Solving the Problems of Missing Prenatal Records and Inconsistent Prenatal Care for the Underinsured

Prenatal care is one of the most vital and cost-effective services provided by public health organizations for underinsured pregnant patients. Yet, the very environment where this care is delivered can lead to inconsistent care and the all-too-common scenario of missing prenatal records just when they are needed most. eNATAL(SM), an innovative new Internet-based prenatal care system, can solve these two problems immediately, and can serve as the foundation for new initiatives and programs to improve the prenatal care of the underinsured.

Creating, filing, sending, finding, copying, and faxing paper prenatal records are tedious and expensive exercises for any practice in a flawed effort to make sure that at least some patient information is at the hospital when the patient delivers her baby. Typically, paper prenatal records are sent to the hospital after the patient's eighth month of pregnancy with the clear understanding by all that when the patient presents after this time her prenatal records are already outdated and may be missing critical information. And if the patient has not yet reached eight months gestation and presents at the hospital, it is certain that there will be no information whatsoever about her in spite of all the time and effort expended to create and maintain her prenatal paper record at the office. It is also a well-known fact of prenatal care that, despite all reasonable education efforts, a significant number of patients do not always go to the "right" hospital when labor arrives or emergencies arise. For these patients, the providers at the "wrong" hospital have to manage their care without the benefit of any of the information collected in the preceding months and have to rely exclusively on information provided by the patients who are probably in a state that is not conducive to reliability.

Instead of maintaining a paper prenatal record with all of its limitations, eNATAL stores all of a patient's prenatal information in a digital form. This electronic prenatal record is securely accessible by providers from wherever there is an Internet connection using only an Internet browser. This means that the most current and up-to-date prenatal record for every patient can be viewed any time of the day or night, and at any time throughout a patient's pregnancy, from almost anywhere. This access is not dependent on the patient presenting at the "right" hospital or clinic as providers at the "wrong" hospital or clinic can just as easily have access to the patient's complete and current prenatal record. The benefits of an electronic prenatal record are not limited to just reliable access issues, but can also save precious staff time in order to spend more time with patients by not having to shuffle paper and locate records for every visit, phone call, or consultation.

Prenatal clinics sponsored by public health organizations are often staffed by nurse practitioners, midwives, residents, medical students, etc., and in many locales, patients see a different provider at each prenatal visit. It is exactly this environment of brief, routine, and high-volume visits with "anonymous" providers that can lead to patients "falling through the cracks". Also, in order to insure quality care and because prenatal care is such a litigious area of medicine, it is imperative that some system be implemented to meticulously evaluate each patient for risk and to assure that the intended

care for that patient is always delivered. The prenatal record must also quickly convey to each provider what has been done in the past, and more importantly, what needs to be done in the future. Hopefully, all prenatal clinics already have some sort of manual system in place that takes into account the turnover in both patients and providers.

eNATAL provides a risk identification system where, as a by-product of just entering the prenatal history, physical, and laboratory work, specific risks and problems are automatically identified and brought to the attention of the provider. If the provider agrees that the suggested risks or problems are valid, eNATAL creates a customized care plan for the patient specific to her own list of risks. The standard care plans for each risk are customizable and are designed by a provider with supervisory responsibilities for the quality of the prenatal care delivered at these clinics. For example, if a patient is found to be at risk for anemia, either by history or lab values, her risk-specific care plan may include care items like dietary counseling, iron supplementation, iron laboratory studies, repeat blood tests at 28 and 36 weeks of gestation, etc. These care items are presented to every provider at the appropriate prenatal visit and act as persistent reminders of needed care. Overdue care items are brightly highlighted to bring attention to any overlooked items and do not go away until the provider takes specific action regarding each item. eNATAL provides the automated and structured system where each pregnant patient can consistently receive the personalized and standardized care that is intended for her no matter who sees her, or where.

Maternal-child healthcare for the underinsured is a primary focus of many federal, state, and local public health agencies as well as local non-profit agencies and benevolent foundations. We believe that funding opportunities are readily available for new maternal-child health initiatives that can transform the delivery of prenatal care for an entire underinsured community. Now that a service like eNATAL exists, it is possible to finally take the next step and equip prenatal exams rooms with computers with Internet access in order to reap the benefits of today's sophisticated health information technology. Although we are not aware of specific funding opportunities, we would be happy to talk to you further about how to enhance the delivery of prenatal care in your community. To get started, please visit our website at www.eNATAL.com and please contact us if you have any unanswered questions.