Informed Use: Understanding AI Scribes and Safe Implementation

Artificial Intelligence Learning Centre
CHEAT SHEET
CEP

What is an AI scribe?

An AI scribe is an ambient AI tool that is designed to automate the task of documenting patient visits. They can summarize or capture conversations with consenting patients and transcribe them into detailed content.

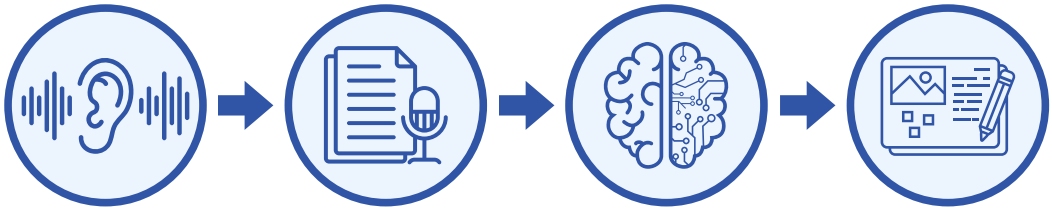
Examples of AI scribe outputs

- SOAP notes for EMRs
- Referral letters and requests for consult
- Insurance documentation

How does an AI scribe work?

It uses a combination of three AI models to generate outputs:

a. Automatic Speech Recognition (ASR) (ex. speech-to-text)
b. Large Language Models (LLMs) (ex. ChatGPT)
c. Natural Language Processing (NLP) (ex. AutoCorrect)



Hear **Transcribe** **Interpret** **Generate**

Automatic Speech Recognition (ASR)

- Recognize, capture and interpret voices
- Identify different people in conversations
- Follow conversational patterns

Large Language Models (LLMs) using **Natural Language Processing (NLP)**

- Correct gaps or errors in transcription
- Capture and interpret emotional context
- Generate output in selected format

These models work together to **hear** and **transcribe** conversations, to **interpret** and **generate** outputs.

How can this help clinical practice?

With approximately 40% of clinician time being spent on administrative tasks, using an AI scribe can help:

- Minimize burden of documentation tasks
- Increase interaction time and enhance engagement with patients
- Improve accuracy of notes from patient visits

BUT, what does a clinician need to be aware of?

Most AI scribes are powered by an LLM which means that the limitations of LLMs **also apply** to an AI scribe. This means that **hallucinations (errors in documentation)** are a possible output - even for a healthcare-specific AI scribe trained in medical language.

Not all hallucinations are easy to spot and correct. It is **vital** to carefully review and edit **every** output as it remains the clinician's responsibility to ensure the accuracy of medical records. For more information, see CEP's LLM and hallucination cheat sheet.

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Selecting a scribe for implementation:

STEP 1 Choose a vendor and review the contract.

It is **vital** to carefully review any contract from a potential vendor, keeping in mind the following requirements:

- Ensure PHIPA compliance.
- Clear restrictions on use of Personal Health Information (PHI).
- Data retention of no longer than 30 days.
- Annual Compliance Confirmation Certificate from the vendor.

REMEMBER

- **Always review** the general terms and conditions in the contract and be clear on what responsibilities are the vendor's and what are the practitioner's.
- Be cautious of selecting any products in beta testing.

Not sure what to look for or where to begin?
The Ontario Medical Association will review any AI vendor contract and flag any contractual issues for consideration.

STEP 2 Implementing into practice.

Once the contract is signed, there are a few things to consider before full implementation in clinical practice:

- Get consent from patients. For more information, see CEP's Informed Consent cheat sheet.
- Review and edit the scribe output every time.
- Ongoing compliance monitoring of the AI scribe software.
- Reporting of any privacy breaches.

STEP 3 Keep informed.

AI is a rapidly changing area and as technology changes, so will the guidance around use in clinical practice. The OMA recommends the following:

- Be aware of professional updates from OMA and/or CPSO on AI guidance.
- Be prepared for change.

References

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