

The EMR Switch Checklist

What to plan, test, and protect before, during, and after your EMR transition.



Before you commit

- ❑ **Run the Trust Test on your finalists:** data ownership, export terms, exit costs, in the contract
- ❑ Document why you're switching and share it with staff before rumors do
- ❑ **Baseline current performance:** clean claim rate, days in A/R, documentation time per clinician
- ❑ **Budget the J-curve:** reduced capacity, temporary staffing, post-launch optimization



90 days out

- ❑ Define the clinical minimum dataset to migrate; archive the rest with read-only access
- ❑ Validate migrated data on real charts with the clinicians who use them; set acceptance thresholds
- ❑ Map complete workflows, admission through claim, with frontline staff from every role
- ❑ Test Part 2 segmentation, consent handling, role-based access, and audit trails
- ❑ Name super-users, relieve their workload, and train them first
- ❑ Schedule role-specific scenario training and book the second training wave now



Go-live week

- ❑ Cut visit volume and hold it flexible; no automatic snap-back date
- ❑ **Run a command center:** visible issue log, clear ownership, honest triage
- ❑ Keep at-the-elbow support local and clinical, backed by vendor escalation
- ❑ Watch denials and claim rejections daily



First 90 days

- ❑ Deliver the second wave of training once real caseload experience exists
- ❑ Track your baseline metrics weekly and report them honestly, trough included
- ❑ Govern enhancement requests by safety, burden, and reach; publish what's fixed
- ❑ Convert the project team into a permanent optimization function

Want the thinking behind the checklist?

The *EMR Switching Playbook* digs deeper into what a successful transition actually takes, with research-backed guidance for every stage of the move.

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