

# Sully.ai

by Physician & Medical Director

AI Ambient Scribes








Patient Intake

Remote and AI-Enabled Language Interpretation

## Details

Review Date	10/20/2023
Purchase Date	Q3'23
Implementation Time	N/A
Product Still in Use	Yes
Purchase Amount	\$275/month
Intent to Renew	100%
Review Source	Vendor

## Product Rating

Product Overall		5.0
Use Case Fit		5.0
Ease of Use		5.0
API		N/A
Integrations		N/A
Support		5.0
Value		5.0

## About the Reviewer

Purchasing Team

User

Implementation Team

Product Oversight

## Reviewer Organization

Hospitals / Health System

## Reviewer Tech Stack

Epic

Amwell

## Other Products Considered

Nuance DAX

## Summary

- **Product Usage:** The user uses Sully as a virtual scribe for both in-person and virtual clinical visits through an app on an Android phone. Sully records the interaction, generates a report, and emails it to the user, who then imports the report into their electronic medical record system (EMR).
- **Strengths:** Highlights of Sully include its accurate capture of interactions, transformation of patient instructions into conversational language, and added value for users without automatic diagnostic codes integration. The support provided by the Sully team is also considered excellent.
- **Weaknesses:** Sully doesn't always accurately transcribe medicinal brand names and lacks a built-in mechanism to correct such errors. The current lack of seamless integration with Epic and other EMR systems is another limitation, hindering usage ease.
- **Overall Judgment:** The reviewer is extremely satisfied with Sully, remarking that it fills their need for a scribe and helps with capturing necessary details correctly and comprehensively.

## Review

### **Today, we're talking about how you use Sully in your practice. Before we start, could you give a brief overview of the company and your role there?**

I work for the largest consumer-owned integrated healthcare system in the country. It includes a health plan and a care group that offers primary care, specialty care, and surgery, among other things. We also have a university-affiliated research and education institute and a hospital system that spans one and a half states.

I am a physician specializing in pulmonary critical care and sleep. I'm the founder and director of our asthma center and the medical director of our sleep center.

### **What led you to search for a product like Sully?**

I needed a scribe that would make documenting easier for me in my medical practice. As someone with a background in health coaching and lifestyle medicine, it was important for me to spend quality time listening to my patients and understanding their stories. Typing away on a computer during appointments prevented me from truly connecting with patients, figuring out the complexities driving their health issues, and working with them to find the best solutions to their problems. Many of the patients I see have complex conditions; they're referred to me when other healthcare providers haven't been able to provide answers. Establishing that collaborative connection with my patients is crucial in order to help them effectively.

Unfortunately, I found myself spending excessive amounts of time after appointments trying to document everything accurately. Initially, I sought out an in-person scribe, but human scribes take a while to train, and there's attrition when they move to other roles, days off when they become ill, inconsistency in their quality of work, and so on. It was becoming increasingly challenging to find suitable scribes. The role doesn't pay very well, and the available scribes are often young and not yet experienced enough to understand the subject-specific terminology.

### **What key features were you looking for in a solution like Sully?**

My main requirement was the ability to capture the conversation accurately. I wanted a tool that could differentiate between my statements and those of the patient and that would create a note that made sense by accurately capturing what was actually said during the conversation. That was crucial because I often have a preconceived notion of what the diagnosis might be based on what the patient tells me.

### **Did you evaluate any other AI scribes?**

I looked at the new version of Dragon, which you could theoretically take into the hospital with you to take notes while you were consulting.

Another solution I briefly considered several years ago was eVeritas, which focused on improving the efficiency of documenting notes for specific diseases, like asthma and diabetes. I worked with them for a while, but there were limitations due to the lack of leadership and AI technologies at the time. The inability to seamlessly integrate with Epic at the time was problematic, and we weren't able to implement that solution.

Cost was also a consideration, and Epic tends to be a bit of a barrier in this regard. It exercises tight control over integrations – it has its own proprietary systems and it charges for integrations. Epic also prioritizes integrations that

are easy to maintain and require minimal support. This can sometimes be a concern for organizations relying on Epic for seamless integration with other tools or systems. In our case, we've been waiting in the queue for the integration of our pulmonary function testing data. Currently, the data can only be accessed as a PDF and cannot be directly imported into the EMR. This limits its usability and usefulness for me in my practice.

### **How does Sully's pricing structure compare to other solutions?**

Sully is much less expensive than hiring a human scribe, which is a cost I have to carry myself.

### **How would you describe your experience with the sales and onboarding process?**

It's really easy. They're always willing to go the extra mile to accommodate you, and they're very easily accessible if you have any concerns.

### **How do you access and use Sully, and what is your workflow like?**

I use it to document my in-person and virtual clinical visits. I have an app on my Android phone with all the necessary protections. There are no patient identifiers; the app is HIPAA compliant, and all patient data is well protected. Sully only knows the patient's initials, which adds an extra layer of confidentiality.

I open the app, enter the patient's initials, and start recording by pressing a button. When the consultation is over, I pause the recording and click on the "Generate Report" button. I can view the report on my phone, and a copy is sent to my health partner's email, which has appropriate firewalls in place. From the email, I can copy and paste the report into my Epic note. I edit the note to make it fit into my template, and then I'm done.

Sully is also accessible via my computer, but I prefer to use it on my phone. Ideally, I'd be able to integrate it into Epic, but that would require a substantial change, so this solution works for me as an individual.

### **Does Sully generate both a transcript and a note based on the recorded conversation?**

Sully doesn't provide a lengthy transcript but rather synthesizes the information and creates a note based on the conversation. It excludes my questions but includes important information like the care plan, patient instructions, referrals, and assessments. I receive a concise note that summarizes the patient's responses and actions discussed during the conversation. Sully filters out any irrelevant information that may come up during unrelated discussions; its focus is solely on documenting patient symptoms and important medical information.

### **What does the structure of the note produced by Sully look like? Can you customize or edit the note to align with your specific needs?**

I am able to edit the note by using cut and paste and rearranging the content. Sully's team is working on making the note more customizable to align with the format of my current template in Epic. At the moment, it follows a traditional SOAP note structure, which is commonly used in primary care. In specialty care, we often prioritize important information upfront so that the referring primary care doctors can quickly access the relevant details without having to read the entire note. The generated note begins with chief complaints, followed by the conversation and the history of present illness (HPI).

It also includes a list of medications discussed during the visit and any referrals made. Billing codes and objective elements, such as physical exam findings, can also be incorporated by simply speaking them aloud during the visit.

The note then progresses to the assessment and plan sections, breaking down different problems and providing corresponding plans. It concludes with patient instructions, which can easily be inserted into Epic's after-visit summary.

If it's a virtual visit, patients can see the note in MyChart. Sully's accuracy here is helpful in making sure I capture exactly what was said during the visit, which cuts down on patients contacting me after the fact to make corrections.

### **What are the strengths and weaknesses of the product?**

I like how it transforms patient instructions into more conversational language. It was impressive to see that it captured everything I said, even things I may have forgotten to include in my written instructions. It presents the information in a way that is often clearer and better explained to the patient. Overall, Sully helps to pick up on the details I might have missed or failed to document.

Some users will appreciate how Sully adds the codes associated with each diagnosis, which helps with accurate billing. For users of Epic, though, that's less of a benefit because the diagnostic codes are already available in Epic.

As for weaknesses, Sully doesn't always accurately transcribe the names of medications, especially when patients mention brand names instead of generic names. Instead, it transcribes the names phonetically. There isn't a built-in mechanism for me to correct these errors directly within the system at the moment, but its accuracy is improving over time.

Another limitation on my end is the integration with Epic, which will take a while. I know the team at Sully is exploring partnerships and integration options with other care groups, and if those are successful, it will likely be easier to secure an integration with Epic.

### **Have you experienced any bugs or stability issues?**

I encountered some issues with the platform when I first started using the app, but those were due to my system's firewall. I would assume that smaller groups may not encounter those issues.

### **Have there been any instances where the generated note wasn't accurate or where you had doubts or concerns about what it captured?**

There was one instance where the generated transcript seemed different from what I heard. However, when I consulted the EMR to verify the information, it turned out that Sully's transcription was accurate.

### **In situations like this, is there a transcript or recording available that you can refer back to in order to confirm the accuracy of the note?**

No, Sully doesn't produce a transcript or recording. However, I can confirm certain details by cross-referencing the notes I took regarding my recommendations or by checking the electronic medical record (EMR). Generally, any discrepancies are minor and easily corrected.

### **How long does the entire process take?**

It takes about 40 to 50 seconds for Sully to generate the note after I stop recording, and it takes me perhaps another five minutes to edit the note it produces.

**What is Sully’s account management and support quality like?**

The support is impeccable. It’s clear that they genuinely love what they do and are dedicated to making the product successful and ensuring a positive user experience. They have been incredibly responsive and knowledgeable.

**Do you feel like you made the right decision in choosing Sully?**

Yes, I definitely feel like I made the right decision. It feels so natural to have my virtual scribe on my phone with Sully; it really captures the visit for me, which is what I needed. It was difficult for me to function without a scribe because I was so used to having one – even though my memory is fairly good, I did miss things. I would rely on my patient instructions to prompt my memory, but Sully makes it much easier.

**Do you have any advice for individuals who are considering incorporating an AI scribe solution into their workflow?**

My advice would be to choose a partner who is responsive and attentive to your needs; you’ll encounter glitches and compatibility issues with any new technology, and it’s important to have a partner who can come up with creative solutions to address them. In my case, they were really creative in finding a way for me to use Sully on my phone rather than on a computer within the clinic, as it’s typically done. Their flexibility is great. I appreciate that I can use Sully without needing permission from higher-ups, as I already have permission to have a scribe. It just makes practical sense.

**Are any of your colleagues using Sully or similar technologies?**

For now, I’m the only one in my organization using Sully. However, I plan to reach out to my colleagues who have been using scribes and are struggling to find suitable scribes, particularly those in the emergency room. I think it would be beneficial for them to consider Sully as a solution. Using human scribes can be costly and somewhat unreliable. Utilizing AI technology like Sully could potentially save costs in the long run.

While I have discussed this individually with colleagues within our institution, I have only been working with Sully for a short period, so there are still some glitches to iron out. My next step is to have a conversation with the people working on AI in our health plan. I believe that’s the right route to explore before approaching the care group, as they may not have as much support or experience with AI and its potential benefits in healthcare.