



66%	81%	2.1 hrs	94%
Reduction in avg. documentation time	Decrease in physician after-hours charting	Saved per physician per day	Same-day note completion rate
18.4 min → 6.2 min	6.8 hrs → 1.3 hrs / week	Across 5 physicians	Up from 41% baseline

CASE STUDY · AMBIENT AI IMPLEMENTATION

From Burnout to Breakthrough: Ambient AI Documentation in a Multi-Physician Dermatology Practice

Abridge Integrated with athenahealth EHR · Southwest U.S. Dermatology Group

CLIENT	A Southwest U.S. Dermatology Group (anonymized)
PRACTICE SIZE	5 Physicians · Medical + Cosmetic Dermatology
EHR PLATFORM	athenahealth (athenaClinicals)
AI SOLUTION	Abridge Ambient Documentation Platform
IMPLEMENTATION LEAD	IPSAI Health · Dan Nabrotzky, Principal Consultant
ENGAGEMENT TYPE	Done-for-You Ambient AI Implementation
ENGAGEMENT DURATION	8 Weeks · Full PRAICE Framework
PUBLISHED	2026 · Outcomes measured at 6-month post-go-live



EXECUTIVE SUMMARY

A five-physician dermatology group serving both medical and cosmetic patients across two Southwest U.S. locations was experiencing a documentation crisis that is now endemic across specialty medicine. Physicians were spending an average of 18.4 minutes per encounter on clinical note completion — the majority of it after patient hours — and the practice's same-day note completion rate had fallen to 41%. Physician satisfaction scores were declining. Two of the five providers had raised concerns about workload sustainability. The practice owner recognized that the problem was structural, not personal, and engaged IPSAI Health to lead a full ambient AI implementation using the PRAICE Framework.

Over an eight-week structured implementation, IPSAI Health selected, configured, and deployed Abridge integrated with the practice's existing athenahealth EHR environment. Six months post-go-live, the results were measurable, sustained, and practice-transforming: documentation time per encounter fell 66%, after-hours charting dropped 81%, and same-day note completion reached 94% — exceeding the practice's target of 90%.

BACKGROUND & CHALLENGE

The Documentation Burden in Specialty Dermatology

Dermatology presents a distinctive documentation challenge that ambient AI is well-positioned to solve. Patient encounters are often high-volume and time-compressed — a busy dermatology practice may see 25 to 35 patients per physician per day, with encounter types ranging from brief cosmetic consultations to complex multi-system medical evaluations. Each encounter requires a structured clinical note that captures chief complaint, examination findings, diagnosis coding, and treatment plan — a process that, when done manually or with voice dictation alone, creates a significant documentation tail that extends well beyond clinical hours.

At this practice, the burden was quantified during IPSAI's Process Audit phase using time-tracking interviews and EHR access log analysis. The findings were consistent with published literature on documentation burden in specialty medicine and confirmed the scale of the problem:

Metric	Baseline Finding	Practice Target
Avg. documentation time / encounter	18.4 minutes	Under 8 minutes
Physician after-hours charting	6.8 hrs / physician / week	Under 2 hrs / week
Same-day note completion rate	41%	90%+
Physician satisfaction (documentation)	2.1 / 5.0 (internal survey)	4.0+
EHR after-hours login sessions / week	Avg. 4.3 per physician	Under 1.0 per physician

Two physicians had independently raised concerns about long-term sustainability. The practice's medical director described the situation directly: documentation was consuming time that belonged to patients, to family, and to the kind of clinical thinking that cannot happen at 10pm in front of an EHR screen.



VENDOR SELECTION

Why Abridge on athenahealth

IPSAI Health conducted a structured vendor evaluation during the Readiness Assessment and AI Selection phases of the PRAICE Framework. Four ambient AI platforms were formally evaluated against the practice's EHR environment, clinical specialty requirements, and team readiness profile. Abridge was selected for three primary reasons:

- **Native athenahealth integration.** Abridge's athenahealth connector enables direct note push into athenaClinicals without copy-paste or manual transfer, preserving the structured note format required for dermatology coding accuracy.
- **Specialty-specific note architecture.** Abridge's dermatology note templates were the strongest of the platforms evaluated — capturing skin examination findings, lesion characterization, and procedure documentation in clinically appropriate structure without requiring physician customization.
- **Physician adoption profile.** In implementation observations across comparable specialty practices, Abridge demonstrated the shortest time-to-comfort for physicians — a critical factor in a five-physician practice where one resistant adopter could derail the entire rollout.

Vendor Evaluation Matrix

Platform	athena Integration	Derm Templates	Adoption Ease	BAA Ready	Selected
Abridge	★★★★★	★★★★★	★★★★★	✓	✓
Nabla	★★★☆☆	★★★☆☆	★★★★☆	✓	—
Freed	★★☆☆☆	★★★☆☆	★★★★★	✓	—
Nuance DAX	★★★★☆	★★★★☆	★★★☆☆	✓	—

IMPLEMENTATION: THE PRAICE FRAMEWORK

Eight Weeks. Six Phases. Zero Disruption to Patient Care.

P

Week 1

PROCESS AUDIT

EHR access log analysis and structured physician interviews mapped the documentation burden at the encounter level. Key finding: 62% of note completion was occurring between 7–11pm. The process audit confirmed that the problem was not physician speed — it was the absence of real-time capture during the encounter.



R

Week
1-2

READINESS ASSESSMENT

Technical readiness (athenahealth API compatibility, device environment, Wi-Fi coverage in exam rooms), clinical readiness (physician openness, existing voice dictation habits), and cultural readiness (front desk and MA understanding of workflow change) were assessed. One exam room required Wi-Fi signal remediation before go-live. All five physicians were cleared for onboarding.

A

Week
2-3

AI SELECTION & ARCHITECTURE

Abridge selected following vendor matrix evaluation. BAA executed. athenahealth API connector configured and tested in sandbox environment. Dermatology note templates reviewed and customized for the practice's specific documentation preferences — including cosmetic consultation structure not present in the default template.

I

Weeks
3-6

IMPLEMENTATION & INTEGRATION

Staged rollout beginning with the two most engaged physicians (clinical champions). Role-specific training delivered: 45-minute onboarding per physician, 20-minute MA briefing. Abridge mobile and desktop deployment completed across all exam rooms. Direct note push to athenaClinicals tested and validated by each physician before patient-facing activation.

C

Week
6-7

COMPLIANCE & GOVERNANCE

HIPAA and PHI compliance review completed. BAA with Abridge documented and filed. Shadow AI audit conducted — two staff members were using consumer AI tools for administrative tasks, both transitioned to approved workflows. Acceptable use policy drafted and signed by all clinical and administrative staff.

E

Week 8
+ Ongoing

EVALUATION & EVOLUTION

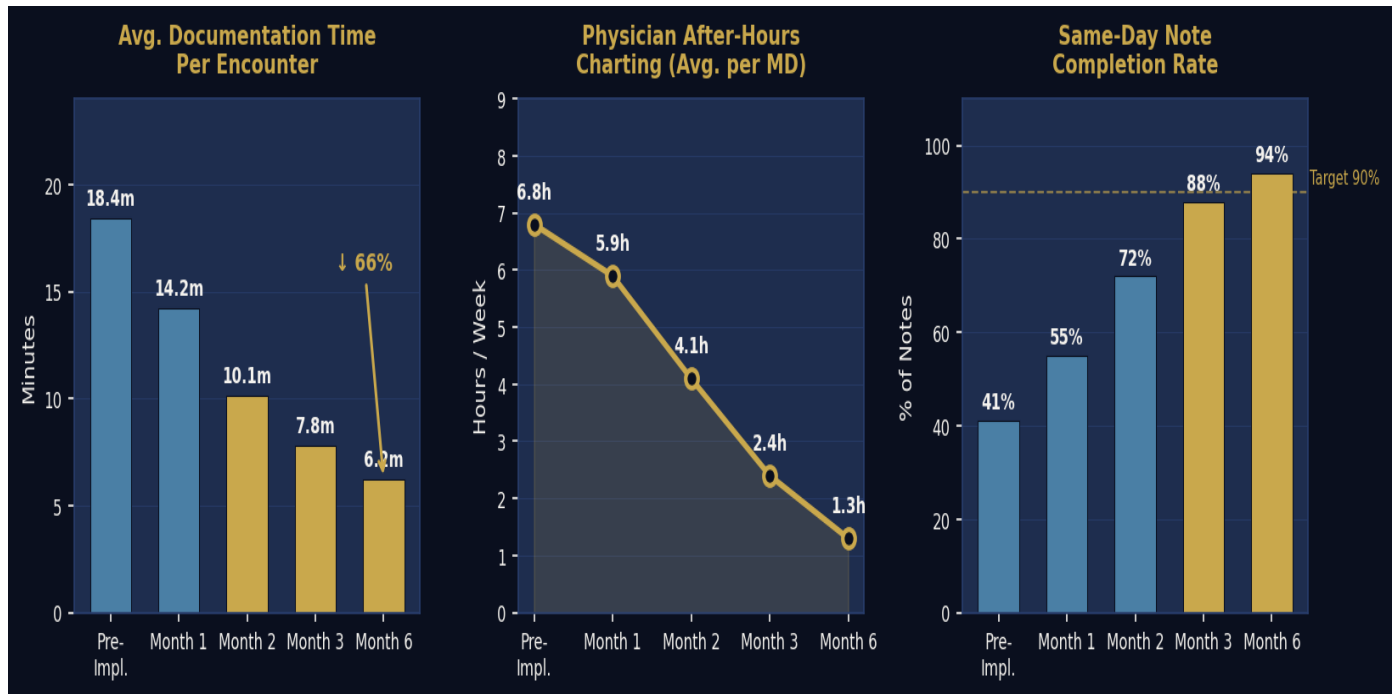
Baseline metrics established for monthly comparison. 30-day post-go-live review conducted with all five physicians. Model drift monitoring cadence set at quarterly. Two physicians requested additional template customization at the 30-day mark — completed within 48 hours. 6-month performance review confirmed all targets exceeded.



OUTCOMES & RESULTS

Six-Month Post-Implementation Performance

Performance was measured at 30 days, 90 days, and 6 months post-go-live using EHR access log data, internal physician satisfaction surveys, and time-tracking spot checks. All primary targets were met or exceeded by the 90-day mark. The charts below reflect the full six-month trajectory.



Steel blue bars indicate pre-implementation and early transition periods. Gold bars and lines indicate post-implementation performance.

Complete Outcomes Summary

Metric	Baseline	30 Days	90 Days	6 Months	Change
Documentation time / encounter	18.4 min	14.2 min	7.8 min	6.2 min	↓ 66%
After-hours charting / MD / week	6.8 hrs	5.9 hrs	2.4 hrs	1.3 hrs	↓ 81%
Same-day note completion	41%	55%	88%	94%	↑ 129%
Physician satisfaction (documentation)	2.1 / 5.0	3.1 / 5.0	4.2 / 5.0	4.6 / 5.0	↑ 119%
After-hours EHR logins / MD / week	4.3	3.7	1.4	0.6	↓ 86%
Time saved per physician per day	—	0.7 hrs	1.7 hrs	2.1 hrs	2.1 hrs / day



PHYSICIAN PERSPECTIVE

What the Clinical Team Said at 6 Months

"I stopped dreading the drive home. The note is done before the patient leaves the room. That's not an exaggeration."

— Medical Director, 5-Physician Dermatology Group

"I was the last to try it. Now I'm the one recommending it to colleagues at other practices."

— Senior Physician, Medical Dermatology

"We didn't realize how much of our scheduling inefficiency was downstream of documentation delays. When the notes got done, everything else moved faster."

— Practice Manager

KEY LESSONS

What This Implementation Confirmed

01 **Clinical champions determine adoption velocity.**

The two physicians who went first created peer permission for the remaining three. Identifying and briefing clinical champions before go-live is not optional — it is the highest-leverage activity in any ambient AI implementation.

02 **EHR integration is non-negotiable.**

Ambient AI that requires manual note transfer is not ambient AI — it is transcription with extra steps. Abridge's direct push to athenaClinicals removed the friction that causes adoption to stall in week two.

03 **Template customization closes the last 20%.**

Out-of-the-box dermatology templates captured 80% of what physicians needed. The remaining 20% — cosmetic consultation structure, specific lesion documentation fields — required customization that took less than four hours but had an outsized impact on physician confidence.



04

Governance cannot be an afterthought.

The shadow AI audit uncovered two staff members using unsanctioned consumer AI tools for administrative tasks. Without a compliance phase built into the implementation, that exposure would have remained undetected.

Ready to see these results in your practice?

Every IPSAI Health engagement begins with a no-cost discovery conversation. We will assess your current documentation burden, evaluate your EHR environment, and tell you exactly what an ambient AI implementation would look like — before any proposal is made.

ipsaihealth.com

daniel@ipsaihealth.com