

Safety Enhanced Design Documentation for MedicsDocAssistant Version 8.0

A modified and home grown UCD is used for the development of MedicsDocAssistant. Our UCD is based on the standards defined by NISTIR 7741. We continually accept and encourage suggestions in an open user forum and have used suggestions from our users in improving our current design. User feedback is solicited regarding both usability and patient health information safety.

The participants in the review group include a cross-section of user types to represent the spectrum of users that will interact with the application on a regular basis. The participant types include EPs, technicians, and IT super-users. Responses from the participants will be evaluated by our business analyst team which will include representatives from our Customer Support, Product Design, and Quality Assurance teams as well as Executive team leaders. All users in the review groups will receive on-line training regarding recommended workflow for each item that is being evaluated as well as written training material to be used for reference.

The evaluation group identified will evaluate each item with a survey regarding effectiveness, efficiency, ease of use, and will be allowed to comment regarding any concerns for patient safety with utilization of proposed processes. Another evaluation group will use each item in a live testing environment in their own clinic setting. Following live utilization of the application as directed, participants will complete a survey regarding effectiveness, efficiency, ease of use, and will be allowed to comment regarding any concerns for patient health information safety with utilization of proposed processes. In addition to survey results, metrics for this group will include the following: time to complete each task, path deviations from those recommended during training instruction, number of times needed to refer to written training material, and areas of confusion regarding workflow or processes.

EHR Usability Test Report of MedicsDocAssistant Version 8.0

Report based on ISO/IEC 25062:2006 Common Industry Format for Usability Test Reports

MedicsDocAssistant Version 8.0

Date of Usability Test: 02/25/2019 to 03/01/2019

Date of Report: 03/02/2019

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1. EXECUTIVE SUMMARY

A usability test of MedicsDocAssistant version 8.0 was conducted between 02/25/2019 and 03/01/2019 in New Jersey by Self (ADSC). The purpose of this test was to test and validate the usability of the current user interface, and provide evidence of usability in the application. During the usability test, 12 healthcare providers consisting of Physicians, Nurses, Medical Assistants and Office Managers matching the target demographic criteria served as participants and used the MedicsDocAssistant in a simulated, but representative tasks.

This study collected performance data on 12 tasks typically conducted on an EHR:

1. Find information in Patient Chart and Viewing the Demographics
2. Computerized Provider Order entry – Medications
3. Computerized Provider Order entry – Laboratories
4. Computerized Provider Order entry – Diagnostic Imaging
5. Problem List
6. Medication List
7. Medication Allergy List
8. Electronic Prescribing
9. Drug-Drug, Drug-Allergy interactions Check
10. Clinical Decision Support
11. Clinical Information reconciliation and Incorporation
12. Implantable Device List

During the remote usability test, each participant was greeted by the administrator and asked to review and sign an informed consent/release form (included in Appendix 3). They were instructed that they could withdraw at any time. Participants had prior experience with the EHR. The administrator introduced the test, and instructed participants to complete a series of tasks using the EHRUT. During the testing, the administrator timed the test and, along with the data logger(s) recorded user performance data on paper and electronically. The administrator did not give the participant assistance in how to complete the task.

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 verbalizations
- 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 the testing, participants were asked to complete a post-test questionnaire. 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 MedicsDocAssistant. Following is a summary of the performance and rating data collected on the MedicsDocAssistant.

Task\Measure	N	Task Success	Steps Taken	Task Time		Errors	Task Ratings 5= Easy Likert Scale
	#	Mean (SD) %	(Observed/ Optimal)	Mean(SD)	Deviations (Observed /Optimal)	Mean (SD) %	Mean(SD)
Find information in Patient Chart	12	100 (0)	3 / 3	29 (3)	29 / 30	0 (0)	4.75 (1)
Computerized Provider Order entry-Medications	12	100 (0)	6 / 5	62 (4)	62 / 60	0 (0)	5 (0)
Computerized Provider Order entry-Labs	12	100 (0)	6 / 5	57 (4)	57 / 60	0 (0)	5 (0)
Computerized Provider Order entry-Imaging	12	100 (0)	6 / 5	58 (4)	58 / 60	0 (0)	4.67 (1)
Problem List	12	100 (0)	4 / 4	56 (3)	56 / 60	0 (0)	5 (0)
Medication List	12	100 (0)	4 / 4	62 (3)	62 / 60	0 (0)	4.83 (0)
Medication Allergy List	12	100 (0)	4 / 4	62 (4)	62 / 60	0 (0)	4.92 (0)
Electronic Prescribing	12	100 (0)	6 / 6	93 (5)	93 / 90	0 (0)	4.75 (1)
Drug-Drug, Drug-Allergy interactions Check	12	100 (0)	6 / 6	28 (5)	28 / 30	0 (0)	4.75 (1)
Clinical Decision Support	12	100 (0)	8 / 7	72 (4)	72 / 60	0 (0)	4.58 (1)
Clinical Information reconciliation	12	100 (0)	8 / 7	64 (4)	64 / 60	0 (0)	4.42 (1)
Implantable Devices List	12	100 (0)	5 / 4	66 (3)	66 / 60	0 (0)	4 (1)

The results from the System Usability Scale scored the subjective satisfaction with the system based on performance with these tasks to be: 95.

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

- Major findings

Users found the system very user friendly and easy to navigate. A well laid out navigation menu and tab structure is provided to move around the application.

- Areas for improvement

There are not any major findings where the users want to be improved.

2. INTRODUCTION

The EHRUT tested for this study was MedicsDocAssistant version 8.0. Designed to present medical information to healthcare providers in Ambulatory setting, the MedicsDocAssistant consists of complete patient charting and medical records. The usability testing attempted to represent realistic exercises and conditions.

The purpose of this study was to test and validate the usability of the current user interface, and provide evidence of usability in the EHR under Test (EHRUT). To this end, measures of effectiveness, efficiency and user satisfaction were captured during the usability testing.

3. METHOD

i. PARTICIPANTS

A total of 12 participants were tested on the EHRUT. Participants in the test were Providers (Physicians, Nurses, Medical Assistants and Office Managers). Participants had no direct connection to the development of or organization producing the MedicsDocAssistant. Participants were not from the testing or supplier organization. Participants were given the opportunity to have the same orientation and level of training as the actual end users would have received.

For the test purposes, end-user characteristics were identified and translated into a recruitment screener used to solicit potential participants. An example of the screener is provided in Appendix [1].

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.

Sl. No.	Participant ID	Gender	Age	Education	Occupation / Role	Professional Experience in Years	Computer Experience in Years	Product Experience in Years	Assistive Tech Needs required?
1	ID01	Female	58	MD	Physician	24 Y	18 Y	6 Y	No
2	ID02	Female	52	MD	Physician	28 Y	16 Y	6 Y	No
3	ID03	Female	65	MD	Physician	42 Y	12 Y	8 Y	No
4	ID04	Male	61	MD	Physician	35 Y	28 Y	2 Y	No
5	ID05	Male	45	MD	Physician	18 Y	18 Y	4 Y	No
6	ID06	Female	62	Graduate	Clinic Administrator	35 Y	25 Y	6 Y	No
7	ID07	Male	49	Graduate	Office Manager	20 Y	19 Y	4 Y	No
8	ID08	Female	54	Graduate	Office Manager	15 Y	10 Y	5 Y	No
9	ID09	Female	37	Graduate	Nurse Practitioner	16 Y	16 Y	7 Y	No
10	ID10	Female	34	Graduate	Nurse Practitioner	7 Y	7 Y	6 Y	No
11	ID11	Male	29	Graduate	Nurse Practitioner	2 Y	2 Y	1 Y	No
12	ID12	Female	59	Graduate	Nurse Practitioner	40 Y	24 Y	6 Y	No

12 participants (matching the demographics in the section on Participants) were recruited and 12 participated in the usability test. 0 participants failed to show for the study.

Participants were scheduled for 30 minute sessions with a 10 minutes break in between each session for debrief by the administrator(s) and data logger(s), and to reset systems to proper test conditions. A spreadsheet was used to keep track of the participant schedule, and included each participant's demographic characteristics as provided by the recruiting firm.

ii. 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 the given EHR. Each participant used the system in their own location connected to the administrator over a GotoMeeting remote session to log the test results, 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 verbalizations (comments)
- Participant's satisfaction ratings of the system

Additional information about the various measures can be found in Section 3.9 on Usability Metrics.

iii. 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. Find patient's last visit date in patient summary screen and view demographics and find results of recent blood work
2. Add Problems
3. Add Medications
4. Add Medication Allergies
5. Add Implantable Devices
6. CPOE-Medications
7. CPOE-Labs
8. CPOE-Imaging
9. E-Prescribe
10. Check the Drug-Drug and Drug-Allergy Indications
11. Clinical Information Reconciliation
12. Clinical Decision Support

Tasks were selected based on their frequency of use, criticality of function, and those that may be most troublesome for users. Tasks should always be constructed in light of the study objectives.

iv. PROCEDURES

Advanced Data Systems Corporation adopted remote testing process with participants logging in to the system and giving them the key board access to perform the said task. The participants were provided a secure teleconference link (GoToMeeting) and upon arrival in to the pre assigned meeting, participants were greeted; their identity was verified and matched with a name on the participant schedule. Participants were then assigned a participant ID. Each participant reviewed and signed an informed consent and release form. A representative from the test team witnessed the participant's signature.

To ensure that the test ran smoothly, two staff members participated in this test, the usability administrator and the data logger. The usability testing staff conducting the test was experienced usability practitioners.

The administrator moderated the session including administering instructions and tasks. The administrator also monitored task times, obtained post-task rating data, and took notes on participant comments. A second person served as the data logger and took notes on task success, path deviations, number and type of errors, and comments.

Participants were instructed to perform the tasks (see specific instructions below):

- As quickly as possible making as few errors and deviations as possible.
- Without assistance; administrators were allowed to give immaterial guidance and clarification on tasks, but not instructions on use.
- Without using a think aloud technique.

For each task, the participants were given a written copy of the task. Task timing began once the administrator finished reading the question. The task time was stopped once the participant indicated they had successfully completed the task.

Following the session, the administrator gave the participant the post-test questionnaire (e.g., the System Usability Scale, see Appendix 5), compensated them for their time, and thanked each individual for their participation.

Participants' demographic information, task success rate, time on task, errors, deviations, verbal responses, and post-test questionnaire were recorded into a spreadsheet.

Participants were thanked for their time and compensated.

v. TEST LOCATION

The test facility included a waiting area and a quiet testing room with a table, computer for the participant with clear instructions to connect to the teleconference facility using the GoToMeeting session, and recording computer for the administrator is also connected to the same GoToMeeting session. Only the participant and administrator were active in the test session. All observers and the data logger worked from a separate computer where they could see the participant's screen in a mute session, and listen to the audio of the session. To ensure that the environment was comfortable for users, noise levels were kept to a minimum with the ambient temperature within a normal range. All of the safety instruction and evacuation procedures were valid, in place, and visible to the participants.

vi. TEST ENVIRONMENT

The EHRUT would be typically be used in a healthcare office or facility. In this instance, the testing was conducted in typical exam room environment. For testing, the computers used were IBM workstations running Windows 8.1 OS with a 17" monitors with a resolution 1366X768. The participants used a mouse and keyboard when interacting with the EHRUT.

The application was set up by the ADSC according to the MedicsDocAssistant's documentation describing the system set-up and preparation. The application itself was running on a chrome browser on windows platform using a test DB. Technically, the system

performance (i.e., response time) was representative to what actual users would experience in a field implementation. Additionally, participants were instructed not to change any of the default system settings (such as control of font size).

vii. TEST FORMS AND TOOLS

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

1. Informed Consent
2. Moderator's Guide
3. Post-test Questionnaire

Examples of these documents can be found in Appendices 3-6 respectively. The Moderator's Guide was devised so as to be able to capture required data.

The participant's interaction with the EHRUT was captured and recorded using the GotoMeeting record the session utility on the test machine. Data logger was also connected to the same remote session to observe the test session from a nearby observation room.

viii. PARTICIPANT INSTRUCTIONS

The administrator reads the following instructions aloud to the each participant.

Thank you for participating in this study. Your input is very important. Our session today will last about 120 minutes. During that time you will use an instance of an electronic health record. I will ask you to complete a few tasks using this system and answer some questions. You should complete the tasks as quickly as possible making as few errors as possible. Please try to complete the tasks on your own following the instructions very closely. Please note that we are not testing you, we are testing the system, therefore if you have difficulty in all this means is that something needs to be improved in the system. I will be here in case you need specific help, but I am not able to instruct you or provide help in how to use the application.

Overall, we are interested in how easy (or how difficult) this system is to use, what in it would be useful to you, and how we could improve it. I did not have any involvement in its creation, so please be honest with your opinions. All of the information that you provide will be kept confidential and your name will not be associated with your comments at any time. Should you feel it necessary you are able to withdraw at any time during the testing.

Following the procedural instructions, participants were shown the EHR and as their first task, were given time (30 minutes) to explore the system and make comments. Once this task was complete, the administrator gave the following instructions:

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 your impressions about the task once you are done.

ix. 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 MedicsDocAssistant by measuring participant success rates and errors
2. Efficiency of MedicsDocAssistant by measuring the average task time and path deviations
3. Satisfaction with MedicsDocAssistant by measuring ease of use ratings

4. DATA SCORING

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

Measures	Rationale and Scoring
Effectiveness: Task Success	<p>A task was counted as a “Success” if the participant was able to achieve the correct outcome, without assistance, within the time allotted on a per task basis.</p> <p>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.</p> <p>Task times were recorded for successes. Observed task times divided by the optimal time for each task is a measure of optimal efficiency.</p> <p>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 [x] seconds then allotted task time performance was [x * 1.25] seconds. This ratio should be aggregated across tasks and reported with mean and variance scores.</p>
Effectiveness: Task Failures	<p>If the participant abandoned the task, did not reach the correct answer or 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.</p> <p>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.</p> <p>This should also be expressed as the mean number of failed tasks per participant.</p> <p>On a qualitative level, an enumeration of errors and error types should be collected.</p>
Efficiency: Task Deviations	<p>The participant’s path (i.e., steps) through the application was recorded. 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.</p>

<p>Efficiency: Task Time</p>	<p>Each task was timed from when the administrator said “Begin” until the participant said, “Done”. If he or she failed to say “Done”, the time was stopped when the participant stopped performing 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.</p>
<p>Satisfaction: Task Rating</p>	<p>Participant’s subjective impression of the ease of use of the application was 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 the MedicsDocAssistant overall, the testing team administered the System Usability Scale (SUS) post-test questionnaire. Questions included, “I think I would like to use this system frequently,” “I thought the system was easy to use,” and “I would imagine that most people would learn to use this system very quickly.” See full System Usability Score questionnaire in Appendix 5</p>

Table: Details of how data were scored.

5. RESULTS

i. DATA ANALYSIS AND REPORTING

The results of the usability test were calculated according to the methods specified in the Usability Metrics section above.

The usability testing results for the MedicsDocAssistant are detailed below Table. The results should be seen in light of the objectives and goals outlined in Section 3.2 Study Design. The data should yield actionable results that, if corrected, yield material, positive impact on user performance.

Task\Measure	N	Task Success	Steps Taken	Task Time		Errors	Task Ratings 5= Easy Likert Scale
	#	Mean (SD) %	(Observed/ Optimal)	Mean(SD)	Deviations (Observed /Optimal)	Mean (SD) %	Mean(SD)
Find information in Patient Chart	12	100 (0)	3 / 3	29 (3)	29 / 30	0 (0)	4.75 (1)
Computerized Provider Order entry-Medications	12	100 (0)	6 / 5	62 (4)	62 / 60	0 (0)	5 (0)
Computerized Provider Order entry-Labs	12	100 (0)	6 / 5	57 (4)	57 / 60	0 (0)	5 (0)
Computerized Provider Order entry-Imaging	12	100 (0)	6 / 5	58 (4)	58 / 60	0 (0)	4.67 (1)
Problem List	12	100 (0)	4 / 4	56 (3)	56 / 60	0 (0)	5 (0)
Medication List	12	100 (0)	4 / 4	62 (3)	62 / 60	0 (0)	4.83 (0)
Medication Allergy List	12	100 (0)	4 / 4	62 (4)	62 / 60	0 (0)	4.92 (0)
Electronic Prescribing	12	100 (0)	6 / 6	93 (5)	93 / 90	0 (0)	4.75 (1)
Drug-Drug, Drug-Allergy interactions Check	12	100 (0)	6 / 6	28 (5)	28 / 30	0 (0)	4.75 (1)
Clinical Decision Support	12	100 (0)	8 / 7	72 (4)	72 / 60	0 (0)	4.58 (1)
Clinical Information reconciliation	12	100 (0)	8 / 7	64 (4)	64 / 60	0 (0)	4.42 (1)
Implantable Devices List	12	100 (0)	5 / 4	66 (3)	66 / 60	0 (0)	4 (1)

The results from the SUS (System Usability Scale) scored the subjective satisfaction with the system based on performance with these tasks to be: 95. Broadly interpreted, scores under 60 represent systems with poor usability; scores over 80 would be considered above average.

ii. DISCUSSION OF THE FINDINGS

The physicians and the other providers were asked to use the system in their respective field of expertise. They were asked to benchmark against their current system usage or the manual process.

a) EFFECTIVENESS

The users found the system very effective. The clear cut menu driven approach to each section of the patient chart made them easily navigate to the section they want to attempt and complete the data capture for that section. They can go to any section from anywhere which was liked by the users very much.

b) EFFICIENCY

The time taken to complete the tasks is very minimal as they need not search for the functionality. They can easily navigate to the section where they to capture the patient information and complete it in no time.

c) SATISFACTION

The users are very satisfied by the application as it gives them what they require. Easy to capture the patient information and give better care to the patient.

d) MAJOR FINDINGS

There are not any major findings where the users want to be improved.

e) AREAS FOR IMPROVEMENT

Device order data entry may need further improvement.

Other than the above, there are no major findings where the users want to be improved

6. APPENDICES

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

- 1: Sample recruiting screener.
- 2: Participant demographics.
- 3: Non-Disclosure Agreement (NDA) and Informed Consent Form.
- 4: Moderator's Guide
- 5: System Usability Scale Questionnaire

Appendix 1: SAMPLE RECRUITING SCREENER

The purpose of a screener to ensure that the participants selected represent the target user population as closely as possible. (Portions of this sample screener are taken from www.usability.gov/templates/index.html#Usability and adapted for use.)

Recruiting Script for Recruiting Firm

Hello, my name is _____, calling from MedicsDocAssistant. We are recruiting individuals to participate in a usability study for an electronic health record. We would like to ask you a few questions to see if you qualify and if would like to participate. This should only take a few minutes of your time. This is strictly for research purposes. If you are interested and qualify for the study, you will be paid to participate. Can I ask you a few questions?

1. Are you male or female? [Recruit a mix of participants]
2. Have you participated in a focus group or usability test in the past 12 months? [If yes, Terminate]
3. Do you, or does anyone in your home, work in marketing research, usability research, web design [...etc.]? [If yes, Terminate]
4. Do you, or does anyone in your home, have a commercial or research interest in an electronic health record software or consulting company? [If yes, Terminate]
5. Which of the following best describes your age? [23 to 39; 40 to 59; 60 - to 74; 75 and older] [Recruit Mix]
6. Which of the following best describes your race or ethnic group? [e.g., Caucasian, Asian, Black/African-American, Latino and/or Hispanic, etc.]
7. Do you require any assistive technologies to use a computer? [if so, please describe]

Professional Demographics

8. What is your current position and title? (Must be healthcare provider)
 - RN: Specialty _____
 - Physician: Specialty _____
 - Resident: Specialty _____
 - Administrative Staff
 - Other [Terminate]
9. How long have you held this position?

10. Describe your work location (or affiliation) and environment? (Recruit according to the intended users of the application) [e.g., private practice, health system, government clinic, etc.]

11. Which of the following describes your highest level of education? [e.g., high school graduate/GED, some college, college graduate (RN, BSN), postgraduate (MD/PhD), other (explain)]

Computer Expertise

12. Besides reading email, what professional activities do you do on the computer? [e.g., access EHR, research; reading news; shopping/banking; digital pictures; programming/word processing, etc.] [If no computer use at all, Terminate]

13. About how many hours per week do you spend on the computer? [Recruit according to the demographics of the intended users, e.g., 0 to 10, 11 to 25, 26+ hours per week]

14. What computer platform do you usually use? [e.g., Mac, Windows, etc.]

15. What Internet browser(s) do you usually use? [e.g., Firefox, IE, AOL, etc.]

16. In the last month, how often have you used an electronic health record?

17. How many years have you used an electronic health record?

18. How many EHRs do you use or are you familiar with?

19. How does your work environment patient records? [Recruit according to the demographics of the intended users]

- On paper
- Some paper, some electronic
- All electronic

Contact Information

Those are all the questions I have for you. Your background matches the people we're looking for. [If you are paying participants or offering some form of compensation, mention] For your participation, you will be paid [amount].

Would you be able to participate on [date, time]? [If so collect contact information]

May I get your contact information?

- Name of participant:
- Address:
- City, State, Zip:
- Daytime phone number:
- Evening phone number:
- Alternate [cell] phone number:
- Email address:

Before your session starts, we will ask you to sign a release form allowing us to videotape your session. The videotape will only be used internally for further study if needed. Will you consent to be videotaped?

This study will take place remotely using GotoMeeting Remote session connecting to our Paramus Office. I will confirm your appointment a couple of days before your session and provide you with connection details. What time is the best time to reach you?

Appendix 2: PARTICIPANT DEMOGRAPHICS

Following is a high-level overview of the participants in this study.

Gender

Men	[4]
Women	[8]
Total (participants)	[12]

Occupation/Role

RN/BSN	[4]
Physician	[5]
Admin Staff	[3]
Total (participants)	[12]

Years of Experience

Years of experience	[20]
Facility Use of EHR	
All paper	[0]
Some paper, some electronic	[3]
All electronic	[9]
Total (participants)	[12]

Appendix 3: NON-DISCLOSURE AGREEMENT AND INFORMED CONSENT FORM

Non-Disclosure Agreement

THIS AGREEMENT is entered into as of _____, 2019, between _____ (“the Participant”) and the testing organization Advances Data Systems Corporation, 15 Prospect Street, Paramus, NJ 07652.

The Participant acknowledges his or her voluntary participation in today’s usability study may bring the Participant into possession of Confidential Information. The term "Confidential Information" means all technical and commercial information of a proprietary or confidential nature which is disclosed by ADSC, or otherwise acquired by the Participant, in the course of today’s study.

By way of illustration, but not limitation, Confidential Information includes trade secrets, processes, formulae, data, know-how, products, designs, drawings, computer aided design files and other computer files, computer software, ideas, improvements, inventions, training methods and materials, marketing techniques, plans, strategies, budgets, financial information, or forecasts.

Any information the Participant acquires relating to this product during this study is confidential and proprietary to ADSC and is being disclosed solely for the purposes of the Participant’s participation in today’s usability study. By signing this form the Participant acknowledges that s/he will receive monetary compensation for feedback and will not disclose this confidential information obtained today to anyone else or any other organizations.

Participant’s printed name:

Signature: _____ Date: _____

Informed Consent

ADSC would like to thank you for participating in this study. The purpose of this study is to evaluate an electronic health records system. If you decide to participate, you will be asked to perform several tasks using the prototype and give your feedback. The study will last about 120 minutes. At the conclusion of the test, you will be compensated for your time.

Agreement

I understand and agree that as a voluntary participant in the present study conducted by ADSC, I am free to withdraw consent or discontinue participation at any time. I understand and agree to participate in the study conducted and videotaped by the ADSC.

I understand and consent to the use and release of the videotape by ADSC. I understand that the information and videotape is for research purposes only and that my name and image will not be used for any purpose other than research. I relinquish any rights to the videotape and understand the videotape may be copied and used by ADSC without further permission.

I understand and agree that the purpose of this study is to make software applications more useful and usable in the future.

I understand and agree that the data collected from this study may be shared with outside of ADSC and ADSC's client. I understand and agree that data confidentiality is assured, because only de-identified data – i.e., identification numbers not names – will be used in analysis and reporting of the results.

I agree to immediately raise any concerns or areas of discomfort with the study administrator. I understand that I can leave at any time.

Please check one of the following:

- YES, I have read the above statement and agree to be a participant
- NO, I choose not to participate in this study.

Signature: _____ Date: _____

Appendix 4: MODERATOR'S GUIDE

EHRUT Usability Test

Moderator's Guide

Administrator _____

Data Logger _____

Date _____ Time _____

Participant # _____

Location _____

Prior to testing

- Confirm schedule with Participants
- Ensure EHRUT lab environment is running properly
- Ensure lab and data recording equipment is running properly

Prior to each participant:

- Reset application
- Start session recordings with tool

Prior to each task:

- Reset application to starting point for next task

After each participant:

- End session recordings with tool

After all testing

- Back up all video and data files

Orientation (10 minutes)

Thank you for participating in this study. Our session today will last 120 minutes. During that time you will take a look at an electronic health record system.

I will ask you to complete a few tasks using this system and answer some questions. We are interested in how easy (or how difficult) this system is to use, what in it would be useful to you, and how we could improve it. You will be asked to complete these tasks on your own trying to do them as quickly as possible with the fewest possible errors or deviations. Do not do anything more than asked. If you get lost or have difficulty I cannot answer help you with anything to do with the system itself. Please save your detailed comments until the end of a task or the end of the session as a whole when we can discuss freely.

I did not have any involvement in its creation, so please be honest with your opinions.

The product you will be using today is Electronic Medical Records, MedicsDocAssistant version 8.0. We are recording the session today. All of the information that you provide will be kept confidential and your name will not be associated with your comments at any time.

Do you have any questions or concerns?

Preliminary Questions (5 minutes)

What is your job title / appointment?

How long have you been working in this role?

What are some of your main responsibilities?

Tell me about your experience with electronic health records.

Task 0: First Impressions

This is the application you will be working with. Have you heard of it? ____Yes ____No

If so, tell me what you know about it.

- Show test participant the EHRUT.
- Please don't click on anything just yet. What do you notice? What are you able to do here? Please be specific.

Notes / Comments: Some of participants have already been using the earlier versions of the product.

Task 1: Patient Summary Screen

Before going into the exam room and you want to review Patient's chief complaint, history, and vitals. Find this information.

Success:

- Easily completed
- Completed with difficulty or help :: Describe below
- Not completed Comments:

Task Time: _____ Seconds

Observed Errors and Verbalizations:

Comments:

Rating:

Overall, this task was: 5

Show participant written scale: "Very Difficult" (1) to "Very Easy" (5)

Administrator / Note taker Comments:

Task 2: Problem List

On the patient visit, review the patient chart for the problem list. Add any new problems identified like Asthma or Hypertension.

Success:

- Easily completed
- Completed with difficulty or help :: Describe below

- Not completed Comments:

Task Time: _____ Seconds

Comments:

Observed Errors and Verbalizations:

Comments:

Rating:

Overall, this task was: 5

Show participant written scale: "Very Difficult" (1) to "Very Easy" (5)

Administrator / Note taker Comments:

Task 3: Medication List

On the patient visit, review the patient chart for the current medication the patient is on. Add any new medications to the list the patient is on. Success:

- Easily completed
- Completed with difficulty or help :: Describe below
- Not completed Comments:

Task Time: _____ Seconds

Comments:

Observed Errors and Verbalizations:

Comments:

Rating:

Overall, this task was: 5

Show participant written scale: "Very Difficult" (1) to "Very Easy" (5)

Administrator / Note taker Comments:

Task 4: Medication Allergy List

On the patient visit, review the patient chart for the Allergies list. Add any new allergies which patient mentions to the list.

Success:

- Easily completed
- Completed with difficulty or help :: Describe below
- Not completed Comments:

Task Time: _____ Seconds

Comments:

Observed Errors and Verbalizations:

Comments:

Rating:

Overall, this task was: 5

Show participant written scale: "Very Difficult" (1) to "Very Easy" (5)

Administrator / Note taker Comments:

Task 5: CPOE - Medications

On the patient visit, review the patient chart for the medications the patient is already on. Decide to make a new order. Search for the medication Lisinopril. Create a medication order for Lisinopril. Success:

- Easily completed
- Completed with difficulty or help :: Describe below
- Not completed Comments:

Task Time: _____ Seconds

Comments:

Observed Errors and Verbalizations:

Comments:

Rating:

Overall, this task was: 5

Show participant written scale: "Very Difficult" (1) to "Very Easy" (5)

Administrator / Note taker Comments:

Task 6: CPOE - Labs

On the patient visit, review the patient chart for the Labs ordered. Create a lab order for Lipid Profile.

Success:

- Easily completed
- Completed with difficulty or help :: Describe below
- Not completed Comments:

Task Time: _____ Seconds

Comments:

Observed Errors and Verbalizations:

Comments:

Rating:

Overall, this task was: 5

Show participant written scale: "Very Difficult" (1) to "Very Easy" (5)

Administrator / Note taker Comments:

Task 7: CPOE - Imaging

On the patient visit, review the patient chart for the Imaging Orders. Create an imaging order for Chest X-Ray. Success:

- Easily completed
- Completed with difficulty or help :: Describe below
- Not completed Comments:

Task Time: _____ Seconds

Comments:

Observed Errors and Verbalizations:

Comments:

Rating:

Overall, this task was: 5

Show participant written scale: "Very Difficult" (1) to "Very Easy" (5)

Administrator / Note taker Comments:

Task 8: Drug-Drug, Drug-Allergy Interactions Check

While creating the medication order, the system throws the alert if there are any interactions.

The participant can override the alert with a note or chose another medication order. Success:

- Easily completed
- Completed with difficulty or help :: Describe below
- Not completed Comments:

Task Time: _____ Seconds

Comments:

Observed Errors and Verbalizations:

Comments:

Rating:

Overall, this task was: 4.5

Show participant written scale: "Very Difficult" (1) to "Very Easy" (5)

Administrator / Note taker Comments:

Task 9: Electronic Prescribing

Once the medication order is complete, the provider is given an option to either print the prescription or transmit to the pharmacy electronically. The provider has to select the option to transmit the medication electronically. System gives an option to search for a pharmacy and then transmit.

Success:

- Easily completed
- Completed with difficulty or help :: Describe below
- Not completed Comments:

Task Time: _____ Seconds

Comments:

Observed Errors and Verbalizations:

Comments:

Rating:

Overall, this task was: 4.5

Show participant written scale: "Very Difficult" (1) to "Very Easy" (5)

Administrator / Note taker Comments:

Task 10: Clinical Decision Support

While making the Order for Medication, Labs, Imaging, creating the note on patient and other various trigger points, CDS rules fire and give information to the provider to take actions upon. Success:

- Easily completed
- Completed with difficulty or help :: Describe below
- Not completed Comments:

Task Time: _____ Seconds

Comments:

Observed Errors and Verbalizations:

Comments:

Rating:

Overall, this task was: 5

Show participant written scale: "Very Difficult" (1) to "Very Easy" (5)

Administrator / Note taker Comments:

Task 11: Clinical Information Reconciliation

Provider will look for available referral summaries for the patient and do a reconciliation of problems, medications and allergies. Success:

- Easily completed
- Completed with difficulty or help :: Describe below
- Not completed Comments:

Task Time: _____ Seconds

Comments:

Observed Errors and Verbalizations:

Comments:

Rating:

Overall, this task was: 5

Show participant written scale: "Very Difficult" (1) to "Very Easy" (5)

Administrator / Note taker Comments:

Task 12: Implantable Devices List

On the patient visit, review the patient chart for the Implantable Devices list. Add/Modify any data. Success:

- Easily completed
- Completed with difficulty or help :: Describe below
- Not completed Comments:

Task Time: _____ Seconds

Comments:

Observed Errors and Verbalizations:

Comments:

Rating:

Overall, this task was: 5

Show participant written scale: "Very Difficult" (1) to "Very Easy" (5)

Administrator / Note taker Comments:

Final Questions (10 Minutes)

What was your overall impression of this system?

What aspects of the system did you like most?

What aspects of the system did you like 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 this application?

Compare this system to other systems you have used.

Would you recommend this system to your colleagues?

Administer the SUS

Appendix 5: SYSTEM USABILITY SCALE QUESTIONNAIRE

Sl. No.	Description	Strongly Disagree				Strongly Agree
1	I think that I would like to use this system frequently					
2	I found the system unnecessarily complex					
3	I thought the system was easy to use					
4	I think that I would need the support of a technical person to be able to use this system					
5	I found the various functions in this system were well integrated					
6	I thought there was too much inconsistency in this system					
7	I would imagine that most people would learn to use this system very quickly					
8	I found the system very cumbersome to use					
9	I felt very confident using the system					
10	I needed to learn a lot of things before I could get going with this system					

EHR Usability Test Report of MedicsDocAssistant Version 8.0 for B11 Criteria

Report based on ISO/IEC 25062:2006 Common Industry Format for Usability Test Reports

A modified and home grown UCD is used for the development of MedicsDocAssistant. Our UCD is based on the standards defined by NISTIR 7741. We continually accept and encourage suggestions in an open user forum and have used suggestions from our users in improving our current design. User feedback is solicited regarding both usability and patient health information safety.

Citation: NIST Interagency/Internal Report (NISTIR) - 7741

<https://www.nist.gov/publications/nistir-7741-nist-guide-processes-approach-improving-usability-electronic-health-records>

MedicsDocAssistant Version 8.0

Date of Usability Test: 11/11/2024

Date of Report: 12/17/2024

Report Prepared By: M Govardhan Reddy, Project Manager

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1. EXECUTIVE SUMMARY

A usability test of MedicsDocAssistant version 8.0 was conducted on 11/11/2024 in New Jersey by Self (ADSC). The purpose of this test was to test and validate the usability of the current user interface, and provide evidence of usability in the **MedicsDocAssistant**. During the usability test, 10 healthcare providers of which 4 were Physicians and 6 were Nurses and Medical Assistants, matching the target demographic criteria served as participants and used the MedicsDocAssistant in a simulated, but representative tasks.

This study collected performance data on 2 tasks typically conducted on an EHR to test the B11 criteria:

1. Evidence Based DSI
2. Predictive DSI Selection

During the 30 minutes' one-on-one usability test, each participant was greeted by the administrator and asked to review and sign an informed consent/release form (included in Appendix 3). They were instructed that they could withdraw at any time. Participants had prior experience with the EHR. The administrator introduced the test, and instructed participants to complete a series of tasks (given one at a time) using the EHRUT. During the testing, the administrator timed the test and, along with the data logger(s) recorded user performance data on paper and electronically. The administrator did not give the participant assistance in how to complete the task.

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 verbalizations
- 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 the testing, participants were asked to complete a post-test questionnaire and were compensated with appropriate amount 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 MedicsDocAssistant. Following is a summary of the performance and rating data collected on the **MedicsDocAssistant**.

Task\Measure	N	Task Success	Steps Taken	Task Time		Errors	Task Ratings 5= Easy Likert Scale
	#	Mean (SD) %	(Observed/ Optimal)	Mean(SD)	Deviations (Observed /Optimal)	Mean (SD) %	Mean(SD)
Evidence Based DSI	10	100 (0)	8 / 7	72 (4)	72 / 60	0 (0)	4.58 (0)
Predictive DSI Selection	10	100 (0)	7 / 6	60 (4)	60 / 55	0 (0)	4.75 (0)

The results from the System Usability Scale scored the subjective satisfaction with the system based on performance with these tasks to be: 89.

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

- Major findings

Users found the system very user friendly and easy to navigate. A well laid out navigation menu and tab structure is provided to move around the application.

- Areas for improvement

There are not any major findings where the users want to be improved.

2. INTRODUCTION

The EHRUT tested for this study was MedicsDocAssistant version 8.0. Designed to present medical information to healthcare providers in Ambulatory setting, the MedicsDocAssistant consists of complete patient charting and medical records. The usability testing attempted to represent realistic exercises and conditions.

The purpose of this study was to test and validate the usability of the current user interface, and provide evidence of usability in the EHR under Test (EHRUT). To this end, measures of effectiveness, efficiency and user satisfaction were captured during the usability testing.

3. METHOD

I. PARTICIPANTS

A total of 10 participants were tested on the EHRUT. Participants in the test were 4 Providers (physicians) and 6 Nurses and Medical Assistants. Participants had no direct connection to the development of or organization producing the EHRUT. Participants were not from the testing or supplier organization. Participants were given the opportunity to have the same orientation and level of training as the actual end users would have received.

For the test purposes, end-user characteristics were identified and translated into a recruitment screener used to solicit potential participants. An example of the screener is provided in Appendix [1].

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.

SL No	Part ID	Gender	Age	Education	Occupation/ Role	Prof. Exp.	Comp. Exp.	Product Exp.	Assistive Tech Needs
1	P01	Female	33	Associate degree	Medical Assistant	10 Y	10 Y	7 Y	No
2	P02	Female	40	Associate Degree	Medical Assistant	15 Y	15 Y	7 Y	No
3	P03	Male	34	Bachelor's degree	Nurse Practitioner	7 Y	7 Y	6 Y	No
4	P04	Male	35	Bachelor's degree	Nurse Practitioner	9 Y	9 Y	7 Y	No
5	P05	Male	37	Bachelor's degree	Nurse Practitioner	10 Y	9 Y	8 Y	No
6	P06	Female	33	Bachelor's degree	Medical Assistant	11 Y	11 Y	7 Y	No
7	P07	Male	66	Doctorate degree	Physician	40 Y	33 Y	7 Y	No
8	P08	Male	50	Doctorate degree	Physician	23 Y	23 Y	9 Y	No
9	P09	Female	57	Doctorate degree	Physician	33 Y	21 Y	11 Y	No
10	P10	Male	57	Doctorate degree	Physician	33 Y	23 Y	11 Y	No

10 participants (matching the demographics in the section on Participants) were recruited and 10 participated in the usability test. 0 participants failed to show for the study.

Participants were scheduled for 30 minute sessions with a 10 minutes break in between each session for debrief by the administrator(s) and data logger(s), and to reset systems to proper test conditions. A spreadsheet was used to keep track of the participant schedule, and included each participant's demographic characteristics as provided by the recruiting firm.

II. 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 the given EHR. Each participant used the system in the same location, 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 verbalizations (comments)
- Participant's satisfaction ratings of the system

Additional information about the various measures can be found in Section 3.9 on Usability Metrics.

III. 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. Evidence Based DSI
2. Predictive DSI Selection

Tasks were selected based on their frequency of use, criticality of function, and those that may be most troublesome for users. Tasks should always be constructed in light of the study objectives.

IV. PROCEDURES

Upon arrival, participants were greeted; their identity was verified and matched with a name on the participant schedule. Participants were then assigned a participant ID. Each participant reviewed and signed an informed consent and release form. A representative from the test team witnessed the participant's signature.

To ensure that the test ran smoothly, two staff members participated in this test, the usability administrator and the data logger. The usability testing staff conducting the test was experienced usability practitioners.

The administrator moderated the session including administering instructions and tasks. The administrator also monitored task times, obtained post-task rating data, and took notes on participant comments. A second person served as the data logger and took notes on task success, path deviations, number and type of errors, and comments.

Participants were instructed to perform the tasks (see specific instructions below):

- As quickly as possible making as few errors and deviations as possible.
- Without assistance; administrators were allowed to give immaterial guidance and clarification on tasks, but not instructions on use.
- Without using a think aloud technique.

For each task, the participants were given a written copy of the task. Task timing began once the administrator finished reading the question. The task time was stopped once the participant indicated they had successfully completed the task.

Following the session, the administrator gave the participant the post-test questionnaire (e.g., the System Usability Scale, see Appendix 5), compensated them for their time, and thanked each individual for their participation.

Participants' demographic information, task success rate, time on task, errors, deviations, verbal responses, and post-test questionnaire were recorded into a spreadsheet.

Participants were thanked for their time and compensated.

V. TEST LOCATION

The test facility included a waiting area and a quiet testing room with a table, computer for the participant, and recording computer for the administrator. Only the participant and administrator were in the test room. All observers and the data logger worked from a separate room where they could see the participant's screen and face shot, and listen to the audio of the session. To ensure that the environment was comfortable for users, noise

levels were kept to a minimum with the ambient temperature within a normal range. All of the safety instruction and evacuation procedures were valid, in place, and visible to the participants.

VI. TEST ENVIRONMENT

The EHRUT would be typically be used in a healthcare office or facility. In this instance, the testing was conducted in typical exam room environment. For testing, the computers used were IBM workstations running Windows 11 OS with a 19" monitors with a resolution 1366X768. The participants used a mouse and keyboard when interacting with the EHRUT.

The application was set up by the ADSC according to the MedicsDocAssistant's documentation describing the system set-up and preparation. The application itself was running on a chrome browser on windows platform using a test DB on a LAN connection. Technically, the system performance (i.e., response time) was representative to what actual users would experience in a field implementation. Additionally, participants were instructed not to change any of the default system settings (such as control of font size).

VII. TEST FORMS AND TOOLS

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

1. Informed Consent
2. Moderator's Guide
3. Post-test Questionnaire

Examples of these documents can be found in Appendices 3-6 respectively. The Moderator's Guide was devised so as to be able to capture required data.

The participant's interaction with the EHRUT was captured and recorded digitally with screen capture software running on the test machine. The test session were electronically transmitted to a nearby observation room where the data logger observed the test session.

VIII. PARTICIPANT INSTRUCTIONS

The administrator reads the following instructions aloud to the each participant.

Thank you for participating in this study. Your input is very important. Our session today will last about 120 minutes. During that time you will use an instance of an electronic health record. I will ask you to complete a few tasks using this system and answer some questions. You should complete the tasks as quickly as possible making as few errors as possible. Please try to complete the tasks on your own following the instructions very closely. Please note that we are not testing you we are testing the system, therefore if you have difficulty all this means is that something needs to be improved in the system. I will be here in case you need specific help, but I am not able to instruct you or provide help in how to use the application.

Overall, we are interested in how easy (or how difficult) this system is to use, what in it would be useful to you, and how we could improve it. I did not have any involvement in its creation, so please be honest with your opinions. All of the information that you provide will be kept confidential and your name will not be associated with your comments at any time. Should you feel it necessary you are able to withdraw at any time during the testing.

Following the procedural instructions, participants were shown the EHR and as their first task, were given time (30 minutes) to explore the system and make comments. Once this task was complete, the administrator gave the following instructions:

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 your impressions about the task once you are done.

IX. 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 **MedicsDocAssistant** by measuring participant success rates and errors
2. Efficiency of **MedicsDocAssistant** by measuring the average task time and path deviations
3. Satisfaction with **MedicsDocAssistant** by measuring ease of use ratings

4. DATA SCORING

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

Measures	Rationale and Scoring
<p>Effectiveness: Task Success</p>	<p>A task was counted as a “Success” if the participant was able to achieve the correct outcome, without assistance, within the time allotted on a per task basis.</p> <p>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.</p> <p>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 [x] seconds then allotted task time performance was [x * 1.25] seconds. This ratio should be aggregated across tasks and reported with mean and variance scores.</p>
<p>Effectiveness: Task Failures</p>	<p>If the participant abandoned the task, did not reach the correct answer or performed it incorrectly, or reached the end of the allotted time before successful completion, the task was counted as an “Failures.” No task times were taken for errors.</p> <p>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.</p> <p>This should also be expressed as the mean number of failed tasks per participant.</p> <p>On a qualitative level, an enumeration of errors and error types should be collected.</p>
<p>Efficiency: Task Deviations</p>	<p>The participant’s path (i.e., steps) through the application was recorded. 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.</p> <p>It is strongly recommended that task deviations be reported. Optimal paths (i.e., procedural steps) should be recorded when constructing tasks.</p>

<p>Efficiency: Task Time</p>	<p>Each task was timed from when the administrator said “Begin” until the participant said, “Done.” If he or she failed to say “Done,” the time was stopped when the participant stopped performing 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.</p>
<p>Satisfaction: Task Rating</p>	<p>Participant’s subjective impression of the ease of use of the application was 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.</p> <p>12</p> <p>Common convention is that average ratings for systems judged easy to use should be 3.3 or above.</p> <p>To measure participants’ confidence in and likeability of the [EHRUT] overall, the testing team administered the System Usability Scale (SUS) post-test questionnaire. Questions included, “I think I would like to use this system frequently,” “I thought the system was easy to use,” and “I would imagine that most people would learn to use this system very quickly.” See full System Usability Score questionnaire in Appendix 5.13</p>

Table: Details of how data were scored.

5. RESULTS

i. DATA ANALYSIS AND REPORTING

The results of the usability test were calculated according to the methods specified in the Usability Metrics section above.

The usability testing results for the MedicsDocAssistant are detailed below Table. The results should be seen in light of the objectives and goals outlined in Section 3.2 Study Design. The data should yield actionable results that, if corrected, yield material, positive impact on user performance.

Task\Measure	N	Task Success	Steps Taken	Task Time		Errors	Task Ratings 5= Easy Likert Scale
	#	Mean (SD) %	(Observed/ Optimal)	Mean(SD)	Deviations (Observed /Optimal)	Mean (SD) %	Mean(SD)
Evidence Based DSI	10	100 (0)	8 / 7	72 (4)	72 / 60	0 (0)	4.58 (0)
Predictive DSI Selection	10	100 (0)	7 / 6	60 (4)	60 / 55	0 (0)	4.75 (0)

The results from the SUS (System Usability Scale) scored the subjective satisfaction with the system based on performance with these tasks to be: 89. Broadly interpreted, scores under 60 represent systems with poor usability; scores over 80 would be considered above average.

ii. DISCUSSION OF THE FINDINGS

The physicians and the other providers were asked to use the system in their respective field of expertise. They were asked to benchmark against their current system usage or the manual process.

- EFFECTIVENESS

The users found the system very effective. The clear cut menu driven approach to each section of the patient chart made them easily navigate to the section they want to attempt and complete the data capture for that section. They can go to any section from anywhere which was liked by the users very much.

- EFFICIENCY

The time taken to complete the tasks is very minimal as they need not search for the functionality. They can easily navigate to the section where they to capture the patient information and complete it in no time.

- SATISFACTION

The users are very satisfied by the application as it gives them what they require. Easy to capture the patient information and give better care to the patient.

- MAJOR FINDINGS

There are not any major findings where the users want to be improved.

- AREAS FOR IMPROVEMENT

There are not any major findings where the users want to be improved.

6. APPENDICES

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

- 1: Sample recruiting screener.
- 2: Participant demographics.
- 3: Non-Disclosure Agreement (NDA) and Informed Consent Form.
- 4: Moderator's Guide
- 5: System Usability Scale Questionnaire

Appendix 1: SAMPLE RECRUITING SCREENER

The purpose of a screener to ensure that the participants selected represent the target user population as closely as possible. (Portions of this sample screener are taken from www.usability.gov/templates/index.html#Usability and adapted for use.)

Recruiting Script for Recruiting Firm

Hello, my name is _____, calling from MedicsDocAssistant. We are recruiting individuals to participate in a usability study for an electronic health record. We would like to ask you a few questions to see if you qualify and if would like to participate. This should only take a few minutes of your time. This is strictly for research purposes. If you are interested and qualify for the study, you will be paid to participate. Can I ask you a few questions?

1. Are you male or female? [Recruit a mix of participants]
2. Have you participated in a focus group or usability test in the past 12 months? [If yes, Terminate]
3. Do you, or does anyone in your home, work in marketing research, usability research, web design [...etc.]? [If yes, Terminate]
4. Do you, or does anyone in your home, have a commercial or research interest in an electronic health record software or consulting company? [If yes, Terminate]
5. Which of the following best describes your age? [23 to 39; 40 to 59; 60 - to 74; 75 and older] [Recruit Mix]
6. Which of the following best describes your race or ethnic group? [e.g., Caucasian, Asian, Black/African-American, Latino/a or Hispanic, etc.]
7. Do you require any assistive technologies to use a computer? [if so, please describe]

Professional Demographics

8. What is your current position and title? (Must be healthcare provider)
 - RN: Specialty _____
 - Physician: Specialty _____
 - Resident: Specialty _____
 - Administrative Staff
 - Other [Terminate]
9. How long have you held this position?

10. Describe your work location (or affiliation) and environment? (Recruit according to the intended users of the application) [e.g., private practice, health system, government clinic, etc.]

11. Which of the following describes your highest level of education? [e.g., high school graduate/GED, some college, college graduate (RN, BSN), postgraduate (MD/PhD), other (explain)]

Computer Expertise

12. Besides reading email, what professional activities do you do on the computer? [e.g., access EHR, research; reading news; shopping/banking; digital pictures; programming/word processing, etc.] [If no computer use at all, Terminate]

13. About how many hours per week do you spend on the computer? [Recruit according to the demographics of the intended users, e.g., 0 to 10, 11 to 25, 26+ hours per week]

14. What computer platform do you usually use? [e.g., Mac, Windows, etc.]

15. What Internet browser(s) do you usually use? [e.g., Firefox, IE, AOL, etc.]

16. In the last month, how often have you used an electronic health record?

17. How many years have you used an electronic health record?

18. How many EHRs do you use or are you familiar with?

19. How does your work environment patient records? [Recruit according to the demographics of the intended users]

- On paper
- Some paper, some electronic
- All electronic

Contact Information

Those are all the questions I have for you. Your background matches the people we're looking for. [If you are paying participants or offering some form of compensation, mention] For your participation, you will be paid [amount].

Would you be able to participate on [date, time]? [If so collect contact information]

May I get your contact information?

- Name of participant:
- Address:
- City, State, Zip:
- Daytime phone number:
- Evening phone number:
- Alternate [cell] phone number:
- Email address:

Before your session starts, we will ask you to sign a release form allowing us to videotape your session. The videotape will only be used internally for further study if needed. Will you consent to be videotaped?

This study will take place at Paramus Office Testing Labs. I will confirm your appointment a couple of days before your session and provide you with directions to our office. What time is the best time to reach you?

Appendix 2: PARTICIPANT DEMOGRAPHICS

Following is a high-level overview of the participants in this study.

Gender

Men	[6]
Women	[4]
Total (participants)	[10]

Occupation/Role

RN/BSN	[6]
Physician	[4]
Admin Staff	[0]
Total (participants)	[10]

Years of Experience

Years experience	[20]
Facility Use of EHR	
All paper	[0]
Some paper, some electronic	[2]
All electronic	[8]
Total (participants)	[10]

Appendix 3: NON-DISCLOSURE AGREEMENT AND INFORMED CONSENT FORM

Non-Disclosure Agreement

THIS AGREEMENT is entered into as of _____, 2024, between _____ (“the Participant”) and the testing organization **Advances Data Systems Corporation**, 15 Prospect Street, Paramus, NJ 07652.

The Participant acknowledges his or her voluntary participation in today’s usability study may bring the Participant into possession of Confidential Information. The term "Confidential Information" means all technical and commercial information of a proprietary or confidential nature which is disclosed by *ADSC*, or otherwise acquired by the Participant, in the course of today’s study.

By way of illustration, but not limitation, Confidential Information includes trade secrets, processes, formulae, data, know-how, products, designs, drawings, computer aided design files and other computer files, computer software, ideas, improvements, inventions, training methods and materials, marketing techniques, plans, strategies, budgets, financial information, or forecasts.

Any information the Participant acquires relating to this product during this study is confidential and proprietary to *ADSC* and is being disclosed solely for the purposes of the Participant’s participation in today’s usability study. By signing this form the Participant acknowledges that s/he will receive monetary compensation for feedback and will not disclose this confidential information obtained today to anyone else or any other organizations.

Participant’s printed name:

Signature: _____ **Date:** _____

Informed Consent

ADSC would like to thank you for participating in this study. The purpose of this study is to evaluate an electronic health records system. If you decide to participate, you will be asked to perform several tasks using the prototype and give your feedback. The study will last about 120 minutes. At the conclusion of the test, you will be compensated for your time.

Agreement

I understand and agree that as a voluntary participant in the present study conducted by *ADSC*, I am free to withdraw consent or discontinue participation at any time. I understand and agree to participate in the study conducted and videotaped by the *ADSC*.

I understand and consent to the use and release of the videotape by *ADSC*. I understand that the information and videotape is for research purposes only and that my name and image will not be used for any purpose other than research. I relinquish any rights to the videotape and understand the videotape may be copied and used by *ADSC* without further permission.

I understand and agree that the purpose of this study is to make software applications more useful and usable in the future.

I understand and agree that the data collected from this study may be shared with outside of ADSC and ADSC's client. I understand and agree that data confidentiality is assured, because only de-identified data – i.e., identification numbers not names – will be used in analysis and reporting of the results.

I agree to immediately raise any concerns or areas of discomfort with the study administrator. I understand that I can leave at any time.

Please check one of the following:

- YES, I have read the above statement and agree to be a

- NO, I choose not to participate in this study.

Signature: _____ **Date:** _____

Appendix 4: MODERATOR'S GUIDE

EHRUT Usability Test

Moderator's Guide

Administrator _____

Data Logger _____

Date _____ **Time** _____

Participant # _____

Location _____

Prior to testing

- Confirm schedule with Participants
- Ensure EHRUT lab environment is running properly
- Ensure lab and data recording equipment is running properly

Prior to each participant:

- Reset application
- Start session recordings with *tool*

Prior to each task:

- Reset application to starting point for next task

After each participant:

- End session recordings with *tool*

After all testing

- Back up all video and data files

Orientation (10 minutes)

Thank you for participating in this study. Our session today will last **30 minutes**. During that time you will take a look at an electronic health record system.

I will ask you to complete a few tasks using this system and answer some questions. We are interested in how easy (or how difficult) this system is to use, what in it would be useful to you, and how we could improve it. You will be asked to complete these tasks on your own trying to do them as quickly as possible with the fewest possible errors or deviations. Do not do anything more than asked. If you get lost or have difficulty I cannot answer help you with anything to do with the system itself. Please save your detailed comments until the end of a task or the end of the session as a whole when we can discuss freely.

I did not have any involvement in its creation, so please be honest with your opinions.

The product you will be using today is Electronic Medical Records, MedicsDocAssistant *version 8.0*

We are recording the audio and screenshots of our session today. All of the information that you provide will be kept confidential and your name will not be associated with your comments at any time.

Do you have any questions or concerns?

Preliminary Questions (5 minutes)

What is your job title / appointment?

How long have you been working in this role?

What are some of your main responsibilities?

Tell me about your experience with electronic health records.

Task 0: First Impressions

This is the application you will be working with. Have you heard of it? ____Yes ____No

If so, tell me what you know about it.

- Show test participant the EHRUT.
- Please don't click on anything just yet. What do you notice? What are you able to do here? Please be specific.

Notes / Comments: Two of the participants have already seen the product during a Road Show.

Task 1: Evidence Based DSI

While making the Order for Medication, Labs, Imaging, creating the note on patient and other various trigger points, Decision Support Intervention rules fire and give information to the provider to take actions upon.

Success:

- Easily completed
- Completed with difficulty or help :: Describe below
- Not completed

Comments:

Task Time: _____ Seconds

Comments:

Observed Errors and Verbalizations:

Comments:

Rating:

Overall, this task was: 5

Show participant written scale: "Very Difficult" (1) to "Very Easy" (5)

Administrator / Note taker Comments:

Task 2: Predictive DSI Selection

Provider will look for available PDSI to use.

Success:

- Easily completed
- Completed with difficulty or help :: Describe below
- Not completed

Comments:

Task Time: _____ Seconds

Comments:

Observed Errors and Verbalizations:

Comments:

Rating:

Overall, this task was: 5

Show participant written scale: "Very Difficult" (1) to "Very Easy" (5)

Administrator / Note taker Comments:

Final Questions (10 Minutes)

What was your overall impression of this system?

What aspects of the system did you like most?

What aspects of the system did you like 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 this application?

Compare this system to other systems you have used.

Would you recommend this system to your colleagues?

Administer the SUS

Appendix 5: SYSTEM USABILITY SCALE QUESTIONNAIRE

Sl. No.	Description	Strongly Disagree				Strongly Agree
1	I think that I would like to use this system frequently					
2	I found the system unnecessarily complex					
3	I thought the system was easy to use					
4	I think that I would need the support of a technical person to be able to use this system					
5	I found the various functions in this system were well integrated					
6	I thought there was too much inconsistency in this system					
7	I would imagine that most people would learn to use this system very quickly					
8	I found the system very cumbersome to use					
9	I felt very confident using the system					
10	I needed to learn a lot of things before I could get going with this system					