If you already use an electronic health record system, here's your chance to help your colleagues who haven't yet made the leap.

# The 2007 FPM User-Satisfaction Survey

n this issue, FPM is publishing its second electronic health records (EHR) user survey – not the results yet, but the survey form itself, as a means of data collection. The survey instrument was developed in cooperation between the editors of FPM and Kenneth G. Adler, MD, MMM. The survey is modified and expanded from an EHR demonstration rating form we published two years ago.1 The first EHR user survey elicited input from more than 400 family physicians, whose responses provided

helpful advice for those still facing the decision to go electronic and wondering which system to choose.<sup>2,3</sup> This year's survey follows the same model but is shorter and easier to complete than the original survey.

The intent of this survey is not to arrive at a picture of the current state of EHR use among family physicians. We simply want to collect satisfaction data from as many family physician users of as many different EHR systems as possible. By publishing product-specific results in an upcoming issue of *FPM*, we aim to help future purchasers of EHR systems make sound choices for their practices.



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# Your colleagues need you

If you use an EHR, please complete the survey. Even if you responded to the 2005 *survey*, we need your input on this one. Your system and your opinion have likely changed in the intervening time. And if you benefitted from the information in the 2005 report, pay the benefit forward by completing the survey yourself this time. The survey project will succeed in direct proportion to the number of family physi-

cians who respond. You can be sure that, where six family physicians use the same EHR, all six are likely to have different opinions of the system. Prospective users could benefit from all six views. The ideal is to obtain a response from every family physician who uses a commercially available EHR system. Still, the broadcast nature of this survey requires some validation of responses to guarantee that respondents are indeed family physicians, that no one is submitting multiple responses to the survey, etc. The most practical means of validation available is, as it was in 2005, verification of AAFP membership. Consequently,

Kenneth G. Adler, MD, MMM, and Robert L. Edsall

the survey asks for your membership number. Only responses from AAFP members will be tabulated.

## Completing the survey

We realize that this survey will take time out of your already busy day. With that in mind, we have shortened it considerably from the first version. We want to thank you in advance for responding. By doing so, you will help many of your fellow family physicians and provide feedback to vendors that spurs improvements in EHR technology.

To maximize the number of valid responses and to make responding as convenient as possible, we are pub-

### **About the Authors**

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lishing the survey instrument both in this issue of *FPM* and online through the *FPM* Web site. The easiest way to submit a survey is to go online to http://www.aafp.org/fpm/ehrsurvey. By providing your responses electronically, you will facilitate the analysis process. Alternatively, you can use the survey form below and on the following pages or download and print a PDF version from http://www.aafp.org/fpm/20070400/ehrsurvey.pdf, complete it by hand, and return the results either by fax to 913-906-6010 or by mail to *Family Practice Management*, 11400 Tomahawk Creek Pkwy, Leawood, KS 66211. Be sure to respond by **July 31, 2007**. Hundreds of your colleagues will thank you.

### Send comments to **fpmedit@aafp.org**.

- 1. Adler KG. How to select an electronic health record system. Fam Pract Manag. February 2005:55-62.
- 2. Adler KG, Edsall RL. Electronic health records: a user-satisfaction survey. Fam Pract Manag. February 2005:47-51.
- 3. Edsall RL, Adler KG. An EHR user-satisfaction survey: advice from 408 family physicians. Fam Pract Manag. October 2005:29-35.

# FPM Electronic Health Record (EHR) User-Satisfaction Survey - 2007

Your name:	
Your 7-digit AAFP membership number:	
Your e-mail address (optional):	
Your age: years	
EHR product name:	
EHR version number:	
Did you help select this EHR for your practice?	O Yes O No
How long have you used any EHR in practice?	years (Round to nearest half-year; e.g., 3.5 years)
How long have you used this vendor's EHR?	years (Round to nearest half-year; e.g., 2.0 years)
How skilled are you in the use of this vendor's EHR?	Novice Average user Expert
	0 0 0 0
In general, not just in terms of this EHR system, how would	Novice Average user Expert
you rate yourself as a computer user?	0 0 0 0
How many physicians in all specialties are in your practice, including yourself?	O 1 O 2 O 3-5 O 6-10 O 11-20 O 21-50 O >50
Does your practice include physicians in specialties other than family medicine?	O Yes O No
Do all physicians in your practice use this EHR?	O Yes O No
Disclosure (select one):	
O A. Neither I nor any member of my immediate family has a vendor of any EHR system.	significant financial interest in or affiliation with a manufacturer or
O B. I and/or one or more members of my immediate family I manufacturer or vendor of an EHR system.	nave a significant financial interest in or affiliation with a
If you selected B, please explain:	

Function	Very satisfied	Satisfied	Neutral	Dissatisfied	Very dissatisfied	Function not installed	Function installed but not used
Review chart information	0	0	0	О	0	0	0
Create visit notes	0	O	0	O	О	0	0
Create telephone messages	О	0	0	О	0	0	0
Generate and use forms for patient care (e.g., referral forms or work excuses)	0	0	0	0	0	0	0
Work without paper	0	0	0	0	0	0	0
Update and review problem lists	0	0	0	0	0	0	0
Update and review allergies	0	0	0	0	0	0	0
Update and review immunizations	0	0	0	О	О	0	0
Update and review medication lists	0	0	0	О	0	0	0
Present graphic views of vital signs, including growth charts	0	О	0	O	0	О	0
Enter and review test orders (e.g., lab, imaging)	0	0	0	О	О	0	0
Manage and review test results (e.g., lab, imaging)	0	0	0	О	О	0	0
Prescribe electronically	0	0	0	О	O	0	0
Create and review scanned documents	0	0	0	О	О	0	0
Manage referrals	0	0	0	O	О	0	0
Manage and provide patient education materials	0	0	0	О	О	0	0
Generate patient lists (e.g., a list of all your patients or a list of all your patients with diabetes)	0	O	0	O	O	О	0
Generate disease management reports (e.g., a list of all your patients with diabetes who have had an A1C in the past year)	0	0	0	O	0	0	0
Assign tasks to other office personnel (tasking)	0	0	0	О	0	0	0
How satisfied are you with the way your EHR syste	em perfori	ns the follo	owing fun	ctions?			
Alerts and Prompts							
The EHR alerts you to problematic medications (e.g., drug interactions and allergy alerts) when they are relevant.	0	0	0	0	0	0	0
The EHR reminds you of health maintenance deficiencies during the visit.	0	0	0	О	0	0	0
The EHR provides assistance in coding visits and capturing charges.	0	0	0	О	0	0	0

Indicate the extent to which you agree or disagree with the following statements:					
Ease of Use and Flexibility	Strongly agree	Agree	No opinion	Disagree	Strongly disagree
This EHR allows individual user-specific customization.	0	0	О	О	0
This EHR minimizes data input.	0	0	О	О	0
This EHR offers multiple note creation options.	0	0	О	О	0
This EHR is fast (minimal wait between screens, minimal boot-up time, etc.).	0	0	О	О	О
Service and Support					
Our EHR vendor provided excellent support during our implementation period.	0	0	0	О	0
Our vendor provides excellent ongoing support and service.	0	0	O	0	0
Our vendor issues at least one significant system upgrade per year.	0	0	0	0	0
Our vendor assists with ongoing training.	0	0	0	0	0

Overall Satisfaction	Strongly agree	Agree	No opinion	Disagree	Strongly disagree
Given the opportunity to pick an EHR system again, I would pick the same EHR.	0	О	О	0	0
If I could go back to paper-based records with no financial penalties, I would do so.	О	О	0	О	0
I would recommend this EHR to physicians in solo or small group practices (1 to 5 physicians).	0	О	0	0	0
I would recommend this EHR to physicians in mid-size practices (6 to 30 physicians).	0	О	0	0	0
I would recommend this EHR to physicians in large group practices (more than 30 physicians).	0	О	0	0	0
I would recommend this EHR to any physician.	0	0	0	О	0
Cost					
This EHR cost more than it's worth.	0	0	0	0	0
This EHR has saved or will save my practice money over its first five years of use.	0	О	О	0	0
Our nationated total and for this EUD nor physician nor year in ¢					

Our estimated total cost for this EHR per physician per year is: \$\_\_\_\_\_\_\_.

(Note: Cost should include software purchase and maintenance fees, information technology staff costs, equipment costs, etc. Figure the average cost per year for the first five years.)

Does your EHR have the following features?			
Interoperability (ability to exchange information electronically with other information systems)	Yes	No	PMS and EHR are a single integrated system.
An electronic interface to a practice management system (PMS)	0	0	О
An electronic interface to a lab	0	0	
An electronic interface to a radiology system (for reports, not images)	0	0	
An electronic interface to a hospital	0	0	
An electronic interface to pharmacies for electronic transmission of prescriptions	0	0	
Connection to a patient Web portal (a Web site where patients can securely send messages directly to your EHR system)	0	0	
Remote access capabilities (e.g., from your home)	0	0	
Connection with a Regional Health Information Organization (RHIO)	0	0	
eFAX capabilities for any patient document being sent to a provider not on your EHR (i.e., fax directly from the EHR without printing it first)	0	0	
Ability to create a summary health document that you can eFAX to outside providers (e.g., a continuity of care record – CCR)	0	0	
Security			
An audit trail (e.g., a record of everyone who looks at a chart)	0	0	
Ability to restrict access (e.g., allow different users to have different levels of access to the record)	0	0	
Password protection (e.g., a password is required each time a user opens the software)	0	0	

С	Comments:
U:	se additional sheets if necessary.

# One last request

Now that you have completed the survey, *encourage at least one colleague* to do so too. It can be someone in your practice or another practice. The survey is open to all AAFP members, and the results will be useful in direct proportion to the number of physicians who complete it thoughtfully.

Submit your responses by transferring your answers to the online survey instrument available at http://www.aafp.org/fpm/ehrsurvey, by faxing this completed survey to *FPM* at 913-906-6010 or by mailing it to *Family Practice Management*, 11400 Tomahawk Creek Pkwy., Leawood, KS 66211. Please submit your response by **July 31, 2007.** Thank you for your help.