charmthirteen

FOR NURSES AND CLINICIANS

Two AIs. One shift. *Which one do you use?*

Epic AI and Microsoft Copilot are landing in hospitals at the same time. A working decision framework for the floor, in 10 cards.

SWIPE →

THE-PROBLEM.TXT

THE PROBLEM

Your hospital deployed both, *with no bridge between them*

Epic AI shows up in the chart. Copilot shows up in Outlook and Teams. Each arrives with its own training deck, and neither deck mentions the other.

So the real question on the floor was never "is AI useful?" It was quieter and more practical: *which tool is this task for?*

Route a task to the wrong tool and you either lose the chart context Epic would have given you, or you hand patient data to a tool that should never see it.

> Most AI friction in hospitals is a routing problem, and routing problems have rules.

THE ONE-LINE RULE

"Does this task touch a patient chart or billing?"

YES → EPIC AI · DRAGON COPILOT

Charting, coding, patient messages, discharge drafts. Chart-side tools, cleared for chart data.

NO → MICROSOFT 365 COPILOT

Meetings, research, reports, education materials. Work outside the chart.

One question sorts almost every task on a shift. The cards that follow are the detail.

EPIC-AI-SUITE.EXE

INSIDE THE CHART

What Epic AI *already does*

Over 85% of Epic customer organizations now use its AI tools. Some of this is likely on at your hospital.

DOCUMENTATION

Ambient voice notes, drafted hospital course, procedure narratives, end-of-shift care plan notes

COMMUNICATION

In Basket drafts replies to patient messages and results notes for your review before sending

CODING + BILLING

CDI suggestions, level of service prompts, risk adjustment coding assistants

THE PATTERN

Epic AI drafts, the clinician judges. Your review is the safety mechanism.

Source: Epic; HIT Consultant, HIMSS 2026 coverage

MEET THE AGENTS

Emmie and Penny work *so your inbox doesn't*

EMMIE.EXE · PATIENT-FACING

Chats with patients in MyChart: pre-visit agendas and history, post-visit instructions, drafted replies to routine questions for provider review.

Work that used to arrive as inbox messages gets resolved before it reaches you.

Rush University Medical Center: 58% sustained drop in billing-related messages. Source: Epic

PENNY.EXE · REVENUE CYCLE

Drafts appeal letters from chart evidence, medical necessity justifications, prior auth summaries, and coding suggestions.

Your documentation feeds her drafts, so accuracy in the original note matters twice.

Summit Health: prior auth submission time down 42%, 92% of drafts accepted unedited. Source: Epic

SAME NAME, THREE TOOLS

"Copilot" means three *different things* in a hospital

Check which one is on your screen before you type anything into it.

MICROSOFT 365 COPILOT

Lives in Teams, Outlook, Word, and Excel. Outside the chart. No PHI unless your organization approved a secure integration.

DRAGON COPILOT

Microsoft's ambient clinical documentation. Writes notes straight into the chart, and it is built and cleared for exactly that.

COPILOT HEALTH · CONSUMER PREVIEW

A personal health app for consumer Microsoft 365 subscribers. It has no business anywhere near a patient.

Source: Microsoft. Dragon Copilot GA 2025; Copilot Health entered preview May 2026.

M365-COPILOT.PPTX

OUTSIDE THE CHART

Where *Microsoft 365 Copilot* earns its keep

Everything administrative that surrounds care, across Word, Excel, Teams, and Outlook.

- → Summarize staffing meetings and draft the leadership email
- → Turn unit metrics into a readable report or slide deck
- → Synthesize literature for committees and conference prep
- → Draft patient education guides, including multilingual versions, from approved content
- → Build schedules, checklists, and templates in minutes

> NHS England is rolling Copilot out to 505,000 staff after a trial saved an average of 43 admin minutes per person per day.

Source: Healthcare Digital, NHS England rollout coverage

FRAMEWORK.TXT

THE FRAMEWORK

Six scenarios, *sorted*

SCENARIO	EPIC AI	MICROSOFT 365 COPILOT
Documenting encounters	Always. Real-time, chart-integrated	Never
Discharge instructions	Templates + structured chart data	Patient-friendly or multilingual versions
Meeting prep	No	Summaries, slides, analysis
Research + conference prep	No	Literature synthesis, abstracts, decks
Coding + risk adjustment	Embedded, billing-integrated	Never
Workforce planning	No	Staffing trends, reports

> Try it today: sort your next shift's tasks into chart-touching and everything else, then route them.

THE HARD LINE

PHI never goes into Microsoft 365 or consumer Copilot *unless your org approved a secure integration*

DO-AND-DONT.TXT

- ✓ Epic AI for anything that touches charts or billing
- ✓ Microsoft 365 Copilot for meetings, research, and education materials
- ✓ Validate every AI output before sharing or acting on it
- ✗ No patient names, MRNs, or chart text in a Copilot that was not cleared for it
- ✗ No relying on AI drafts without clinician review, in either tool

Consumer AI tools do not sign Business Associate Agreements. De-identified prompts are the operating rule. Source: HIPAA Journal

I built this framework because clinicians kept asking the same question

Save this for your next shift, and send it to the educator on your unit. The full referenced guide, with the HIPAA detail and the research, is on the blog. We're also gauging interest in a course on exactly this, built for clinicians and nurses. If that's you, say so.

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