Reviewer's report

Title: What they fill in today, may not be useful tomorrow: Lessons learned from a study of medical records at the Women hospital in Tabriz, Iran

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Reviewer: Arild Faxvaag

Reviewer's report:

This is a report of the quality of the paper-based medical record in an Iranian University Hospital that has been conducted to establish a baseline description before the introduction of an Electronic medical record (EMR) system. The authors have collected data on the integrity, completeness and readability of the medical record as a whole and of its sub-sections (sheets). Furthermore, they have interviewed nurses and physicians. Although the choice of methods can be criticized (see below), the researcher's application of the chosen methods appear good. Some results, I will say, are however of very limited interest to the scientific community. That physicians have poor handwriting and that poor handwriting is difficult to understand is nothing new. Likewise, this report is unlikely to be the first to establish the fact that physicians sometimes aren't able to obtain the paper-based medical record. What might be new, is probably the verification that physicians and nurses in Iran interact with the medical record in just the same ways as physicians and nurses do elsewhere. As a description of a healthcare scenario that largely is untouched by the functionings of computer-based information systems, I miss a more thorough discussion on the role of the personal (brain-based) memory of the physicians, nurses and patients, as well as the role of their personal notes (paper sheets or booklets they keep in their pockets). The lack of an EMR system at the hospital is a problem, but should also be seen as an opportunity to conduct an EMR system implementation project that utilizes the vast body of knowledge and scientific expertise that has accumulated on this topic in the last four decades.

1. Major Compulsory Revisions

1.1. To improve readability and understandability, the authors should include a more detailed description of the healthcare system in Iran, how it is organized, regulated and financed. Do the patients pay for themselves or does the hospital get reimbursed via the Iranian government? Is this a hospital only for the rich? Throughout the manuscript, we find sentences mentioning insurance companies. The role of insurance companies in the Iranian healthcare system should be described.

1.2. The choice of methods only partly suits the purpose of the study. Are other documentation systems in use at the department? At least in the western world, many hospital departments keep and maintain more than one documentation system (e.g. a register or a book enlisting the most interesting cases, a system to
keep track of the quality of important diagnostic or therapeutic methods in use at the department. Were there any such (electronic or paper-based) systems at the department? Do some of the physicians keep private archives? Are there systems that are used for research purposes (this is a university hospital, some physicians have the duty to conduct research). Are there systems that are used for documentation of learning / manual skills (this is a teaching hospital).

1.3. I miss a more thorough discussion (see above).

2. Minor Essential Revisions

2.1. Some parts of the discussion re-states the results rather than explaining and defending them. The possible implications (of the results) for the forthcoming EMR system at the hospital should be discussed.

3. Discretionary Revisions
None.

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article whose findings are important to those with closely related research interests

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:
I declare that I have no competing interests.