

# Another COVID-19 pandemic outcome: Busier physician EHR inboxes

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Physicians were already spending more than an hour per day on pajama time before the COVID-19 pandemic. Then the pandemic brought an influx of patient medical advice requests to physician inboxes, according to a research letter published in *JAMA Network Open*.

With the burden of managing an increasingly crowded EHR inbox, physicians can find relief by having members of their care team manage many of the inbox messages.

The research letter, “Trends in Electronic Health Record Inbox Messaging During the COVID-19 Pandemic in an Ambulatory Practice Network in New England,” which was co-written by AMA Vice President of Professional Satisfaction Christine Sinsky, MD, analyzed deidentified EHR metadata from March 2018 to June 2021 in a large ambulatory practice network in New England.

Physicians were grouped into primary care, medical and surgical specialties with a focus on trends in inbox message volume in particular patient medical advice requests (PMAR), time in the inbox, visit volume and type, patient volume and patient use of the patient portal.

Researchers analyzed 40 months of inbox messages, including nearly 10.9 million messages sent to 419 physicians from 38 specialties across 141 practice sites. Overall, primary care physicians received 49.3 messages a day. Other medical specialties received 33.4 messages per day while surgical physicians received 20.7.

During the pandemic, the average total rose from 45 to 46 messages per day for primary care physicians. For medical specialties, the number of messages jumped from 29.3 to 32 per day while surgical physicians increased from 16.6 to 23.3 a day.

Among the different types of patient messages, primary care physicians experienced the highest increase in PMAR s during the pandemic—3.9 messages per physician per day—compared to other

medical specialties at 2.2 and surgical specialties at 1.1 messages.

Further, the study reveals that PMAR volume was increasing even before the pandemic. But the rate of increase was higher with the pandemic and varied across the three specialty groups. Surgical specialties saw the fastest growth in PMAR message volume during the pandemic.

## Quicker rise for surgical specialties

Overall, the first 15 months of the pandemic yielded a small but sustained increase in volume of messages originating from patients for all specialties. This increase in patient message volume during COVID-19 pandemic happened despite a decrease (for primary care and medical physicians) in the number of patients seeking care during the same period.

With the pause in elective care in 2020, monthly in-person visits decreased for all specialties while telehealth visits increased. But for surgical specialties, there was a significant increase of in-person visits between January and June 2021 while that number decreased for primary care and other medical specialties. For surgical specialties, the increase in patients being seen in-person in 2021 could be associated with clearance of backlog of elective surgeries that had been postponed in 2020, says the research letter.

This pandemic related surge in inbox volume will further aggravate an already burned out physician workforce. Committed to making physician burnout a thing of the past, the AMA has studied, and is currently addressing issues causing and fueling physician burnout—including time constraints, technology and regulations—to better understand and reduce the challenges physicians face. By focusing on factors causing burnout at the system-level, the AMA assesses an organization's well-being and offers guidance and targeted solutions to support physician well-being and satisfaction.

Discover simple tips to help physicians master the patient portal inbox.

## Systemically address the inbox burden

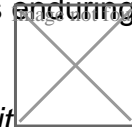
“With COVID-19 potentially remaining a long-term endemic threat to public health, the priority to systematically address inbox burden before the pandemic through workflow redesign, team-based inbox management, and consideration of reimbursement for inbox-related work remains,” the research letter says.

Read about five simple changes to help cut doctors' EHR burdens.

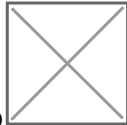
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The CME toolkit, “EHR In-Basket Restructuring for Improved Efficiency,” is enduring material and

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