

Survey of  
Kentucky Ambulatory Network Members'  
Use of Information Technology

**Practitioner Survey**

Sponsored by the Agency of Healthcare Research and Quality (AHRQ), grant number **R21 HS13487-01**

Dear KAN Member,

A major objective for the Kentucky Ambulatory Network (KAN) over the next two years is to help our members enhance their electronic information management capabilities. We have a small federal grant for assessment and planning, and believe that we can attract more funding over time to help our members (and the network as a whole) use computers to streamline information management for routine practice and research.

**Please take a few moments to complete and return this survey, which should take less than 10 minutes. The opinions and information that you provide will be critical to KAN's ability to promote efficient practical information management strategies that can improve primary care practice and research.**

Survey responses will be kept strictly confidential. No individual responses will be reported. Data will only be used and reported in aggregate form, and surveys will be stored in a locked cabinet at the University of Kentucky Department of Family Practice.

Your completion and return of this survey constitutes your consent to participate in this survey research study. Declining to participate will in no way affect your relationship with UK or KAN. If you have any questions or concerns about this study, you should contact Kevin Pearce, MD at 859-323-5938. If you have any questions about your rights a research subject, you may call the UK Office of Research Integrity at (859)257-9428, or toll free at 1-866-400-9428.

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Signature of individual completing the survey (all identifying information is kept strictly confidential).

On average, how many patients do you see per week (including all of your sites)?

\_\_\_\_\_ (Write number)

On average, how many hours per week do you devote to patient care (including all sites)?

\_\_\_\_\_ (Write number)

Tell us about the following technological applications in regard to your personal practice:

(Check only one category per technology)

	I have no interest in using	I would like to use	I plan to use (within next year)	I am currently using
Electronic medical records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electronic prescriptions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicate with patients via e-mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicate via e-mail with colleagues for purposes of patient care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Receipt and/or storage of test results	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please indicate which choice best describes your use of a handheld device or personal digital assistant (PDA).

- Do not use
- Mostly for personal activities
- Integral part of my everyday medical practice

If you do use a handheld or PDA, in what ways do you use it at this practice site? (Check all that apply)

- Patient care (Check all that apply)
  - Medical Records
  - Reference
  - Medical calculators
  - Guidelines
  - Prescription writing
  - Other (please specify) \_\_\_\_\_
- Billing
- Other (please specify) \_\_\_\_\_

If you do NOT currently use a PDA or handheld computer, do you expect to begin using one?

- Yes, expect to in the next 12 months
- Yes, expect to in the next 24 months
- No, do not expect to in the next 24 months
- Not sure

If you do NOT use the following computerized tools for patient care, please check any of the following reasons why. (Check all that apply)

	Security/ Privacy	Benefits not clear	Dollar Cost	Detracts from doctor/patient relationship	Lack knowledge about
Electronic medical records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electronic prescriptions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicate with patients via e-mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicate via e-mail with colleagues for purposes of patient care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Receipt and/or storage of test results	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please indicate how much your interest in learning more about the American Academy of Family Physicians' plan to provide an open source electronic medical record (EMR) in the near future with an expected cost less than \$200 per month per provider:

- Not interested
- Somewhat interested
- Very interested
- Don't know

If you currently record notes via an assistant, hand-write notes, or dictate notes to a tape, do you expect to use a handheld computer to record notes? (Check only one)

- I am doing that now
- Expect to in the next 12 months
- Expect to in the next 24 months
- Do not expect to in the next 24 months
- Not sure

Do you believe the use of handheld computers for electronic prescribing would substantially reduce medical errors and improve the quality of care?

- Strongly Disagree   
 Disagree   
 Agree   
 Strongly Agree   
 Don't know

Do you have an email account that you use for your practice?

- No  
 Yes

If so, for which of the following activities do you use email account?

	Monthly	Weekly	Few times per week	Daily	Never
Communicate with colleagues for clinical purposes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicate with colleagues for other professional purposes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicate with patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you use email to:

- Receive regular mailings (e.g., newsletters)  
 Receive email from professional listservs  
 Other (please specify) \_\_\_\_\_

Do your patients discuss information with you about their condition or treatment that they have obtained from the Internet?

- Never  
 Seldom  
 Often

How informed do you think your patients who use the Internet are compared to those who do not?

- Less informed  
 About the same  
 More informed

Do you believe that the use of e-mail to communicate with patients enhances medical practices?

- Strongly Disagree   
 Disagree   
 Agree   
 Strongly Agree   
 Don't know

How useful do you think the following patient/practitioner email activities are?

<i>Patient E-mail to Practitioner</i>	Not Useful	Useful	Unsure
Ask questions where no visit is necessary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fix appointments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Get renewal prescriptions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Receive results of medical tests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How often do you recommend the following types of Internet resources to your patients?

	Never	Rarely	Sometimes	Frequently
Internet Support Groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Health Information/Education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How often do you seek information from colleagues, print, or online sources needed to care for your patients? (Excluding drug dosing or interactions)

- Never  
 Rarely  
 Several times a week  
 Daily

Are you able to obtain this information while the patient is in your office? (Again, excluding drug dosing or interactions, but including consultation with colleagues.)

- No  
 Yes

From the list below, select and rank the most significant barriers you believe to be most significant regarding the seeking and access of health information for patient care? (Rank from 1-3, with 1 being the most significant barrier.)

- \_\_\_\_ Time it takes to search  
\_\_\_\_ Format of information  
\_\_\_\_ Searching skills and/or knowledge  
\_\_\_\_ Cost of accessing full-text journal articles  
\_\_\_\_ Knowledge of sources  
\_\_\_\_ Other (please specify) \_\_\_\_\_

**How often do you use the following resources for professional use?**

**Internet Resources**

	Never	Almost Never	Few Times a Month	Few Times a Week	Daily
Literature searches (e.g., MEDLINE or similar sites)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Full-text journals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clinical guidelines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evidence-based medicine related information (e.g., Cochrane library, InfoPOEMS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patient education materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative medicine information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical textbooks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drug information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Services that filter and summarize medical literature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clinical calculators (including any decision support tools)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional organizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Listservs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Print Resources**

	Never	Almost Never	Few Times a Month	Few Times a Week	Daily
Drug reference sources (e.g., PDR)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical textbooks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handbooks or manuals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical and health statistics information sources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Directories (to find individuals, specialists, organizations, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Services that filter and summarize medical literature (in print form)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Print journals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional newsletters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**What kind of medical library access do you have?** (Check all that apply)

- Small medical library within this practice
- Hospital library
- University medical library
- Library via the Internet
- No immediate access to a medical library

**If you have access to a medical library, how often do you use any of its services?**

- Never
- Rarely
- Sometimes
- Frequently

**If you information technology, including access online information resources, indicate how this has affected your practice?**

	No Impact	Minor Impact	Major Impact
Knowledge about new treatments, including drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge about screening and diagnostic tests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge about disease prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interaction with your patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Management of test results	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prescription of drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication with other clinicians	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**How do you track your clinical work for billing purposes?** (Check all that apply)

- Record on handheld device such as Palm or Pocket PC
- Billing codes are generated automatically as part of clinical record taking processes
- Record on computer
- Use billing service
- Record on paper