

## Appendix

1. **Health Information and Data**—A defined data set that includes medical and nursing diagnoses, a medication list, allergies, demographics, clinical narratives, and laboratory test results for access by care providers when needed.
2. **Results Management**—A feature that manages lab test results and radiology procedures results, does results reporting and results notification, and handles multimedia support—images, waveforms, pictures, sounds.
3. **Order Entry/Management**—Computerized provider order entry (CPOE) for such areas as electronic prescribing, laboratory, microbiology, pathology, XR, ancillary, nursing, supplies, consults. Even with little or no decision support they can still improve workflow processes by eliminating lost orders and ambiguities caused by illegible handwriting, generating related orders automatically.
4. **Decision Support**—A computerized decision support system that enhances clinical performance by providing drug alerts, other rule-based alerts, reminders, clinical guidelines and pathways. It also helps in improving drug dosing and drug selection. It can be used for chronic disease management, clinician work lists, diagnostic decision support, and automated real-time surveillance.
5. **Electronic Communication and Connectivity**—Electronic communication can be between provider-provider, patient-provider, trading partners such as pharmacies, insurers, laboratory, radiology, and among team members for coordination. Electronic connectivity includes integrated medical record within facility, within different facilities of the same healthcare system, and among different healthcare systems.
6. **Patient Support**—Patient support includes patient education, family and informal caregiver education, data entered by patient, family, and/or information caregiver such as home monitoring.
7. **Administrative Processes**—Administrative processes include electronic scheduling systems for hospital admissions, inpatient and outpatient procedures, and identifying eligible or potential eligible patients for clinical trials.
8. **Reporting and Population Health Management**—This feature would report patient safety and quality data, public health data, and disease registries. It makes the reporting process less labor-intensive and time-consuming (Institute of Medicine, 2003).

Source: Institute of Medicine. “Key Capabilities of an Electronic Health Record System,” 2003. Available at <http://books.nap.edu/html/ehr/NI000427.pdf> (accessed June 26, 2004).