Reviewer's report

Title: Use and Satisfaction with Key Functions of a Common Commercial Electronic Health Record: a Survey of Primary Care Providers

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Reviewer: Sarah C Shih

Reviewer's report:

General Comments
This is a well written article and provides a solid example of how clinicians are using EHRs for documenting key primary care processes. The manuscript highlights in detail the challenges that prevent the optimal use of information systems that will eventually be necessary for advanced models of primary care, e.g., documentation to be shared across health settings or clinicians for health information exchange and continuity of care. Though the study population is limited to one specific EHR software solution, the depth of information of how clinicians are using specific documentation features is helpful for practice managers in anticipating potential practice needs for effectively using the EHR, such as additional training or workflow redesign, and for policy makers or stakeholders to structure payment or align incentives for further progress.

I would suggest publishing the survey instrument as an appendix (assuming the instrument is not proprietary or copyrighted) so that others could potentially use the same instrument and adapt the items to their EHR solution. Results from the surveys could allow for additional comparison between Epic with other software with regards to specific documentation habits and the time it takes to do so.

Discretionary Revisions
The authors describe the ARRA incentives and the relevance of their study to Meaningful Use. In this context, this manuscript is very timely as many regional extension centers and their agents work with primary care providers in achieving meaningful use objectives for the CMS incentives (http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/MU_Stage1_ReqOverview.pdf).
If the authors are also targeting the ONC/REC audience, it would be helpful to provide additional information from this study’s respondents and their achievement, or lack thereof, of the meaningful use objectives. Below are some suggested areas the authors could address to boost the study’s relevance to this audience if data are available or easily accessible.

Is there motivation for these clinicians to be entering patient information in structured fields? Were the respondents in this study eligible for meaningful use? Epic users tend to be part of larger integrated health systems that may not be eligible for MU incentives – is this group less likely to focus on documentation as they may not be motivated by the incentives?
If this group of providers is eligible for MU incentives, have any of the respondents successfully achieved Meaningful Use Stage 1? Despite the challenges outlined in the manuscript, have some of the providers in the setting met the meaningful use objectives?

For those that haven’t met MU stage 1, is there a correlation with the challenges the authors observe in documenting in structural fields? As the ONC continues to work with EHR vendors to identify standards around usability, functionality, and other software utility to drive improvements in health care, it would be helpful if the authors could comment on whether the challenges observed could eventually be resolved with more training/time on the EHR/new incentive structure, or if there are barriers in which only changes in EHR technology will resolve.

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

Quality of written English: Acceptable

Statistical review: Yes, and I have assessed the statistics in my report.

Declaration of competing interests:

I declare that I have no competing interests