Six Big Problems With Using Pagers in Healthcare
At OnPage, we are so focused on ensuring that healthcare practices get the right message to the right physician at the right time that we sometimes fail to take a step back and ask why we need OnPage alerts instead of the technology we are replacing i.e. pagers. Pagers have many faults, not least is their inefficiency which costs the average hospitals **$1.75 M per year** in inefficient communications and can impede critical clinical workflows. We have identified six main issues that we see as clearly demonstrating the unreliability and inefficiency underlying pagers and holding healthcare innovation back.

(1) **Pagers are NOT HIPAA compliant**
Most doctors don’t realize that pagers are *not* HIPAA compliant but indeed they are not. In order to be HIPAA compliant, pagers must:
- Require a sign-in process
- Have encrypted messaging
- Have delivery and read receipts
- Have date and time stamps on messages
- Enable customized messaging retention and remote wipe capabilities
- Use only a specified contact list

Pagers might have one or two of these abilities but none have all six of these requirements. There’s a significant cost to not being HIPAA compliant as was underlined in the case of Catholic Health Care Services which was fined **$650K** for failing to have patient information encrypted and password-protected.

(2) **Pagers only have high priority pages**
Pagers typically don’t have low versus high priority messaging. In a world where all you have is a hammer, every page looks like a nail. So rather than differentiating between a prescription refill and an admission to the hospital, all pages sound alike and the difference between these two circumstances is not audible.

(3) **Pagers have limited range**
Outside of the few square blocks neighboring a hospital, a pager often won’t receive its intended page. So, if a doctor or nurse is at home or taking care of business away from the hospital, they may not hear their pages. It doesn’t take much imagination to realize that there is an important patient impact here from healthcare providers not getting their messages.
(4) **Pagers don’t enable two-way communication**
Imagine you had a one-way telephone where you could only make calls but not receive them. If you have this image firmly planted in your mind, then you have a concept of the traditional pager which can only receive pages but not initiate or further communication. In hospitals in general, *text messaging is not allowed*. And even if you do somehow have two-way communication enabled, reference point #1 above and #5 and #6 below.

(5) **Pagers cannot escalate alerts**
As noted in #3, not all pages are created equal. But for pages that are critical, there is frequently the need to bring in expertise or assistance of other professionals. Traditional pagers don’t permit this level of communication to occur. Instead, healthcare workers need to rely on their smartphone to make calls as their pagers do not allow this level of communication.

(6) **Pagers don’t allow attachments**
Successful healthcare diagnoses and effective treatments typically require test results and imaging. However, traditional pagers are incapable of facilitating this necessary level of communication. Instead, you are left with what you see on the screen of your pager. And that information, my friend, is not much.

These six reasons only begin to tell the story of the inadequacies of pagers. They don’t even address the cost to patients and their families of wasted time in getting care to the individual in need. So *caveat emptor*. Beware of that low-cost pager. While it might be low cost at first, it’s long term costs are significant.

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