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## FOR PAPERWORK

# Hospital OK's Computerized Data System

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MOUNTAIN VIEW — An administrative nervous system of the hospital, accepting and distributing data in place of what most institutions call "paperwork,"

was made a permanent feature of El Camino Hospital.

For that period El Camino in effect has been the "test tube" where the Medical Information System (MIS) was developed by Lockheed Missile & Space Company (LMSC).

In May, 1971, LMSC turned the project over to Technicon Medical Information System Corp. and work began to install and test MIS under the daily stresses of a community hospital.

On Friday the board gave its verdict: MIS is both medically practical and economically advantageous. The hospital approved a contract to pay Technicon \$67,379 per month for the computerized service.

MIS is essentially the ad-

ministrative nervous system of the hospital, accepting and distributing data in place of what most institutions call "paperwork."

The "nerve endings" of that system are television and keyboard terminals found in virtually every ward, used by nurses, technicians, doctors, business office clerks and other hospital staffers.

Through them staffers record and receive admission information on patients, nursing schedules, medication schedules, lab test results, diets — and doctors' orders.

The business office in turn maintains a listing of the costs of those services and sends its computer-calculated bill to the patient after release.

The \$67,000 tab for the space-age system, considered by some to be the most advanced and comprehensive in the nation, actually will save the hospital some \$19,000 per month, by staff calculations.

Roughly \$40,000 in savings are realized by a direct reduction of costs for paper forms and manpower to handle paperwork.

Another \$46,000 is saved in cost containment which has allowed El Camino's charges to remain low for Peninsula hospitals in the face of rising costs, administrators report.

The system aroused controversy, however, when a sizable minority of hospital doctors attacked it for demanding more of their time than the conventional approach.

Even though the board approved it, chairman Richard Wheat, a physician himself, continued to contend that "it makes it harder for me to carry out my practice."

"But because of its overall benefit to the hospital, I welcome it," he said.

He and director Billy Russell called for assurances that new programs will be added to the system to better serve physicians. The contract set that project as a number one priority for further development of MIS.

Technicon executive vice president and general manager Melvin Hodge, who also signed the contract on the spot, said improved patient charts, better summaries of laboratory data and diagnostic codes are in the works.

A capacity to let doctors put remote terminals in their own office, so they can check details about hospitalized patients without leaving the office, now is possible, he said.

But "it's a money problem" because those services would cost a doctor \$300 per month. Further, they can only reach doctors with offices very close to the hospital.

During the past two and a half years the system has been evaluated with funds from the U.S. Health, Education and Welfare Department (HEW), concerned with finding methods of countering skyrocketing medical costs.

HEW spokesmen in the past have called MIS the most advanced system of its kind.