Reviewer's report

Title: Designing a Patient-Centered Personal Health Record for Prevention

Version: 1 Date: 25 August 2011

Reviewer: Ronald Lagoe

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Discretionary Revisions

This reviewer must note, at the outset, some reluctance in reviewing a manuscript concerning this subject. This reluctance was based on a lack of knowledge of the specific content of preventive care. It was also based on a long history of reviews of manuscripts concerning electronic health data, many of which were lacking in detail and actionable results.

Notwithstanding these concerns, this reviewer was very favorably impressed with the manuscript. It included a well organized description of a program focusing on development of electronic personal health records that was well structured, logical, and coherent.

The manuscript addressed the development of preventive care, a valuable but sometimes elusive, topic. While almost all health care providers readily acknowledge the importance of preventive care, few of them have systematic, organized approaches to provide it. This manuscript described the use of electronic health records to develop and use personal health records in an organized fashion. From the viewpoint of an outsider, this approach could make a valuable contribution to preventive care.

The components of the model described by the author are impressive. They involve extraction of specific data related to preventive health care from practice records, as well as summarization and organization of that information. Because of the scope and the need for specificity of preventive health care information, this was a considerable challenge.

Related to this subject was the use of a risk assessment tool in the model. This tool made it possible to identify important information, digest it, and employ it to evaluate the conditions of individual patients. This made it possible for the tool to focus on individual conditions, as well as the whole patient.

The model developed by the authors also emphasized the need to translate preventive health care information into lay language for communication purposes. This is another contribution of their work. Without simplification of this information, its potential for impact on the health care practices of providers and behaviors of individuals would be limited.

Probably the most important component of the model, from the perspective of this reviewer, was its effort to make information actionable, described on Page 8. The authors emphasized that information concerning preventive care included explicit recommendations, personalized content, motivational content,
coordinated care, and followup reminders. The subject of actionable content is one that frequently receives limited content in discussions of electronic health records, these authors have addressed it in a direct and organized manner.

The major issue concerning the subject of the manuscript that remains to be addressed is its impact. Of course, it remains to be seen whether the model described will have a specific impact on preventive health in the health status of individuals. The authors could provide a limited amount of additional material, perhaps a few paragraphs, that identify the structure of an evaluation plan and schedule. This component could be based on the evaluation sites that were used to develop the model or a different approach.

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

**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.