

Dictation System and Configuration

Dictation Capture System

Best Practice:	Customer site-based dictation capture system(s). System must be on MedQuist's list of approved dictation systems.
Acceptable Alternative:	Dictators dictate to MedQuist's Regional Data Center dictation capture systems.

Dictation Configuration - MedQuist Data Center Dictation

Best Practice:	Standard dictation prompts with user ID/work type validation. Standard prompts include a greeting, location (if necessary), user ID, work type, and patient identification prompt.
Acceptable Alternative:	Standard dictation prompts without work type entry validation. Standard prompts include a greeting, location (if necessary), user ID, work type, and patient identification prompt.

Dictation Configuration - Location Codes - MedQuist Data Center Dictation

Best Practice:	Dictators enter a location code when there are multiple facilities/departments using the same toll-free dictation number.
Acceptable Alternative:	Dictators dial a different toll-free dictation number for each different facility/department.

Dictation Configuration - Access Codes

Best Practice:	Dictators enter their own unique dictation ID number when accessing the system.
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Dictation Configuration - Report/Work Types

Best Practice:	Dictators enter the correct report/work type at the time of dictation. System is configured so that each transcription report/work type has a corresponding dictation work type. For example, if there are three types of H&Ps (Pre-op H&P, Regular H&P, Cardiology H&P), there will be a dictation work type and a transcription work type for each type of H&P
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Dictation Configuration - Patient Identification

Best Practice:	Dictators enter the visit/encounter-specific patient identification number at the time of dictation.
Acceptable Alternative:	Dictators enter the patient-specific identification number (for example, medical record number) at the time of dictation.

Multiple Dictations

Best Practice:	Dictators dictate one patient report per dictation job number.
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Transcription Outsourced Services ("TOS") Best Practices

Dictation Devices - Portable

Best Practice:	Dictators will have and use a dedicated portable dictation device that is programmed with their unique access code.
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Dictator Database (DEP) Maintenance

Best Practice:	Customer adds and changes physicians via DocQmanage as needed.
Acceptable Alternative:	MedQuist handles dictator updates using our standard best practice.

Dictation Instruction Cards

Best Practice:	MedQuist provides the content and/or proof of the dictation card to the customer for printing & distribution.
Acceptable Alternative:	MedQuist provides dictation cards to the customer for distribution for a fee.

Transcription and Report Formatting

General Report Formatting

Best Practice:	All transcription is typed as dictated, with only grammatical corrections and replacement of patient name with "the patient" (AHD1 Book of Style)
Acceptable Alternative:	Qualified verbatim (dictator provides format to the transcriptionist)

Abbreviations

Best Practice:	JCAHO DNU Abbreviation List
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Physical Examination/Review of Systems

Best Practice:	Paragraph with all cap subheadings
Acceptable Alternative:	Paragraph format with mixed case subheadings

Allergies

Best Practice:	Mixed case
Acceptable Alternative:	Positive/Negatives in all caps
Acceptable Alternative:	Medicines in all caps

Patient Names Dictated as Part of Report

Best Practice:	"The patient" typed in place of the patient name in the body of the report.
Acceptable Alternative:	Transcribe the patient's name as dictated. Spell the patient's name phonetically if the patient's ADT is not located.
Acceptable Alternative:	Transcribe patient's name as dictated. Insert a QA Marker if the patient's ADT is not located.

Spacing within paragraphs

Best Practice:	Two spaces after colons and periods.
Acceptable Alternative:	One space after colons and periods.

Spacing between paragraphs

Best Practice:	One blank line between paragraphs. Headings (PHYSICAL EXAMINATION, HISTORY, ETC.) along with the associated text WITHOUT blank lines within paragraph.
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Numbered and Sub numbered Lists

Best Practice:	Formatted flush left using numerals first, with alpha characters following numbered items if needed. One hard return after each item (no blank lines between items).
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Blanks

Best Practice:	All blanks (QA Markers) within the context of the document are formatted per client's preference.
Acceptable Alternative:	All blanks (QA Markers) within the context of the document are formatted with a 10 underscore line.

Standard Letter Format

Best Practice:	Date will be populated from Date of Service or Date of Dictation. Closing will be transcribed per the dictator or the transcriptionist will enter "Sincerely".
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Dates

Best Practice:	Date formats standardized across account (i.e., 1/1/11 or January 11, 2011).
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Date of Service

Best Practice:	If the Date of Service does not come from the ADT interface feed, and is not dictated by the dictator, the Date of Service is left empty.
Acceptable Alternative:	The Date of Dictation is used as the Date of Service if the Date of Service is not available via interface or dictation.

Carbon Copies

Best Practice:	Transcribed only as dictated.
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Incorrect Work Type Entered by Dictator

Best Practice:	Transcriptionist changes the work type to the appropriate work type.
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No Dictations

Best Practice:	No Dictation Work Type is set up for each customer with appropriate stage list - either delivered or not - to the customer.
Acceptable Alternative:	No Dictation Work Type with customized template to note the original work type entered by the dictator - either delivered or not - to the customer.

Standards/Normals

Best Practice:	Standards/normals used during dictation or customer approved dictator/customer level standards/normals. The dictator is required to dictate the correct name of the standard/normal. One standard/normal per dictation.
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Dictated For - Co-signor

Best Practice:	Dictators dictate the signing physician's name when the report is to be signed either jointly or solely by an individual other than the dictator (such as a resident, PA, RN, etc.). Dictators requiring a co-signor will be identified by the customer for correct database configuration.
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Mandatory Headings (Headings List)

Best Practice:	When a customer requires specific headings and/or a specific order of the headings on the final report, the headings list feature will be configured for the customer for standardized section and subsection headings with pre-determined order.
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Addenda

Best Practice:	The addendum will be handled as a separate report, and will be typed and sent to the customer in the work type that was dictated.
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Work Assignments

Best Practice:	No specific dictator to specific MT work assignments
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Training and Support

Pre Go-Live Training

Best Practice:	Customer-funded "Train the Trainer" session at a MedQuist facility for appropriate solution(s) per the training pricing terms and conditions.
Acceptable Alternative:	"Train the Trainer" training at customer site or via Webinar per the training pricing terms and conditions.
Acceptable Alternative:	End User training at customer site or via Webinar per the training pricing terms and conditions.

Post Go-Live Training

Best Practice:	Customer provides continued educational training sessions.
Acceptable Alternative:	Customer-funded "Train the Trainer" session at a MedQuist facility for appropriate solution(s) per the training pricing terms and conditions.
Acceptable Alternative:	End User training at a customer site or via Webinar per the training pricing terms and conditions.

Support

Best Practice:	Contact 888-DICTATE or send an e-mail to support@medquist.com for all support requests.
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