

EHRs Are Killing Patients – And No One Wants to Talk About It

Death by a Thousand Clicks: How Corrupted Records Destroy Lives

By Matt Hasan, Ph.D.

I didn't recognize myself in my own medical record.

What stared back at me was a corrupted version of my life: errors hardened into fact, omissions masquerading as truth, and biases coded into permanence. In the healthcare system, the record isn't just paperwork – it *is* the patient. And once the record is wrong, the patient becomes irrelevant and disappears.

I learned this the hard way.

The Encounter

Sitting in an exam room, I watched a physician scroll through my electronic health record for nearly five minutes, eyes fixed on the screen rather than me. Finally, he turned and said: “I just reviewed some of your 700-page records, and wow, you do have an ‘exotic’ situation. I don’t know if I can do anything for you. You’ve already traveled the country to all the top medical centers.”

But those 700 pages were not evidence of care. They were a replication of the same erroneous and judgmental notes, copied, pasted, and echoed across institutions. Many of those “top centers” had canceled my appointments after cursory reviews of the repetitive notes, meaning I never actually saw or received treatment from them. I explained this to the physician, but to no avail. When I later checked his notes, he had ignored my correction and entered exactly what he had initially told me. The false narrative was preserved, solidified, and extended – another layer of distortion added to the record that defined me more than my own voice ever could.

The Trap

Correcting the record has been impossible. Requests vanished into bureaucratic black holes. Clinicians shrugged: “It’s what the system shows.” Administrators hid behind policy. The EHR was treated as gospel, even when it was demonstrably wrong.

This wasn’t just a glitch. It was a trap. Once an error enters the system, it replicates endlessly – across hospitals, insurers, pharmacies, and government databases. The corrupted record becomes institutional fact. And patients are powerless to erase it.

The Injuries That Followed

The corrupted record didn't just distort my story – it reshaped my care, often with devastating consequences. Misdiagnoses led to wrong treatments. Wrong treatments led to botched surgeries. Each intervention compounded the harm rather than alleviating it. What should have been healing became injury, what should have been care became negligence.

These weren't just bureaucratic frustrations. They ruined my life. I am now living with iatrogenic injuries that have put me on a path of lingering death – slow, preventable, and cruel. The corrupted record didn't just fail me; it destroyed me.

The Notes That Denied Care

Worse still, the EHR itself became a weapon. Self-serving, erroneous, and biased notes were entered into my file; notes that painted me as a difficult case, or dismissed my symptoms, or justified inaction. Those notes hardened into institutional truth. They were used to deny care, to delay treatment, to rationalize negligence. I wasn't fighting illness anymore; I was fighting the record. And the record always won.

The System Behind the Screen

I've spent decades working at the intersection of information systems and human behavior. As a former senior executive, professor, and author recognized for leadership in data analytics and systems design, I know how information flows, how bias creeps in, and how institutions weaponize data. This is not the grievous ranting of a disgruntled patient – it is the objective narration and analysis of someone who has studied and shaped these systems professionally, and who now suffers from their failures.

EHRs were sold as a revolution – streamlining care, reducing errors, empowering patients. In reality, they've become instruments of control.

- For clinicians, they dictate workflows, forcing doctors to click boxes instead of listen.
- For insurers, they justify denials, turning human suffering into coded "non-coverage."
- For institutions, they create a veneer of objectivity while embedding systemic bias.

And here lies the cruel paradox: clinicians themselves have become part of the machinery. Many are unwittingly complicit, relying on corrupted records because the system leaves them no choice. Others, whether through indifference or expedience, willingly reinforce the falsehoods. In both cases, the result is the same – systemic harm solidified, patient voices erased.

The Human Cost

I've lived the consequences. Care delayed. Treatment denied. Conversations distorted. Each encounter with the healthcare system became a battle not against illness, but against the record itself.

And it is not just me. This is pervasive. Across the system, patients are trapped in corrupted records that dictate their fate. Millions are living with distorted diagnoses, denied treatments, and institutional bias masquerading as truth. The enormity of this harm is staggering: a healthcare system that claims to save lives is quietly destroying them, one corrupted record at a time.

Why This Matters

It's about trust. Healthcare depends on trust – between patient and doctor, between citizen and institution. When records are corrupted, that trust collapses.

Imagine a justice system where court transcripts could be altered without recourse. Imagine a financial system where your credit history could be falsified and never corrected. That's what EHRs have become: a system where truth is optional, and error is permanent.

The Call

We need accountability. *De jure*, patients have the right to challenge and correct their records. *De facto*, that right is hollow. There is no way for a patient to directly enter rebuttals or clarifications alongside a clinician's notes. Instead, the process requires filing complaints or submitting corrections through a patient liaison or administrative office – channels that rarely act, and almost never alter the record itself. The result is a system where errors remain unchallenged, bias is preserved, and the patient's voice is silenced.

Clinicians must be freed from workflows that prioritize clicks over care. Institutions must stop hiding behind the myth of objectivity and confront the biases embedded in their systems.

Most of all, we need to break the silence. Because silence is what allows harm to metastasize.

My journey through the healthcare system revealed a truth few want to confront: when corrupted records become institutional fact, patients lose their voice, clinicians lose their judgment, and trust in medicine collapses.

This isn't just my story. It's an urgent warning for a smoldering fire that is rapidly progressing toward a five-alarm blaze.

About the Author

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