Reviewer's report

Title: Integrating a health-related-quality-of-life module within electronic health records: a comparative case study assessing value added

Version: 1 Date: 28 October 2011

Reviewer: Michael Harrison

Reviewer's report:

This valuable study documents through mixed methods some of the limitations of integrating a quality-of-life assessment module into an existing EHR. Among the strengths of the paper are appropriate use of mixed methods and comparisons within and between sites; documentation of the perspectives of patients, as well as nurses and physicians, and clear presentation of the main findings and their implications.

Compulsory Revision:

1. Description of the HIT Intervention. Provide background on where and how the GEM module was developed, where else it has been used, results of any studies etc.

2. Provide additional details on the institutional and market contexts of the practices so that international readers may better understand the relevance of the sites to practice settings in their own countries.

3. The roles of the project team in all phases of the intervention and the assessment need to be made clearer. To this end on p.6, paragraph 2 please use active voice to indicate which project members or other individuals (e.g. developers of the GEM software module) provided details of the study [and intervention], who obtained consent, provided training etc.

4. One limitation of the study that should be acknowledged is that the project team apparently was responsible not only for assessing the uptake of the new module but also for leading and perhaps developing the intervention – recruiting practices willing to try the module, training participants in its use, and assisting them in data entry. In many instances, investigator involvement in sponsorship of the intervention has resulted in a positive response bias. This does not have seem to occurred here, but nonetheless, possible implications of the involvement of the study team in sponsoring the intervention and assisting in its use should be addressed in the discussion section.

Minor Essential Revisions:

5. On p. 9 (8 lines from the bottom), the authors should clarify whether the procedures they used for “sharing” open codes within the research team included assessments of coding reliability.
Discretionary Revisions:

6. The Discussion and Background sections would be strengthened by reference to other frameworks besides the TAM for assessing factors affecting the adoption and implementation of new technologies and evidence based practices.

7. By extension, the conclusion might consider what the study suggests about challenges of using EHRs to enhance patient-centered care.

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

**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.