

CASE STUDY

"California Heart Associates made the decision to "go electronic" in early 2006. We did so, not because of 'Meaningful Use' dollars, or government penalties, or because we were forced to do so by a health plan or hospital system. We made the decision because we could plainly see the inefficiencies and inadequacies of continuing to function on paper. We knew we were making the decision early in the process, and that we were sure to face challenges, but also, that we were doing the right thing for our cardiology group and our patients.

At that time, we were seven cardiologists with an age range from our late 30's to our mid 60's, and with computer skills that reflected that age range. We needed a system, and a company that would be able to provide us with the flexibility and support to implement our EMR, with minimal interruption of patient care and cash flow, and would allow each doctor to work into using the EMR to their capability. We looked at a number of different systems, and chose Prime Clinical Systems, and seven years later, we are still happy with that decision.

Prime gave us the framework to create an EMR for our practice and the support to build this to meet our needs. We wanted a particular look and feel to the charts and to our notes. We wanted our referring doctors to receive consultation and follow up notes that were similar to the dictated notes we had previously generated, yet still met the requirements of a certified EMR, and we believe we have achieved this goal. This is not to imply that the course has been without problems or frustrations, but Prime Clinical has remained an involved partner in our journey, helping us to get where we need to be. We have created a library of notes to meet our needs, and the software allowed us the flexibility to start out by mimicking our paper processes, and continually refine our workflow to meet our needs.



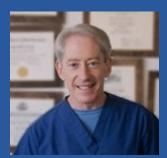
CARDIOLOGY

9 PROVIDERS

3 LOCATIONS



Steve Schiff, MD



Robert Greenfield, MD



Surrinder Thind, MD



Nicolas N Doan Van, MD





CASE STUDY

We are now nine cardiologists, in four hospitals, with 3 outpatient offices, all connected electronically, and all of our outpatient office care is delivered using Prime Clinical's 'Patient Chart Manager.' We have all qualified for Stage I, Year I meaningful use criteria, and have received CMS Medicare or Medi-Cal checks. We are on track for Stage I, Year 2, and looking at Stage II criteria, ICD-10, and other goals for our EMR.

We have integrated voice recognition software for note creation. This allows us to complete notes in "real time" as the patients are being seen, and in many cases, we can give a copy of the office encounter note to the patient, configured with a problem list, medication list, allergies, vital signs, and an outlined plan of care, that they can take home with them. This provides patients with instructions to be followed, which they can review at their leisure. It also gives us permanent documentation of care plans in patient charts.

All doctors have remote access from home and from all of the hospitals at which we see patients, which has dramatically improved our efficiency. We are using HL-7 interfaces for labs and reports where available. We communicate with our office staff using the EMR, and paper has been minimized in our practice. We are looking to use available automated patient appointment reminders. In short, the journey that began seven years ago, continues to this day."

Steve Schiff, M.D.

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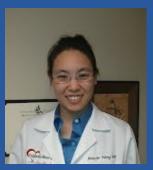
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