

# What Are the Prevalence and Evolution of Copy-Paste Practices in ICU Daily Progress Notes, and How Do They Affect Documentation Errors?

## STUDY DESIGN

- A retrospective study from a single academic center medical ICU from 2017 to 2022.
- A total of 60,127 notes written by residents and attendings were analyzed for composition trends.
- Temporal trends in note length, content sources, and errors were evaluated.



## RESULTS

| Trends in ICU Progress Notes Over the Study Period                                  |                   |                          |                                                                                     |                |                         |
|-------------------------------------------------------------------------------------|-------------------|--------------------------|-------------------------------------------------------------------------------------|----------------|-------------------------|
| RESIDENT NOTES                                                                      |                   | ATTENDING NOTES          |                                                                                     |                |                         |
|  | Note Length       | ↑ <b>21%</b><br>increase |  | Note Length    | ↑ <b>2%</b><br>increase |
|  | Copied Content    | ↑ <b>34%</b><br>increase |  | Copied Content | No change               |
|  | Direct Content    | ↓ <b>52%</b><br>decrease |                                                                                     |                |                         |
|  | Templated Content | ↓ <b>9%</b><br>decrease  |                                                                                     |                |                         |

- Higher daily resident note volume was positively correlated with longer notes and more copied and templated content.

The findings of this study suggest that copy-paste practices in ICU daily progress notes contribute to note bloat and introduce a mechanism for the creation and propagation of documentation errors in the ICU.