

Improve surgical documentation quality and reimbursement at the point of care.

In-workflow Computer-Assisted Physician Documentation (CAPD) streamlines operative report and procedure note documentation.

The shift to value-based care is increasing the pressure to deliver timely, accurate and compliant clinical documentation. For hospitals and healthcare systems, documentation inaccuracies and delays in surgical procedure notes and operative reports can put significant reimbursement at risk. And with ever-changing guidelines and rules, this documentation is even more challenging to capture and code appropriately. Complex physician schedules across multiple locations make it difficult for clinical documentation specialists to follow up with clarifying questions, and physicians are often dissatisfied with existing electronic health record (EHR) workflows that don't meet their unique needs.

Designed for surgical documentation workflow

The Vincari™ Surgical Computer-Assisted Physician Documentation solution offers a guided workflow experience designed to address common challenges for surgeons and proceduralists:

- Access to daily surgery schedules from multiple systems
- Keeping up to date with ICD-10 and compliance requirements
- Streamlining repetitive tasks common to procedure notes
- Quickly and accurately capturing the differences in each patient's story
- Addressing retrospective CDI and coding queries
- Tracking charges for professional billing

Vincari's intelligent workflows bring together learned habits and existing patient information to streamline the clinical documentation and coding process. Surgeons are empowered to quickly create accurate and complete documentation that captures ICD-10 and Joint Commission compliant details. This in-workflow solution provides access to daily surgery schedules and patient lists and critical patient information from the medical record. It guides surgeons through the documentation process, automatically prompting them when clarifications are needed to capture the required level of specificity, to quickly and easily document the appropriate level of care.

A better clinical documentation experience means more time for patient care.

- **Save time** by creating a specific and compliant report in less than 90 seconds that reduces disruptive retrospective queries and automatically sends a charge report to your office
 - **Improve efficiency** as the system learns and adapts to your practice patterns and behaviors, keeping you up to date with ever-changing requirements
 - **Quickly access** daily surgery schedules through native iPhone and Android applications
 - **Capture each patient's story** with ease with your voice, in your preferred workflow
 - **Add diagrams and photos** to reports to better articulate conditions and procedures
 - **Ensure appropriate quality ratings and reimbursement** with documentation that accurately captures the level of care provided
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In less than 90 seconds, a highly detailed and compliant report is created and is immediately available in the EHR for the entire care team. In parallel, a copy is distributed to referring physician practices and an automated charge capture report, complete with suggested CPT and ICD-10 codes, is sent to the surgeon's practice for coding and billing. The number of retrospective CDI and coding queries is reduced, as the necessary level of detail is immediately available to accelerate the revenue cycle and realize more appropriate reimbursement.

Vincari Surgical CAPD solution features



During preparation and planning—access to schedules and patient lists.

Connect with physician offices and hospital systems to provide access to daily surgery schedules and patient lists.



While creating the note—specificity drives appropriate capture.

Streamlined workflow and real-time advice help add specificity to procedures and diagnoses to ensure appropriate reimbursement and patient acuity.



After signing the note—compliant report distribution.

Compliant clinical documentation and charge data is immediately available to various EHRs, care teams and coding departments, and to the provider's office, eliminating the need to manually track charges.



Throughout the patient encounter—physician follow-up.

CDI teams can instantly access and review notes with in-workflow physician follow-up as needed.

To learn how Nuance® CDI and CAPD, backed by artificial intelligence, can ease the clinical documentation burden for your care teams, please call 1-877-805-5902 or visit nuance.com/go/capd.

Eliminate administrative burdens associated with clinical documentation.

- **Ensure accurate reimbursement** with real-time advice presented at the point of decision making to capture more ICD-10 specific and compliant patient documentation the first time
 - **Streamline coding processes and accelerate the revenue cycle** by making detailed clinical documentation and charge capture data immediately available in the EHR
 - **Improve communication between caregivers** through immediate access to post-operative notes
 - **Avoid delays and eliminate transcription costs** while preserving each patient's unique story through Dragon® Medical One
 - **Connect with ease** through cloud-based deployment and interoperability with many popular office and hospital EHRs
 - **Analyze program performance** with case tracking that observes and tracks cases, enabling research and improvement opportunities
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About Nuance Communications, Inc.

Nuance Communications, Inc. is a leading provider of voice and language solutions for businesses and consumers around the world. Its technologies, applications and services make the user experience more compelling by transforming the way people interact with devices and systems. Every day, millions of users and thousands of businesses experience Nuance's proven applications. For more information, visit www.nuance.com/healthcare or call 1-877-805-5902. Connect with us through the healthcare blog, [What's next](#), [Twitter](#) and [Facebook](#).
