

A division of Medsphere

# ChartLogic EHR v1

Customized Common Industry Format Template for Electronic Health Record Usability Testing

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#### **Executive Summary**

A usability test of ChartLogic EHR version 1, an ambulatory EHR was conducted virtually November 8-18, 2019 by ChartLogic, a Division of Medsphere Systems Corporation. The purpose of this test was to evaluate and validate the usability of the current user interface and provide evidence of usability in the EHR Under Test (EHRUT). During the usability test 10 healthcare providers who matched the target demographic criteria were participants for each of the 9 tasks and used the EHRUT in simulated, but representative tasks.

This study collected performance data on 9 tasks typically conducted on an EHR:

- 1. Review, then modify patient's date of birth
- 2. Review, then modify patient's sexual orientation
- 3. Enter a new problem
- 4. Change a problem
- 5. Add a new medication and review drug-allergy interaction alerts
- 6. Add a new medication and review drug-drug interaction alerts
- 7. Review and modify status of an implantable device
- 8. Review a list of patient's historical implantable devices
- 9. Reconcile allergies, medications, and problems from a CCDA

During the 1-hour one-on-one usability test, each participant was greeted by the administrator and participants provided a recorded verbal agreement to participate in the study; participants could withdraw at any time. No participants had any prior experience with the EHR. The administrator introduced the test and instructed the participants to complete a series of tasks (given one at a time) using the EHRUT. During the testing, the administrator and data logger timed the test and recorded user performance data electronically. The administrator did not give the participant assistance in how to complete the task. Participant screens and audio were recorded for subsequent analysis.

The following types of data were collected for each participant:

- Number of tasks successfully completed within the allotted time without assistance
- Time to complete the tasks
- Number and types of errors
- Path deviations
- Participant's comments
- Participant's satisfaction ratings of the system

All participant data was de-identified; no correspondence could be made from the identity of the participant to the data collected. Following the conclusion of testing, participants completed a post-test questionnaire and were provided a \$100 gift card for their time. Various recommended metrics, in accordance with the examples set forth in the NIST Guide to the Processes Approach for Improving the Usability of Electronic Health Records, were used to evaluate the usability of the EHRUT. Following is a summary of the performance and rating data collected on the EHRUT.

Measure	N	Task Success	Path Deviation	Tas	k Time	Errors	Task Ratings (5=Easy)
Task	#	Mean (SD)	Deviations (Observed / Optimal)	Mean (SD)	Deviations (Observed / Optimal)	Mean (SD)	Mean (SD)
Review, then modify patient's DOB	10	100% 0%	1.00	17 5	1.15	0% 0%	4.8
Review, then modify patient's sexual orientation	10	100% 0%	1.00	13 8	1.00	0% 0%	4.9
Enter a new problem	10	100% 0%	1.02	23 6	1.16	0% 0%	4.7
Change a problem	10	100% 0%	1.02	16 6	1.07	0% 0%	4.8
Add a new medication and review drug-allergy interaction alert	10	100% 0%	1.02	24 8	1.18	0% 0%	4.3
Add a new medication and review drug-drug interaction alert	10	100% 0%	1.00	4 1	1.33	0% 0%	4.8
Review and modify status of an implanted device	10	100% 0%	1.00	13 6	1.11	0% 0%	4.5
Review list of patient's historical implanted devices	10	100% 0%	1.00	13 6	1.61	0% 0%	4.9
Reconcile allergies, medications, and problems from a CCDA	10	100% 0%	1.00	20 8	1.00	0% 0%	4.5

The results from the System Usability Scale scored the subjective satisfaction with the system based on performance with these tasks to be 86.5.

In addition to the performance data, the following qualitative observations were made:

#### **Major Findings**

Participants found the system to be user friendly and well-organized, especially appreciating the ability to review a patient's entire chart without needing to drill down through several layers of the system. Participants also identified that the EHRUT is well-organized with intuitively labeled cards.

#### **Areas for Improvement**

Participants commented that the patient's chart seems a little busy with the various cards oriented on the page.

#### Introduction

The EHRUT tested for this study was ChartLogic EHR version 1. The EHRUT is designed as an all-in-one solution for primary care, surgical care, and other complex areas of ambulatory healthcare. The usability testing attempted to represent realistic exercises and conditions.

The purpose of the study was to test and validate the usability of the current user interface and provide evidence of usability in the EHRUT. To this end, measures of effectiveness, efficiency and user satisfaction, such as time to complete a task, deviations from the optimal path, and any noted errors, were captured during the usability testing.

#### **Method**

#### **Participants**

A total of 10 participants were tested on the EHRUT. Participants in the test were physicians, physician assistants, and nurse practitioners. Participants were recruited by ChartLogic and compensated \$100 via a gift card for their time. In addition, participants had no direct connection to the development of or organization producing the EHRUT. Participants were not from the testing or supplier organization.

Recruited participants had a mix of backgrounds and demographic characteristics conforming to the recruitment screener. The following is a table of participants by characteristics, including demographics, professional experience, computing experience and user needs for assistive technology. Participant names were replaced with Participant IDs so that an individual's data cannot be tied back to individual identities.

	Part ID	Gender	Age	Educ	Occupation	Prof	Computer	Product	Assistive
					/ Role	Experience	Experience	Experience	Tech
						(months)	(months)	(months)	Needs
1	01	M	40-49	Doctorate	ED	168	408	0	None
				degree	Attending				
					Physician				
2	02	M	40-49	Bachelor	Critical Care	182	240	0	None
				degree	Transport				
					Nurse				
3	03	F	50-59	Doctorate	MD	288	408	0	None
				degree					
4	04	M	40-49	Doctorate	MD/PhD	196	384	0	None
				degree					
5	05	M	50-59	Associate	Flight Nurse	282	360	0	None
				degree					
6	06	F	40-49	Bachelor	Physician	186	336	0	None
				degree	Assistant				
7	07	F	50-59	Bachelor	Staff Nurse	183	300	0	None
				degree					
8	08	F	40-49	Associate	Registered	220	240	0	None
				degree	Nurse				
9	09	F	40-49	Bachelor	Registered	27	240	0	None
				degree	Nurse				
10	10	F	60-69	Associate	Registered	360	240	0	None
				degree	Nurse				

All ten participants (matching the demographics in the section on Participants) were recruited and participated in the usability test. Participants were scheduled for one-hour sessions, which included time for a debrief by the administrator and data logger.

#### **Study Design**

Overall, the objective of this test was to uncover areas where the application performed well – that is, effectively, efficiently, and with satisfaction – and areas where the application failed to meet the needs of the participants. The data from this test may serve as a baseline for future tests with an updated version of the same EHR and/or comparison with other EHRs provided the same tasks are used. In short, this testing serves as both a means to record or benchmark current usability, but also to identify areas where improvements must be made.

During the usability test, participants interacted with one EHR. Each participant used the system in the same location (remotely) and was provided with the same instructions. The system was evaluated for effectiveness, efficiency and satisfaction as defined by measures collected and analyzed for each participant:

- Number of tasks successfully completed within the allotted time without assistance
- Time to complete the tasks
- Number and types of errors
- Path deviations
- Participant's comments
- Participant's satisfaction ratings of the system

Additional information about the various measures can be found in the Usability Metrics section.

#### **Tasks**

A number of tasks were constructed that would be realistic and representative of the kinds of activities a user might do with this EHR, including:

- 1. Review, then modify patient's date of birth
- 2. Review, then modify patient's sexual orientation
- 3. Enter a new problem
- 4. Change a problem
- 5. Add a new medication and review drug-allergy interaction alerts
- 6. Add a new medication and review drug-drug interaction alerts
- 7. Review and modify status of an implantable device
- 8. Review a list of patient's historical implantable devices
- 9. Reconcile allergies, medications, and problems from a CCDA

Tasks were selected based on their frequency of use, criticality of function, and relation to the ONC 2015 Edition Certification criteria that were part of this usability study.

#### **Procedures**

Test participants were scheduled for one-hour sessions and arrived as individual participants. Each participant was assigned a number to identify results while detaching the identity of the individual from the response and observations. Demographic data was collected from each participant.

To ensure that the test ran smoothly, two staff members participated in this test, the usability administrator and data logger with a combined usability experience of 24 years, both with master's degrees.

The administrator moderated each test including administering instructions and tasks. The administrator also monitored path deviations and task success, obtained post-task rating data, and took notes on participant comments. The data logger monitored task times and took notes on number and types of errors.

Participants were instructed to perform the tasks as quickly as possible, making as few errors and deviations as possible, and without assistance.

Each participant was provided with a clinical scenario providing the background context for the task workflows. Each participant was read the scenario and then provided instructions on the task to perform. Task timing began once the administrator finished reading the question. The task time was stopped once the participant successfully completed the task. Scoring is discussed below.

Following the session, the administrator gave the participant the post-test questionnaire (see Appendix D), provided instructions on how compensation for their time would occur, and thanked each individual for their participation.

Participants' demographic information, task success rate, time on task, errors, deviations, comments, and post-test questionnaire were recorded.

#### **Test Location**

Remote desktop testing was conducted on a remote desktop using a screen sharing application. Only one participant at a time was logged into the session with the administrator and data logger, with a unique session ID utilized to ensure privacy.

#### **Test Environment**

The EHRUT would typically be used in an ambulatory healthcare environment. The test application was running on a private server using a test database on an Internet connection. The participants used a mouse and keyboard when interacting with the EHR.

The application was set up by ChartLogic, a Division of Medsphere Systems Corporation to mimic a live environment. Technically, the system performance (i.e. response time) was representative to what actual users would experience in a field implementation. Additionally, participants were not allowed to change any of the default system settings.

#### **Test Forms and Tools**

During the usability test, various documents and instruments were used, including:

- a. Demographics Questionnaire
- b. Participant Briefing/Debriefing document
- c. Usability Task Tracking document
- d. Post-Test Questionnaire
- e. System Usability Scale

Examples of these documents can be found in Appendices A-E respectively.

The participant's interaction with the EHRUT was captured and recorded digitally with web conferencing software running on the test machine. The administrator and data logger participated in each session live, with access to the recorded session afterwards.

#### **Participant Instructions**

The administrator read the following instructions aloud to each participant (also see the full Participant Briefing/Debriefing document in Appendix B):

Thank you for participating in this study. Our session today will last no more than 1 hour. During that time, I'll ask you to interact with an electronic health record system called ChartLogic EHR version 1.

I will ask you to complete some tasks using this system. Keep in mind that we are testing the system, not you or your abilities. Our goal in this testing is to understand how easy (or how difficult) this system is to use, what steps you use to accomplish the goals, and your subjective impressions. Please complete the tasks as quickly as you can without sacrificing accuracy and only complete the assigned tasks. While we would like to know when you are having difficulty with the system, I may not be able to address your questions immediately during the task. Should you have extreme difficulty in completing a task, I may move us on without finishing that portion. Please save your detailed comments until the end of the session as a whole when we can discuss freely.

We are recording the session today using Zoom. All of the information that you provide will be kept confidential and will be de-identified for analysis purposes. Recording the session allows me to focus more on talking with you and less on taking notes because I can review the recording later, if necessary. My colleague, Dwight, is also watching this session to assist me in taking notes. If for any reason you are unwilling to participate in the recorded session, you may exit at this time. Should you feel it necessary, you are also able to withdraw at any time during the testing.

Do you have any questions or concerns? If none, please verbally confirm your consent to participate in today's usability study.

Following the procedural instructions, participants were shown the EHR and then provided with the following instructions by the administrator:

For each task, I will read the description to you and say "Begin." At that point, please perform the task and say "Done" once you believe you have successfully completed the task. I would like to request that you not talk aloud or verbalize while you are doing the tasks. I will ask you about your overall impressions of the task once you have completed it.

Participants were given 9 tasks to complete. Tasks are listed in the Usability Task Tracking document in Appendix C.

#### **Usability Metrics**

According to the NIST Guide to the Processes Approach for Improving the Usability of Electronic Health Records, EHRs should support a process that provides a high level of usability for all users. The goal is for users to interact with the system effectively, efficiently, and with an acceptable level of satisfaction. To this end, metrics for effectiveness, efficiency and user satisfaction were captured during the usability testing. The goals of the test were to assess:

- 1. Effectiveness of ChartLogic EHR by measuring participant success rates and errors
- 2. Efficiency of ChartLogic EHR by measuring the average task time and path deviations
- 3. Satisfaction with ChartLogic EHR by measuring ease of use ratings

#### **Data Scoring**

The following table (Table 1) details how tasks were scored, errors evaluated, and the time data analyzed.

Measures	Rationale and Scoring				
Effectiveness:	A task was counted as a "Success" if the participant was able to achieve the				
Task Success	correct outcome, without assistance, within the time allotted on a per task				
	basis.				
	The total number of successes were calculated for each task and then divided				
	by the total number of times that task was attempted. The results are provided				
	as a percentage.				
	Task times were recorded for successes. Observed task times divided by the				
	optimal time for each task is a measure of optimal efficiency.				
	Optimal task performance time, as benchmarked by expert performance				
	under realistic conditions, is recorded when constructing tasks. Target task				
	times used for task times in the Moderator's Guide must be operationally				
	defined by taking multiple measures of optimal performance and multiplying				
	by some factor (e.g. 1.25) that allows some time buffer because the				
	participants are presumably not trained to expert performance. Thus, if				
	expert, optimal performance on a task was 20 seconds, then the allotted task				
	time performance was 25 seconds (20 seconds x 1.25). The ratio should be				
	aggregated across tasks and reported with mean and variance scores.				
<b>Effectiveness:</b>	If the participant abandoned the task, did not reach the correct answer or				
Task Failures	performed it incorrectly, or reached the end of the allotted time before				
	successful completion, the task was counted as a Failure. No task times were				
	taken for errors.				
	The total number of errors was calculated for each task and then divided by				
	the total number of times that task was attempted. Not all deviations would be				
	counted as errors. This should also be expressed as the mean number of failed				
	tasks per participant.				
	On a qualitative level, an enumeration of errors and error types should be				
	collected.				

Measures	Rationale and Scoring
Efficiency:	The participant's path (i.e. steps) through the application was recorded.
Task Deviations	Deviations occur if the participant, for example, went to a wrong screen,
	clicked on an incorrect menu item, followed an incorrect link, or interacted
	incorrectly with an on-screen control. This path was compared to the optimal
	path. The number of steps in the observed path is divided by the number of
	optimal steps to provide a ratio of path deviation.
	It is strongly recommended that task deviations be reported. Optimal paths
	(i.e. procedural steps) should be recorded when constructing tasks.
Efficiency:	Each task was timed from when the administrator said "Begin" until the
Task Time	participant successfully completed the task. Only task times for tasks that
	were successfully completed were included in the average task time analysis.
	Average time per task was calculated for each task. Variance measures
	(standard deviation and standard error) were also calculated.
Satisfaction:	Participant's subjective impression of the ease of use of the application was
<b>Task Rating</b>	measured by administering both a simple post-task question as well as a post-
	session questionnaire. After each task, the participant was asked to rate
	"Overall, this task was:" on a scale of 1 (Very Difficult) to 5 (Very Easy). These
	data are averaged across participants.
	Common convention is that average ratings for systems judged easy to use
	should be 3.3 or above.
	To measure participants' confidence in and likeability of ChartLogic EHR
	overall, the testing team administered the System Usability Scale (SUS) post-
	test questionnaire. See full SUS questionnaire in Appendix E.

Table 1. Details of how observed data were scored.

#### Results

#### **Data Analysis and Reporting**

The results of the usability test were calculated according to the methods specified in the Usability Metrics section above. There were no participants who failed to follow session and task instructions.

The usability testing results for the EHRUT are detailed below (see Table 2). The results should be seen in light of the objectives and goals outlined in the Study Design section. The data should yield actionable results that, if corrected, yield material, positive impact on user performance.

Measure	N	Task Success	Path Deviation	Tas	k Time	Errors	Task Ratings (5=Easy)
Task	#	Mean (SD)	Deviations (Observed / Optimal)	Mean (SD)	Deviations (Observed / Optimal)	Mean (SD)	Mean (SD)
Review, then modify patient's DOB	10	100% 0%	1.00	17 5	1.15	0% 0%	4.8
Review, then modify patient's sexual orientation	10	100% 0%	1.00	13 8	1.00	0% 0%	4.9
Enter a new problem	10	100% 0%	1.02	23 6	1.16	0% 0%	4.7
Change a problem	10	100% 0%	1.02	16 6	1.07	0% 0%	4.8
Add a new medication and review drug-allergy interaction alert	10	100% 0%	1.02	24 8	1.18	0% 0%	4.3
Add a new medication and review drug-drug interaction alert	10	100% 0%	1.00	4 1	1.33	0% 0%	4.8
Review and modify status of an implanted device	10	100% 0%	1.00	13 6	1.11	0% 0%	4.5
Review list of patient's historical implanted devices	10	100% 0%	1.00	13 6	1.61	0% 0%	4.9
Reconcile allergies, medications, and problems from a CCDA	10	100% 0%	1.00	20 8	1.00	0% 0%	4.5

Table 2. Usability metrics

The results from the SUS scored the subjective satisfaction with the system based on performance with these tasks to be 86.5. Broadly interpreted, scores under 60 represent systems with poor usability; scores over 80 would be considered above average.

#### **Discussion of the Findings**

#### **Effectiveness**

Based on the success, failure and path deviation data, the system was laid out logically with the only confusion stemming from how to activate fields with dropdown options. There were no major path deviations that caused a participant to be incapable of completing a task. The participants were able to effectively use the system to complete each task.

#### **Efficiency**

Efficiency was measured as a function of time on task relative to pre-determined benchmark task times and clicks per task relative to benchmark task values. Based on the task completion times, the majority of users completed all tasks close to the optimal time.

#### **Satisfaction**

Based on the task ratings, all the users found the tasks to be easy to very easy. The SUS score was calculated to be 86.5, with the lowest score being 75 and the highest score being 100. Ninety percent (90%) of the participants scored ChartLogic EHR in the 80+ category for SUS, with 30% of participants scoring ChartLogic EHR in the 90+ category for SUS.

#### **Major Findings**

Participants found the system to be user friendly, especially appreciating the ability to review a patient's entire chart without needing to drill down through several layers of the system. Participants also identified that the EHRUT is well-organized with intuitively labeled cards.

#### **Areas for Improvement**

Participants commented that the patient's chart seems a little busy with the various cards oriented on the page.

### **Appendices**

The following appendices include supplemental data for this usability test report. Following is a list of the appendices provided:

- a. Demographics Questionnaire
- b. Participant Briefing/Debriefing document
- c. Usability Task Tracking document
- d. Post-Test Questionnaire
- e. System Usability Scale

# Appendix A: Demographics Questionnaire

Name	Click or tap here to enter text.
Gender	Choose an item.
Age	Choose an item.
Education; highest attained	Choose an item.
Title	Click or tap here to enter text.
Professional Experience in years/months (e.g. 2 years, 3 months)	Click or tap here to enter text.
Experience with computers in years/months (e.g. 10 years, 10 months)	Click or tap here to enter text.
Experience with ChartLogic EHR in years/months (e.g. 5 years, 1 month)	Click or tap here to enter text.

#### **Appendix B: Participant Briefing/Debriefing**

#### Consent

This remote session is being recorded using Zoom web conferencing software. All the information that you provide will be kept confidential and will be de-identified for analysis purposes. If for any reason you are unwilling to participate in the recorded session, you may exit at this time. Your participation is entirely voluntary and you are free to end our session at any time.

#### **Introduction**

Thank you for participating in this study. Our session today will last no more than 1 hour. During that time, I'll ask you to interact with an electronic health record system called ChartLogic EHR version 1.

I will ask you to complete some tasks using this system. Keep in mind that we are testing the system, not you or your abilities. Our goal in this testing is to understand how easy (or how difficult) this system is to use, what steps you use to accomplish the goals, and your subjective impressions. Please complete the tasks as quickly as you can without sacrificing accuracy and only complete the assigned tasks. While we would like to know when you are having difficulty with the system, I may not be able to address your questions immediately during the task. Should you have extreme difficulty in completing a task, I may move us on without finishing that portion. Please save your detailed comments until the end of the session as a whole when we can discuss freely.

We are recording the session today using Zoom. All of the information that you provide will be kept confidential and will be de-identified for analysis purposes. Recording the session allows me to focus more on talking with you and less on taking notes because I can review the recording later, if necessary. My colleague, Dwight, is also watching this session to assist me in taking notes. If for any reason you are unwilling to participate in the recorded session, you may exit at this time. Should you feel it necessary, you are also able to withdraw at any time during the testing.

Do you have any questions or concerns? If none, please verbally confirm your consent to participate in today's usability study.

#### Debriefing

We've concluded the task portion of our study. Next, I'd like to ask you a few subjective questions on your experience.

What was your overall impression of the	
system?	
What aspects of the system did you like the	
most?	
What aspects of the system did you like the	
least?	
Were there any features that you were	
surprised to see?	
What features did you expect to encounter,	
but did not see? That is, is there anything	
that is missing in the application?	
Compare this system to other systems you	
have used.	
Would you recommend this system to your	
colleagues?	

# **Administer SUS**

# <u>Exit</u>

Thank you again for your participation today. I will follow up via email with instructions on how you will receive the honorarium.

#### **Appendix C: Usability Task Tracking**

#### Task 1: Review, then modify patient's date of birth

Take the participant to the starting point for the task. Begin timer.

During the admission process, the patient's demographic data was entered. Review the demographics and

change date of birth. You may select any date of birth. **Record Success:** Completed according to proper steps. Completed with difficulty or help. Describe below in comments. Not completed. Comments: Task Time Observed: **Task Time Optimal:** Seconds Seconds **Optimal Path:** Highlight DOB → type new DOB → click Save Correct Minor Deviations/Cycle (describe below) Major Deviations (describe below) Comments: **Observed Errors and Verbalizations: Rating:** (5) Very Easy (4) Easy (3) Moderate (2) Difficult (1) Very Difficult Overall, how would you rate this task?

#### **Associated Criteria:**

■ 170.315(a)(5) Demographics

# Task 2: Review, then modify patient's sexual orientation

Take the participant to the starting point for the task. Begin timer.

During the admission process, the patient's demographic data was entered. Review the demographics and change sexual orientation. You may select any sexual orientation.

<b>Record Succ</b>	ess:			
	Completed according to proper st	teps.		
	Completed with difficulty or help	Describe below in comments.		
Not completed.				
Comments:				
Task Time C	Observed:	Task Time Optima	l:	
	Seconds	Secon	nds	
<b>Optimal Pat</b>	h:			
Click arrows	$\rightarrow$ select new sexual orientation $\rightarrow$	click Save		
	Correct			
	Minor Deviations/Cycle (describe	e below)		
	Major Deviations (describe below	v)		
Comments:	_ `			
Observed En	rrors and Verbalizations:			
Rating: (5) \	Very Easy (4) Easy Overall, how would you rate this t	(3) Moderate (2) Difficult task?	(1) Very Difficult	

#### **Associated Criteria:**

■ 170.315(a)(5) Demographics

#### Task 3: Enter a new problem

Take the participant to the starting point for the task. Begin timer. Enter a new problem for the patient of chest pain. **Record Success:** Completed according to proper steps. Completed with difficulty or help. Describe below in comments. Not completed. Comments: **Task Time Optimal: Task Time Observed:** \_\_\_\_\_ Seconds Seconds **Optimal Path:** Click Edit Problems → Enter Chest Pain → Select it → Select Type → Add Correct Minor Deviations/Cycle (describe below) Major Deviations (describe below) Comments: **Observed Errors and Verbalizations: Rating:** (5) Very Easy (4) Easy (3) Moderate (2) Difficult (1) Very Difficult Overall, how would you rate this task?

#### **Associated Criteria:**

■ 170.315(a)(6) Problem List

#### Task 4: Review patient report on implanted devices

Take the participant to the starting point for the task. Begin timer. Review the implantable devices report for this patient. **Record Success:** Completed according to proper steps. Completed with difficulty or help. Describe below in comments. Not completed. Comments: **Task Time Observed: Task Time Optimal:** \_\_\_\_\_ Seconds Seconds **Optimal Path:** Click Reports → Choose Implantable Devices report Correct Minor Deviations/Cycle (describe below) Major Deviations (describe below) Comments: **Observed Errors and Verbalizations: Rating:** (5) Very Easy (4) Easy (3) Moderate (2) Difficult (1) Very Difficult Overall, how would you rate this task?

#### **Associated Criteria:**

■ 170.315(a)(14) Unique device identifier

#### Task 5: Add a new medication and review drug-allergy interactions

Take the participant to the starting point for the task. Begin timer. Review the patient's medication allergies. Attempt to add Morphine bulk powder 10g and review the drugallergy interaction. **Record Success:** Completed according to proper steps. Completed with difficulty or help. Describe below in comments. Not completed. Comments: **Task Time Observed: Task Time Optimal:** Seconds Seconds **Optimal Path:** Click Edit Medications button → Select Add Medication → Type Medication Name → Select medication from list  $\rightarrow$  Select the dose  $\rightarrow$  Review alert Correct Minor Deviations/Cycle (describe below) Major Deviations (describe below) Comments: **Observed Errors and Verbalizations:** 

(3) Moderate (2) Difficult (1) Very Difficult

#### **Associated Criteria:**

**Rating:** (5) Very Easy

■ 170.315(a)(9) Clinical Decision Support

Overall, how would you rate this task?

(4) Easy

#### Task 6: Add a new medication and review drug-drug interactions

Take the participant to the starting point for the task. Begin timer.

Attempt to add **Aspirin 325mg tablet** and review the drug-drug interaction. **Record Success:** Completed according to proper steps. Completed with difficulty or help. Describe below in comments. Not completed. Comments: **Task Time Observed: Task Time Optimal:** Seconds Seconds **Optimal Path:** Click Edit Medications button → Select Add Medication → Type Medication Name → Select medication from list  $\rightarrow$  Select the dose  $\rightarrow$  Review alert Correct Minor Deviations/Cycle (describe below) Major Deviations (describe below) Comments: **Observed Errors and Verbalizations:** (3) Moderate (2) Difficult (1) Very Difficult (4) Easy **Rating:** (5) Very Easy

#### **Associated Criteria:**

■ 170.315(a)(9) Clinical Decision Support

Overall, how would you rate this task?

# Task 7: Review and modify status of an implantable device

Take the participant to the starting point for the task. Begin timer. A cardiac pacemaker was implanted in the patient several years ago. Change the status of the device to historical.

<b>Record Success:</b>					
Completed according to proper st	eps.				
Completed with difficulty or help. Describe below in comments.					
Not completed.					
Comments:					
Task Time Observed:	Task Time Optimal:				
Seconds	Seconds				
Optimal Path:					
-	Devices Card and click on the device → Scroll to the bottom				
and put a checkmark next to Historical → Click					
Correct					
Minor Deviations/Cycle (describe	e below)				
Major Deviations (describe below	v)				
Comments:					
Observed Errors and Verbalizations:					
Rating: (5) Very Easy (4) Easy	(3) Moderate (2) Difficult (1) Very Difficult				
Overall, how would you rate this	äsk!				

## **Associated Criteria:**

■ 170.315(a)(14) Unique device identifier

# Task 8: Review a list of patient's historical implantable devices

Take the participant to the starting point for the task. Begin timer. Review the list of the patient's historical implantable devices.

Record Suc	cess:				
Completed according to proper steps.					
	Completed with difficulty of	or help. Describe below in comment	ts.		
	Not completed.	•			
Comments	<u> </u>				
Task Time	Observed:	Task Time Optin	mal:		
	Seconds	Seconds			
Optimal Pa	th:				
Navigate to	the Implant Devices Card →	Change view from Active to Histori	cal		
C	Correct	<u> </u>			
	Minor Deviations/Cycle (de	escribe below)			
	Major Deviations (describe	e below)			
Comments	_	,			
Observed E	Crrors and Verbalizations:				
Rating: (5)	Very Easy (4) Easy Overall, how would you rate	(3) Moderate (2) Difficute this task?	ult (1) Very Difficult		

# **Associated Criteria:**

■ 170.315(a)(14) Unique device identifier

# Task 9: Reconcile allergies, medications, and problems from a CCDA

Take the participant to the starting point for the task. Begin timer.

Complete reconciliation of the patient's allergies, medications, and problems using data from the incorporated patient summary record.

Record Success:

\_\_\_\_\_\_ Completed according to proper steps.
\_\_\_\_\_\_ Completed with difficulty or help. Describe below in comments.
\_\_\_\_\_\_ Not completed.

Comments:

Completed with difficulty or	help. Describe below in comments.
Not completed.	
Comments:	
Task Time Observed:	Task Time Optimal:
Seconds	Seconds
Optimal Path:	
Select Reconcile Clinical Document from W add allergies, medications, and problems ->	Vorklist → Click Reconcile Clinical Document → Click + symbol to Click Reconcile
Correct	
Minor Deviations/Cycle (desc	cribe below)
Major Deviations (describe be	elow)
Comments:	
Observed Errors and Verbalizations:	
Rating: (5) Very Easy (4) Easy Overall, how would you rate to	(3) Moderate (2) Difficult (1) Very Difficult his task?

#### **Associated Criteria:**

■ 170.315(b)(2) Clinical information reconciliation and incorporation

**Appendix D: Post-Test Questionnaire** 

TA71 . 11	
What was your overall impression of the	
system?	
What aspects of the system did you like the	
most?	
What aspects of the system did you like the	
least?	
Were there any features that you were	
surprised to see?	
What features did you expect to encounter,	
but did not see? That is, is there anything	
that is missing in the application?	
Compare this system to other systems you	
have used.	
Would you recommend this system to your	
colleagues?	

# Appendix E: System Usability Scale

Ratings:		
(5) Strongly Agree (4) Agree (3) Neutral (2) Disagree (1) Strongly Disagree		
Choose an I think that I would like to use this system frequently.		
item.		
Choose an	I found the system unnecessarily complex.	
item.		
Choose an	I thought the system was easy to use.	
item.		
Choose an	I think that I would need the support of a technical person to be able to	
item.	use this system.	
Choose an	I found the various functions in this system were well integrated.	
item.		
Choose an	I thought there was too much inconsistency in this system.	
item.		
Choose an	I would imagine that most people would learn to use this system very	
item.	quickly.	
Choose an	I found the system very cumbersome to use.	
item.		
Choose an	I felt very confident using the system.	
item.		
Choose an	I would need to learn a lot of things before I could get going with this	
item.	system.	