



# Sharing Notes Using EHRs and Patient Portals



A patient portal makes it easier for clinicians to share notes with patients, but clinicians without access to a patient portal can still mail typed or hand-written notes to patients. If your organization uses an Electronic Health Record (EHR) and a patient portal, we recommend working with your health information systems team to coordinate how patients and clinicians will share notes.

We suggest exploring with your technical team early in the planning process the customizations needed to satisfy your organization's open notes policies (e.g., notifying patients they have a signed note).

The lists below may help guide your discussion.

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## OpenNotes for Providers

Below is a list of potential controls organizations may consider to help providers manage their panel of patients in an open notes practice:

- Whether a provider can exclude a patient from open notes.
- Providers, departments, or clinicians can choose their own start date for open notes.
- Ability for a provider to see if a patient has read a note.
- Option for a provider to hide a particular note from a patient (i.e., not viewable online).

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## OpenNotes for Patients

Giving patients preference settings for their online notes can help maximize patient satisfaction with both open notes and your patient portal. Below is a list of possible features that can assist patients and caregivers accessing notes on your EHR:

- Notify patients through secure portal and e-mail messaging when a visit note is ready to read. We are discovering that letting patients know when a note is available, in the same way banks let you know when your statement is ready, is a simple way to get patients more involved in their care.
- Allow patients to choose their own notification preferences for frequency and type of notifications (e.g., after an office visit, but not after a phone call).
- Consider reminding patients to review previous notes prior to an upcoming visit.
- Allow patients to opt out of open notes.
- Provide patients with links to an online medical dictionary or another reliable resource to look up medical terms.



“Just about every health system in town has a portal. So on all them you can now see your medication list, your diagnosis list, many times you can e-mail your doctor, or see discharge instructions. So those are all a step forward... OpenNotes is the next step where you can actually see the narrative of what your doctor is writing... To draw an analogy—for most portals you’re reading the table of contents of your health care book. With OpenNotes, you’re reading the chapters.”

**Marc Horneffer, MD,**  
Columbia St. Mary’s

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## Establishing an Account for Caregivers, Family Members, or Proxies

Some patients may choose to share their notes with caregivers or family members. Particularly for patients with chronic illnesses and complex health needs, voluntarily granting caregivers access to notes can help keep caregivers up to date with medication or treatment plan changes. Protections are needed, however, to help ensure a patient’s safety and the confidentiality of a note in case of privacy or abuse concerns.

- Have a process for patients to privately and securely give permission to a caregiver, family member, or proxy to access their records, including notes.
- Allow patients to decide privately and securely which of their notes caregivers or proxies can view.
- Allow patients to request the deactivation of a caregiver or proxy account.

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## Looking Ahead

Portal functionality will continue to expand with the spread of innovations and transparency. As functionality grows, more sophisticated communication options will be directed toward increasing patient involvement in their care. Such features may:

- Solicit feedback from patients about their notes (e.g., give patients the option to comment on or even edit their notes).
- Have patients report in an organized way errors or safety concerns deriving from notes.
- Offer mechanisms for patients to upload into their records data (blood pressure, glucose, etc.) and narratives from their homes.
- Invite (authorized) informal caregivers to upload data and impressions.
- Provide patients with mechanisms to furnish (and correct) family and social histories.
- Involve patients in co-authoring and co-signing notes with their clinicians (perhaps with the help of space-limiting and formatted templates).

