

## Baseline Clinician Interview Script

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This is an interview guide designed to be conducted with clinical staff in an ambulatory setting. The tool includes questions to assess the current state of electronic health records.

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### 1. Hypertension visit task flow assessment

In the next set of questions, I would like you to think about a typical interaction you have with a patient with newly diagnosed hypertension.

Can you describe for me, step by step, what takes place during your interaction with a typical newly diagnosed hypertensive patient?

[list key steps on paper, to be used for later probes]

[after pilot testing this question, add probes here on key steps to remind respondents about them if they are not spontaneously included]

Probe: At what points during those steps are you using eClinicalWorks and how?

Probe: Do you ever use external sources of information during those visits (e.g., PDR, internet, colleagues)?

Probe: How do you coordinate HTN information and care with other care team members?

Generally, how satisfied are you with the way you work with hypertensive patients? Which steps are you satisfied with and not so satisfied with? (probe according to steps identified earlier)

What steps in your interaction with hypertensive patients could be improved and how?

What would you recommend to be added to eClinicalWorks to facilitate your and other clinicians' work with hypertensive patients?

### 2. Interview Questions

These questions follow up on some of the topics covered in the survey you filled out.

In your opinion, what are the reasons why clinicians don't follow the guidelines for HTN care?

In your opinion, what is the priority that hypertension receives, compared to other medical issues?

In your experience, what are some reasons why so many hypertensive patients are not prescribed antihypertensive medications?

Probe: how big a role do expectations regarding patient adherence play?

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Are there any particular aspects of the JNC 7 recommendations that you may disagree with in your practice? Why? [have guideline summary document available]

Probe: agree with level of bp to start medications? Agree with first line meds? Agree with when to use two drugs?

The next few questions are about your experiences with eClinicalWorks.

How often do you use eCW:

Before seeing the patient? During the patient visit? After the patient visit? While on the phone with the patient?

Were you providing care here prior to the eClinicalWorks system?

If yes, how has the eCW system changed:

The way you generally interact with patients?

The way you organize your work?

The way you provide hypertension care?

Overall, how much has your work routine changed as a result of eCW?

Are there any reminders in eCW that you find helpful?

Do you have any comments about the process of implementing eCW at your clinic?

How happy have you been with the availability of tech support?

Do you ever use eCW to pull up summaries for groups of patients?

Do you receive quality of care reports in eCW or other ways? What kind? How frequently? What do you do with them? Do you find them useful? Do you have any suggestions or ideas for future quality of care reports?

I also have some follow-up questions about information sources and practice guidelines.

How do you keep up with medical science? science on hypertension and its treatment?

How often do you look up information on medications during patient visits?

Probe about use of "up-to-date" feature, PDR, Epocrates, MEDLINE, other

[make list of probes after pilot]

How do you generally feel about practice guidelines?

Probes: guidelines vs. latest research, "cookbook" nature of guidelines, biases of guideline authors

How much exposure have you had to the JNC 7 guidelines? In what ways?

How do you access the JNC 7 guidelines, if you need to?

Let's say a new tool, incorporated in eCW, prompts you to significantly change the way you work with hypertensive patients.

How likely are you to change the way you work?

What would it take to convince you to change the way you work?

How do you feel about the idea of receiving reminders in eClinicalWorks?

Do you have any recommendations for how alerts or other information tools for hypertension care should be designed in eCW?

Do you have any other final comments?

6. Conclusion