

Episode: *Author Interview: “EHRs, iPatients, and Clinician Well-Being”*

Guest: Ali Rahman

Host: Tim Hoff

Transcript: Cheryl Green

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[bright theme music]

[00:00:03] TIM HOFF: Welcome to another episode of the Author Interview series from the *American Medical Association Journal of Ethics*. I'm your host, Tim Hoff. This series provides an alternative way to access the interesting and important work being done by Journal contributors each month. Joining me on this episode is Ali Rahman, a first-year medical student at the Ohio State University College of Medicine in Columbus. He's here to discuss his article, coauthored with Dr Kimberly Ho, Marissa Dulas, Dr Zi-Yi Choo, and Dr Maria Alcocer Alkureishi, “EHRs, iPatients, and Clinician Well-Being,” in the November 2025 issue of the Journal, [Electronic Health Record Evolution](#). Ali, thank you so much for being here.

ALI RAHMAN: Thanks for having me. [music fades]

[00:00:48] HOFF: So, what is the main ethics point that you're making in this article?

RAHMAN: Yeah. In its current form, the electronic health record forces clinicians into a moral conflict, right? It pits our administrative duties against our fundamental ethical duty to the patient. Dr Abraham Verghese calls this the iPatient problem. So the iPatient, which is a digital chart, is getting meticulous attention, but the real patient in the room gets less of our focus as a result. And that creates a constant morally hazardous choice for clinicians: Do I connect with my patient and fall hours behind on my documentation, or do I focus on the screen to keep up, even if it compromises the quality of care? And this directly challenges core principles of humanistic medicine. It undermines patient autonomy because there's less time for shared decision making. It can also risk patient safety, because we know that multitasking between a screen and a patient can lead to errors. Our article defines this as a central ethical challenge of modern medicine and then provides real, practical strategies to help clinicians and health systems put the focus back where it belongs, which is on the actual patient.

[00:01:56] HOFF: And so, what should your fellow health professions students and trainees be taking from this article?

RAHMAN: The most important takeaway is to recognize that while the system will always push you to prioritize documentation, you're not powerless in the exam room. Your intentions and approach can turn the EHR from a barrier into a bridge for patient connection. For example, our article explains how a simple action like turning the screen and saying, “Let's look at this together,” can transform the entire dynamic of a visit. It makes the patient a partner. We even provide a simple A, B, C framework for patients to

do this. A, ask to see the screen; B, become involved; and C, call for your doctor's full attention when you need to discuss something sensitive. By learning these practical skills early, we can protect the most rewarding part of this profession, which is the human connection. That connection is one of the greatest gifts of medicine, and our article provides a roadmap to help prioritize it even with the pressures of the digital age.

[00:02:53] HOFF: And finally, if you could add something to this article that you didn't have the time or space to fully explore, what would that be?

RAHMAN: Our article focuses on the clinical and ethical fallout of the electronic health record as it exists today. But we have to keep in mind that these systems weren't primarily designed for patient care. They were designed to fulfill billing requirements and government mandates. Despite that fact, the electronic health record has become one of the most important software tools employed in the delivery of health care. So as health care professionals, we need to start asking ourselves, how should the EHR be improved to enhance the patient experience? How can it be implemented ethically, prioritizing patient care, and augmenting the performance of health care professionals? [theme music returns] No one is better positioned to answer these questions than the individuals operating at the interface between the EHR and patients.

[00:03:43] HOFF: Ali, thank you so much for your time on the podcast today, and thanks to you and your coauthors for your contribution to the Journal this month.

RAHMAN: Thank you so much.

HOFF: To read the full article, as well as the rest of this month's issue for free, visit our site, journalofethics.org. We'll be back soon with more *Ethics Talk* from the *American Medical Association Journal of Ethics*.