Health Information Exchanges (HIE)

Name

Course

Tutor

Date

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The platform of Health Information Exchanges (HIE) presents the healthcare providers like nurses, doctors, and pharmacists to formerly access the patients' medical data information. The information is shared electronically hence enhancing quality, time, security and value for the patients. The types of Health Information Exchanges in which health providers deploy to trace and safeguard patients' data sequentially and include:

Directed Exchange

Directed exchange offers healthcare professionals the capability to collect and dispatch the guarded data electronically. They include data from the laboratories, referrals, patient discharges, and healthcare givers on internet platforms with encryptions, security, and communication trustworthiness.

Query Based Exchange

Query Based Exchange is a platform that presents the healthcare givers with the capability to access information on request regarding a patient’s data from other givers for arrangements of any emergency cares.

Consumer Mediated Exchange

Consumer Mediated Exchange offers many patients a chance for comprehensive management of their medical data electronically. In this case, the patients can govern their medical data, which will lead to data transfer between the healthcare givers, demographic information presentations, medical bills, tracings, and health observations.

The TESO Family Nurse Practitioner Project is working on medication safety concerning the avoidance of errors and worst scenarios. The task of the family nurse practitioner is operating within the HER to realize its operations with safety in prescription, transcription, and dispensation classifications. The project's HIT is proportionate to the patients’ security and, as such, informs on the actual time of information to the healthcare givers since electronic documentation is flexible with the research. The patient’s safety is maximized in the HER utility and teamwork among the nurses and HIT professionals involved alongside structured patient relevance care provisions (Cross et al.,2019). The synchronization in the EHR is applied with bar code medication advancement at the healthcare position with active medical monitoring of the curative procedure. Additionally, there are advanced drug notifications of drug intakes and extreme monitoring events with the information. In this way, the nurse accesses the data and utilizes it for medical prescriptions.

The electronic medication records (EMARs) presents genuine medical offers in addition to the values of nursing laboratory practices. The information in insulin administration in the EMAR is linked with the current plasma glucose and serum potassium grades in one option (Motulsky et al., 2019). Accordingly, it helps the project nurse to maintain mandatory retrievals of HER documents from the various laboratories.

The family nurse practitioner project applies standardization of evidence care procedures. They include items for patient education and action plan inside and around the project location. In this manner, quality outcomes are comparable to other institutions. Therefore, the nurses are using the EHR produced patient education items. Respectively, the project recommends HL7 clinical architecture (CDA) to summarize the text, imageries, sound, and other multimedia portions (Kash et al.,2017).

Reference

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