app is viewable/editable without the requirement of an internet

connection, which is a clear advantage over EHR portals. When patients participate in managing their information and updating their PHR data between visits, it makes it easier for intake nurses/staff during scheduled visits to make sure the EHR's data is also reflecting recent changes that may be more current than EHR updates from various sources: other urgent cares/ERs, other specialty doctors, other health providers/doctors/sub-specialists (DDS, DC, DPM, etc.), hospitals etc. One of the main advantages of patients participating in their own PHR information is it will hopefully improve PHR accuracy, contribute to better patient compliance, and help serve both patients and doctors in traditional healthcare delivery.

Mary Pat: How does the documentation of the communication between the physician and the patient get back into the practice EMR?

Dr. Church: The app will allow for exporting content via PDF and both doctors and patients will have their own copy of e-consultation data on their apps. Doctors may elect to attach the PDF of the e-consultation interaction to their respective EHR if they believe it is important enough and pertinent to a patient's long-term record. For example, several EHRs do not have the ability to [import pictures, audio, and video content](#) which this app will easily store for minimal convenience fees. Additionally, a doctor can simply summarize the exchange in her next scheduled office visit's documentation if she feels the content is important enough. This will vary on an individual case-by-case basis and will be up to the doctor's judgment.

Mary Pat: Between the secure communication and the mini-EMR, e-Consult My Doctor sounds very much like a patient portal. Can your software replace a patient portal for a medical practice?

Dr. Church: The mission of our software is to deliver

a different and simpler solution for convenient communication and to augment the functionality of an EHR's patient portal. An EHR patient portal is valuable for a singular patient to see what his doctor's EHR documents as his current information including labs, vitals, etc. The **e-Consult My Doctor** app will allow direct one-to-one communication any time and anywhere the doctor and patient are willing to participate. One of the foundational premises of our product is that a doctor's extra time and effort should be rewarded directly by the beneficiary... like having pay-as-you-go access to their mobile phone or email for enhanced, personalized care between scheduled visits.

Mary Pat: You have essentially designed a product that allows physicians to be reimbursed for care that they have been previously providing for free. Some patients will appreciate the convenience and be willing to pay for the personal attention and others will think it is akin to the airlines charging for luggage! How do you answer those who think healthcare is already too expensive without any additional fees?

Dr. Church: I'm amazed how many people are willing to pay for the \$1,000 – \$2000 per patient per year for 24/7/365 access that they may only utilize a few times a year. I personally know concierge doctors who are eagerly looking forward to our HIPAA-compliant solution that will help them achieve better work-family life balance with our communication management tool. We believe our smartphone app will bring a revolutionary solution that allows every doctor and every patient to participate in a concierge e-consulting relationship at a potentially lower price point. Our solution eliminates the middleman with a convenient and simple solution at a very affordable price and payment is directly and immediately received by the doctor.

Mary Pat: When will this product be available on the market and what will it cost physicians to purchase?

Dr. Church: The anticipated market delivery date is **November 30, 2013**. The app will be free and the basic subscription level will also be free. Users will be given a limited amount of secure storage space and may upgrade to larger amounts based on their individual needs. We will also offer a premium subscription level that will afford a larger secure space allotment and additional valuable service offerings. Our app will offer a pay-as-you-go, transactional model for the basic subscription level and a fixed-price price point for the value-minded user who wants more.

Mary Pat: *How can readers get in line to try your app?*

Dr. Church: They can go to <http://e-ConsultMyDoctor.com> and sign up for pre-launch information and be the first to try it out. We invite physicians who want to be beta-testers!