**Deutscher, D., Hart, D. L., Dickstein, R., Horn, S. D., & Gutvirtz, M. (2008).** [**Implementing an integrated electronic outcomes and electronic health record process to create a foundation for clinical practice improvement**](http://0-proquest.umi.com.novacat.nova.edu/pdf/f70171288cc9c5b0217a2955c1afe2e6/1225733510/share3/pqimage/pqirs103/20081103120150122/29989/out.pdf)**. *Physical Therapy*, 88 (2), 270-285.**

Key words: Information retrieval, electronic medical records, outcome data, retrieval processes.

Deutscher and colleagues share their findings in a one-year study of 23,999 patient encounters to assess the feasibility of retrieving the outcomes data in the electronic medical record. Incorporating a functional status outcome, a computerized self-assessment of patient’s their changes in status was implemented. Patients completed an assessment a three different periods of their care. The clinicians were able to review these surveys and incorporate them into their practice by modifying the therapy given to the patient.

The use of computerized surveys that were directly linked in the electronic health record made this is feasible and user-friendly process. Surprisingly, both the patient and provider use of this process was higher than anticipated. Not only were outcomes generated, but also an overall assessment of the process as well as a quality assessment of the entire system was possible as the data was in the system. As the process and technical aspects of the surveys were completed in deliberate steps prior to instituting the entire process, the information needed to make decisions about change was easily retrievable. The details regarding the computer technology aspects, the barriers and the impact on the physical therapy practice are discussed. The outcomes measures were easily incorporated into the practice and retrieval of these measures were used to increase the quality of care given to the patients.

This particular process demonstrated the benefits of using a system to lay the foundation and test each particular aspect of the technical as well as the human user components of a retrieval process. The piloting of the input, output and retrieval process was completed on a small pilot sample of patients and providers prior to the full implementation. Thus, the barriers, the potential user and provider issues, were known prior to the large project and interventions were in place to minimize those issues.

This large computerized outcome based and electronic record study was incorporated in Israel and its use in the United States could be a valid replicate study. The largest question would not be the technology aspects, but the barriers and user aspects would be intriguing to study to see if any cultural differences will be elicited.