

## **Attachment B**

### **Survey Questionnaire B Independent Labs**

# 2012 NATIONAL SURVEY ON HEALTH INFORMATION EXCHANGE IN CLINICAL LABORATORIES

[LOGOS]

FRONT PAGE

Sponsors [ONC]/ [NORC]  
1-800-XXX-XXXX

[INSERT INSTRUCTIONS HERE]

OMB No. (Insert OMB No.)

**Statement of Burden**

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is (Insert OMB No). The time required to complete this information collection is estimated to average 20 minutes per response, including the time to review instructions, search existing data sources, and gather the data needed, and complete and review the information collection. In you have comments concerning the accuracy of this time estimate(s) or suggestions for improving this form, please write to:

(Insert Address here.)

**DEFINITIONS (Ordered Alphabetically)**

<b>Electronic Health Record (EHR)</b>	<i>An electronic record of health-related information on an individual that conforms to nationally recognized interoperability standards and that can be created, managed, and consulted by authorized clinicians and staff across more than one health care organization.</i>
<b>Electronically</b>	<i>Any computerized exchange typically transmitted over the internet or through a network, using health information technologies such as Electronic Health Records (EHRs) and direct access via a lab portal. Please do not include fax machines.</i>
<b>Health Information Exchange</b>	<i>The electronic movement of health-related information among organizations according to nationally recognized standards.</i>
<b>Health Information Organization</b>	<i>An organization that oversees and governs the exchange of health-related information among organizations according to nationally recognized standards.</i>
<b>HL7 (Health Level 7)</b>	<i>A messaging standard that can be used to send laboratory results from a laboratory to an Electronic Health Record (EHR). Health Level Seven International (HL7) is the global authority on standards for interoperability of health information technology with members in over 55 countries.</i>
<b>LIMS (Laboratory Information Management System)</b>	<i>A collection of computerized methods to acquire, analyze, store, and report laboratory data.</i>
<b>LIS (Laboratory Information System)</b>	<i>A computerized clinical laboratory information system (LIS) is a software system used in a clinical laboratory to computerize laboratory business processes such as test processing, test scheduling, specimen and sample tracking, inventory control, reporting, quality control and quality assurance management, and statistical analysis and surveillance.</i>
<b>LOINC test names (Logical Observation Identifiers Names and Codes)</b>	<i>Terminology used to provide consistent naming of datasets that includes standard codes for laboratory test names; for example, "Test name: Salmonella Stool Culture LOINC Code: 20955-1"</i>
<b>Message standards</b>	<i>A set of rules that allow information to be shared and processed in a uniform and consistent manner. Messaging standards are particularly important because they define how information is packaged and communicated from one party to another. Such standards set the language, structure and data types required for seamless integration from one system to another.</i>
<b>Ordering practitioners</b>	<i>A physician or, when appropriate, a non-physician practitioner who orders services for the patient.</i>
<b>Personal Health Record (PHR)</b>	<i>An electronic record of health-related information on an individual that conforms to nationally recognized interoperability standards and that can be drawn from multiple sources while being managed, shared, and controlled by the individual.</i>
<b>Portal</b>	<i>Hosted and maintained by a provider or payer organization, without transferring access and control and use of the information to the individual, are not considered PHRs based on this definition.</i>

VERSION B (NON-HOSPITALS: REGIONAL & INDEPENDENT)

<b>Reference laboratories</b>	<i>Usually large, commercial laboratories with locations throughout the country that perform both routine and specialized laboratory tests. Reference labs often have small, satellite labs serving several communities that collect specimens to be sent to the larger “parent” laboratory for testing.</i>
<b>SNOMED CT organism codes (Systematized Nomenclature of Medicine)</b>	<i>A standard terminology that includes standard codes for organisms and other results; for example, “Test name: Salmonella Enteridis, SNOMED CT Code:7352500.”</i>
<b>Structured format</b>	<i>Documentation of discrete data using controlled vocabulary, creating fixed fields within a record or file, or another method that provides clear structure to information (is not completely free text).</i>
<b>Tests</b>	<i>A clinical diagnostic laboratory service. Service and test are synonymous.</i>
<b>Test results</b>	<i>A laboratory test that is (1) ordered by a provider; (2) performed on received specimens; and (3) finalized and results have been produced. The laboratory has incorporated and calculated reference data to produce the results referenced.</i>

DRAFT

## Section 1. General Information

*We would like to begin by asking you a few background questions about you and your laboratory.*

This survey is being sent to a random sample of clinical laboratories. Some clinical laboratories have multiple entities (such as campuses) but are administered by a single administrative unit while others are recognized as independent entities by accreditation groups such as Medicare.

**For purposes of this survey, we would like you to only respond for the location to which this survey was mailed.**

**Q1.** Is your laboratory associated with a hospital that is a single administrative unit or separate entities?

- 1  Separate entities
- 2  Single administrative unit (this one) (Go to Q2)

If separate entities:

**Q1a.** Are the other locations in this state only or in more than one state?

- 1  This state only
- 2  More than one state

**Q2.** Which option below best describes your laboratory's organizational affiliation or ownership? *Please select all that apply*

- 1  Affiliated with a University/Academic Center
- 2  Clinic or Group Practice
- 3  Health System
- 4  Commercial laboratory
- 5  Other (please specify)
- 6  Don't know

**Q3.** Is your laboratory a reference laboratory?

- 1  Yes
- 2  No
- 3  Don't know

**Q4.** What is your job title?

- 1  Laboratory Director
- 2  Laboratory Manager
- 3  Laboratory Information System Director
- 4  Medical Laboratory Technician or Clinical Laboratory Technician
- 5  Medical Technologist or Clinical Laboratory Scientist
- 6  Staff Pathologist
- 7  Chief Information Officer
- 8  Other (please specify)
- 9  Don't know

**Q5.** How many full time equivalents (FTEs) currently work only in the laboratory? This would not include administrative and information technology staff who are shared with other parts of the laboratory system.

- 1  Fewer than 15
  - 2  15 to 30
  - 3  31 to 45
  - 4  46 to 60
  - 5  61 or more (if selected, please provide number)
  - 6  Don't know
- 7  Number of full time employees

**Q6.** Which option below best describes the type of testing your laboratory performs?

- 1  Anatomic pathology testing (Go to Q8)
- 2  Clinical pathology testing
- 3  Both

**Q7.** Does your laboratory perform any of the following types of clinical pathology testing?

	Yes	No	Don't know
a. Routine chemistry	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Clinical Microbiology (e.g., Virology, immunology)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. Hematology	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. Genetics	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. Other, please specify <input style="width: 200px; height: 20px;" type="text"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

## Section 2: Current Systems and Technical Architecture

We would like to ask you about your laboratory's current practices on software-based information management systems. In particular, we are interested in learning about your use of Laboratory Information Systems (LIS) or Laboratory Information Management Systems (LIMS). To facilitate completion of the following sections, we suggest working with your LIS manager.

**Q8.** Does your laboratory currently use a Laboratory Information System (LIS/LIMS)?

- 1  Yes
- 2  No (Go to Q12)
- 3  Don't Know (Go to Q12)

**Q9.** Does your Laboratory Information System (LIS/LIMS) support multiple laboratories in the laboratory system or only your laboratory? By multiple laboratories we mean either a laboratory with multiple physical sites or multiple laboratories located within a single system.

- 1  Multiple laboratories
- 2  Only one laboratory
- 3  Don't Know

**Q10.** What type of Laboratory Information System (LIS/LIMS) does your laboratory currently use?

*Please select all that apply.*

- 1  Commercial system managed by the laboratory
- 2  Commercial system managed by a third-party vendor
- 3  Local or internally developed (Go to Q12)
- 4  Other, please specify  (Go to Q12)
- 5  Don't know (Go to Q12)

**Q11.** Which vendor(s) supplies your Laboratory Information System(s) (LIS/LIMS)?

*Please select all that apply.*

- |  |  |
|--|--|
| 1 <input type="checkbox"/> Cerner                          | 9 <input type="checkbox"/> Orchard                                     |
| 2 <input type="checkbox"/> CPSI                            | 10 <input type="checkbox"/> SCC Soft                                   |
| 3 <input type="checkbox"/> EPIC                            | 11 <input type="checkbox"/> Siemens                                    |
| 4 <input type="checkbox"/> Healthland                      | 12 <input type="checkbox"/> Sunquest                                   |
| 5 <input type="checkbox"/> HMS                             | 13 <input type="checkbox"/> Other, please specify <input type="text"/> |
| 6 <input type="checkbox"/> McKesson                        | 14 <input type="checkbox"/> Don't Know                                 |
| 7 <input type="checkbox"/> Meditech                        |  |
| 8 <input type="checkbox"/> Middleware Vendor (e.g., Merge) |  |





**Q14.** Did your laboratory send test results to **ordering practitioners** during 2012 using any of the following methods? *Please answer a-d.*

	Yes	No	Don't know
a. Mail or Fax	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Electronic <u>non-discrete</u> data (free-text format) including email communications, scanned faxes or documents, text files, and PDF files	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. Electronic <u>discrete</u> data (no free-text format) including excel files, and LIS output reports	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. Electronic <u>mixed</u> format (free-text and non-free text format), e.g., delivery of pathology or microbiology results	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

**Q15.** How did your laboratory share test results electronically with **ordering practitioners**? *Please consider only results transmitted in 2012 for the following methods.*

	Yes	No	Don't know
a. Web portal provided by your laboratory	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Web portal provided by a third party	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. Third party middleware vendor	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. Interface to Health Information Exchange (HIE)/ Health Information Organization (HIO)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. Interface to Electronic Health Records (EHR)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

\*IF YES to Q15e, Go To Question 16. Otherwise, Go To Question 18.

**Q16.** Is your laboratory currently capable of sending test results electronically in a structured format (that is, using the HL7 messaging standard and a vocabulary standard such as LOINC) to an ordering practitioner's Electronic Health Record (EHR)?

- 1  Yes
- 2  No (*Go to Q18*)
- 3  Don't Know (*Go to Q18*)

**Q17.** Approximately, how many test results did your laboratory send electronically in a structured format during 2012 to **ordering practitioners** using Electronic Health Records (EHRs)? *Please consult your records to answer this question. If records are not available, please provide your best estimate.*

1 

--	--	--	--	--	--	--	--	--	--	--	--

 Number of test results (*Go to Q18*)

- From Records
- Estimate

2  Don't Know (*Go to Q17a*)

**Q17a.** Please select the range that includes the number of total test results.

- |   |   |
|---|---|
| 1 <input type="checkbox"/> 0                | 10 <input type="checkbox"/> 80,000 to 89,999            |
| 2 <input type="checkbox"/> 1 to 9,999       | 11 <input type="checkbox"/> 90,000 to 99,999            |
| 3 <input type="checkbox"/> 10,000 to 19,999 | 12 <input type="checkbox"/> 100,000 to 249,999          |
| 4 <input type="checkbox"/> 20,000 to 29,999 | 13 <input type="checkbox"/> 250,000 to 999,999          |
| 5 <input type="checkbox"/> 30,000 to 39,999 | 14 <input type="checkbox"/> 1 million to 1.99 million   |
| 6 <input type="checkbox"/> 40,000 to 49,999 | 15 <input type="checkbox"/> 2.0 million to 2.99 million |
| 7 <input type="checkbox"/> 50,000 to 59,999 | 16 <input type="checkbox"/> 3.0 million to 4.99 million |
| 8 <input type="checkbox"/> 60,000 to 69,999 | 17 <input type="checkbox"/> 5.0+ million                |
| 9 <input type="checkbox"/> 70,000 to 79,999 |   |

## Section 4: Lab Exchange Standards

*In the following section, we will refer to "HL7." HL7 (Health Level 7) is a messaging standard that can be used to send laboratory results from a laboratory to an Electronic Health Record (EHR). To facilitate completion of the following sections, we suggest working with your IT staff or your LIS manager.*

**Q18.** Which of the following messaging standards are currently in use by your laboratory for result reporting?

*Please select all that apply.*

- 1  HL7 2.3.1
- 2  HL7 2.5.1
- 3  Other HL7 version, please specify
- 4  Proprietary
- 5  Other, please specify
- 6  None
- 7  Don't know

**Q19.** Which vocabulary standard for laboratory result reporting is currently in use by your laboratory?

*Please select all that apply.*

- 1  LOINC (Logical Observation Identifiers Names and Codes)
- 2  SNOMED CT (Systematized Nomenclature of Medicine)
- 3  Both of the above
- 4  Local codes
- 5  Other, please specify
- 6  None
- 7  Don't know

## Section 5: Barriers to Exchange

*We would like to learn about barriers to laboratory information exchange.*

**Q20.** Which one of the following issues concerning electronic delivery of laboratory test results in a structured format is the primary challenge your laboratory is currently facing?

*Please select one box.*

- 1  EHR systems are unable to receive structured results
- 2  Insufficient information on exchange options available
- 3  Lack of harmonization of industry accepted standards
- 4  Inability of Laboratory Information System (LIS) to generate/receive electronic messages/transactions in structured and standardized format
- 5  Subscription rates/fees for exchange service providers (including lab hub, third party middleware vendors, and Health Information Exchange providers) are too high
- 6  Compliance with Clinical Lab Improvement Amendments (CLIA) regulations
- 7  Other, please specify
- 8  No challenges experienced in delivering structured laboratory results
- 9  Don't know

**Q21.** Which of the following issues concerning laboratory interfaces for electronic delivery of test results in a structured format to ordering practitioners is the primary challenge your laboratory is currently facing?

*Please select one box.*

- 1  The time required to build interfaces
- 2  The costs associated with building interfaces
- 3  Lack of harmonization of industry accepted standards
- 4  Lack of specific implementation guides
- 5  Lack of trained staff (human capital) needed to implement the interfaces
- 6  Other, please specify
- 7  No challenges experienced in developing laboratory interfaces for delivery of laboratory results
- 8  Don't know

**Q22.** Which one of the following issues concerning adoption of LOINC codes for sending results best describes the current situation in your laboratory?

*Please select all that apply.*

- 1  Our laboratory information system (LIS) is not able to store LOINC codes
- 2  Our laboratory does not have LOINC codes/mapping for some of our tests
- 3  Our laboratory does not have LOINC codes/mapping for all our tests
- 4  Our laboratory has insufficient resources to maintain LOINC mappings over time
- 5  Our laboratory information system (LIS) is not able to send LOINC codes, as it does not have an interface to send laboratory reports with LOINC codes
- 6  LOINC is not robust enough to support local code
- 7  EHRs do not have the ability to accept LOINC codes
- 8  Other, please specify
- 9  No issues experienced in using LOINC codes to send laboratory reports
- 10  Don't know

**Section 6: Implementation of Guidelines and Regulations**

*In the following question, we will refer to the “LRI guide.” The “LRI guide” is the implementation guide developed by the Office of the National Coordinator’s (ONC) Standards and Interoperability Framework laboratory results interface (LRI) initiative. It is an implementation guide for electronic submission of Laboratory Results to Ambulatory EHRs. LRI is required for Meaningful Use Stage 2. For more information about the S&I Framework initiatives, including the LRI initiative, visit [http://wiki.siframework.org/Lab+Results+Interface+\(LRI\)+Initiative](http://wiki.siframework.org/Lab+Results+Interface+(LRI)+Initiative)*

**Q23.** Has your laboratory implemented the LRI guide for laboratory result content and format?

- 1  Yes
- 2  No
- 3  Don't know

**Q24.** Does your laboratory allow patients or their legal representatives direct access to their laboratory results?

- 1  No (Go to END)
- 2  It is not legal in my state to send laboratory results directly to patients (Go to END)
- 3  Yes (Go to Q24a)
- 4  Don't Know

**Q24a.** If YES, please indicate which of the following methods of delivery your laboratory uses to deliver results directly to patients or patients' legal representatives.

	Yes	No	Don't know
a. Mail and/or Fax	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Web portal solution provided by laboratory	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. Transmission of results to a designated Personal Health Record (PHR)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. Through a community Health Information Organization that provides patient access to information	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. Through a physician's EHR that provides patients access	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

**Q25.** Please enter your hospital's Medicare Provider Number below.

1 

--	--	--	--	--	--	--

Please check this box if more than one person helped complete this questionnaire.

### End of Questionnaire

Thank you.

Please return the completed questionnaire in the enclosed postage paid envelope to:

NORC

Attn: National Clinical Laboratory Survey on Health Information Exchange

1 North State Street, 16th Floor

Chicago, IL 60602

If you prefer, you may:

fax your completed questionnaire to: **877-504-6296**

or e-mail it to [LabSurvey@norc.org](mailto:LabSurvey@norc.org).

Please make sure to include the survey cover page in your fax or email.

# **Proposed Contacts**

## **Health IT Coordinator Letter**

[DATE]

To Whom It May Concern,

We are writing to make you aware of the upcoming **National Survey on Health Information Exchange in Clinical Laboratories**, a survey of clinical laboratories to assess the electronic exchange of key laboratory information across the United States. The **Office of the National Coordinator for Health Information Technology (ONC)** is conducting this survey in collaboration with **NORC at the University of Chicago**. **This survey is supported by the College of American Pathologists (CAP) and the College of Healthcare Information Management Executives (CHIME).**

Crucial information on laboratory information exchange across the United States will be collected, including the volume of laboratory information exchange, laboratory information exchange standards, current systems and technical architecture, and barriers and facilitators of laboratory information exchange. The information collected will provide crucial state and national data on the volume of laboratory information exchange occurring electronically, reporting capacity, and other key measures of electronic exchange

This study will rely on data gathered from key informants such as, Laboratory Managers or Directors and Laboratory Information System Specialists at the sampled laboratories. About 14,000 hospital and independent laboratories have been selected to participate. Each lab has been selected from a listing of all laboratories in the United States. The source of this listing is the Online Survey, Certification and Reporting database maintained by the Centers for Medicare and Medicaid Services. Each lab was randomly selected from this list of laboratories and from across the country; therefore, participation from each lab is *crucial* as no lab can be replaced and is critical to the survey's success.

This study is composed of a survey questionnaire, which will be mailed along with a postage-paid envelope to each selected lab. This survey should take about 20 minutes and should be completed by a lab director, the lab manager, or another individual who is most knowledgeable in a laboratory's information exchange capacities. Laboratory Information Specialist or Information Technology staff may also help in completing some questions.

ONC will use these findings to develop a comprehensive understanding of the baseline level of laboratory information exchange. This information will inform program activities and policy efforts to promote laboratory information exchange and provide more targeted assistance to states in developing their laboratory information exchange strategies. Answers are confidential and will be used only in aggregate form in reports issued by ONC. For more information about this **Clinical Laboratories** survey, please contact us toll free at 1-800-975-2754 or [LabSurvey@norc.org](mailto:LabSurvey@norc.org).

Sincerely,

A handwritten signature in black ink, appearing to read "Signature".

Matthew Swain  
ONC Program Analyst



**Proposed Invitation  
Contacts**

**Advance Letter**

[DATE]

[FIRSTNAME] [LASTNAME]

[ADDR1]

[ADDR2]

[CITY], [STATE] [ZIP]

Dear [FIRSTNAME] [LASTNAME],

We are writing to request your participation in the upcoming National Survey on Health Information Exchange in Clinical Laboratories, a survey of clinical laboratories to assess the electronic exchange of key laboratory information across the United States. The Office of the National Coordinator for Health Information Technology (ONC) is conducting this survey in collaboration with NORC at the University of Chicago. This survey is supported by the College of American Pathologists (CAP) and the College of Healthcare Information Management Executives (CHIME).

Your laboratory has been selected to complete a brief survey on its information exchange capacities and activities. The information collected will provide crucial state and national data on the volume of laboratory information exchange occurring electronically, reporting capacity, and other key measures of electronic exchange.

Within the next two weeks, you will receive a packet in the mail that contains the questionnaire. A business reply envelope will be provided for return of the hardcopy questionnaire.

**This survey should be completed by the lab director, the lab manager, or another individual who is most knowledgeable about your laboratory's information exchange capacities. Your Laboratory Information Specialist or Information Technology staff may also help in completing some questions.** If you feel that you are not the best person to complete the survey, please have the individual(s) most familiar with these areas complete the survey.

The survey will take approximately **20 minutes** to complete. Your participation is voluntary and you may skip any question. Your answers are confidential and will be used only in aggregate form in reports issued by ONC. For more information about this survey, please feel free to contact our Lab Survey Help Line toll free at 1-800-975-2754 or email at [LabSurvey@norc.org](mailto:LabSurvey@norc.org). For questions about your rights as a study participant, you may call Kathleen Parks, the NORC IRB Administrator, toll-free at 866-309-0542.

Your responses to the National Survey on Health Information Exchange in Clinical Laboratories are critical to its success. We hope you decide to participate in this important effort.

Sincerely,

A stylized, handwritten signature in black ink that reads "Signature".

Matthew Swain

ONC Program Analyst

**Proposed Invitation  
Contacts**

**First Cover Letter**

[DATE]

[FIRSTNAME] [LASTNAME]  
[ADDR1]  
[ADDR2]  
[CITY], [STATE] [ZIP]

Dear [FIRSTNAME] [LASTNAME],

We are writing to request your participation in the National Survey on Health Information Exchange in Clinical Laboratories, a survey of clinical laboratories to assess the electronic exchange of key laboratory information across the United States. The Office of the National Coordinator for Health Information Technology (ONC) is conducting this survey in collaboration with NORC at the University of Chicago. Your laboratory has been selected to complete a brief survey on its information exchange capacities and activities. The information collected will provide crucial state and national data on the volume of laboratory information exchange occurring electronically, reporting capacity, and other key measures of electronic exchange. This survey is supported by the College of American Pathologists (CAP) and the College of Healthcare Information Management Executives (CHIME).

**This survey should be completed by the lab director, the lab manager, or another individual who is most knowledgeable about your laboratory's information exchange capacities. It is also likely that your Laboratory Information Specialist or Information Technology staff may need to assist in completing some questions.** If you feel that you are not the best person to complete the survey, please have the individual(s) most familiar with these areas complete the survey.

Please use the hardcopy questionnaire included in this mailing to complete the survey. A business reply envelope is also provided for return of the hardcopy questionnaire (no additional postage required). The survey will take approximately **20 minutes** to complete. Your participation is voluntary and you may skip any question. Your answers are confidential and will be used only in aggregate form in reports issued by ONC.

For more information about the purpose and importance of this survey or to receive help filling out the survey form, please feel free to contact our Lab Survey Help Line toll free at 1-800-975-2754 or email at [LabSurvey@norc.org](mailto:LabSurvey@norc.org). For questions about your rights as a study participant, you may call Kathleen Parks, the NORC IRB Administrator, toll-free at 866-309-0542.

Your responses to the National Survey on Health Information Exchange in Clinical Laboratories are critical to its success. We will share a report with you summarizing the results upon completion. We hope you decide to participate in this important effort.

Sincerely,

A stylized, handwritten signature in black ink that reads "Signature".

Matthew Swain  
ONC Program Analyst

**Proposed Invitation  
Contacts**

**Reminder Cover Letter**

[DATE]

[FIRSTNAME] [LASTNAME]  
[ADDR1]  
[ADDR2]  
[CITY], [STATE] [ZIP]

Dear [FIRSTNAME] [LASTNAME],

We are writing to remind you to please participate in the National Survey on Health Information Exchange in Clinical Laboratories, a survey of clinical laboratories to assess the electronic exchange of key laboratory information across the United States. The Office of the National Coordinator for Health Information Technology (ONC) is conducting this survey in collaboration with NORC at the University of Chicago. This survey is supported by the College of American Pathologists (CAP) and the College of Healthcare Information Management Executives (CHIME).

**Your participation in the survey is critical in helping us better understand reporting capacity and the volume of electronic laboratory information exchange occurring in the United States.** If you recently mailed your completed survey, please accept our sincere thanks and ignore this reminder. If you have not yet participated, please know that your responses will contribute vital data on information exchange capacities.

**This survey should be completed by the lab director, the lab manager, or another individual who is most knowledgeable about your laboratory's information exchange capacities. Your Laboratory Information Specialist or Information Technology staff may also help in completing some questions.** If you feel that you are not the best person to complete the survey, please have the individual(s) most familiar with these areas complete the survey.

Please use the hardcopy questionnaire included in this mailing to complete the survey. A business reply envelope is also provided for return of the hardcopy questionnaire (no additional postage required). The survey will take approximately **20 minutes** to complete. Your participation is voluntary and you may skip any question.

For more information about the purpose and importance of this survey or to receive help filling out the survey form, please feel free to contact our Lab Survey Help Line toll free at 1-800-975-2754 or email at [LabSurvey@norc.org](mailto:LabSurvey@norc.org). For questions about your rights as a study participant, you may call Kathleen Parks, the NORC IRB Administrator, toll-free at 866-309-0542.

Your responses to the National Survey on Health Information Exchange in Clinical Laboratories are critical to its success. We hope you decide to participate in this important effort.

Sincerely,

A stylized, handwritten signature in black ink, appearing to read "Matthew Swain".

Matthew Swain  
ONC Program Analyst

**Proposed Invitation  
Contacts**

**Reminder Postcard**

Dear [FIRSTNAME] [LASTNAME],

Recently, we asked for your help with an important national survey. The National Survey on Health Information Exchange in Clinical Laboratories is being conducted on behalf of the Office of the National Coordinator for Health Information Technology (ONC) in collaboration with NORC, a non-profit research organization affiliated with the University of Chicago. This survey is supported by the College of American Pathologists (CAP) and the College of Healthcare Information Management Executives (CHIME).

If you have already mailed back your survey, please accept our sincere thanks. If not, please do so as soon as possible. To receive help filling out the survey form or if you have questions about the purpose of the study, please feel free to contact our Lab Survey Help Line toll free at 1-800-975-2754 or email at [LabSurvey@norc.org](mailto:LabSurvey@norc.org).

Your participation is critical to the success of this study. We hope you will complete this important survey.

Sincerely,

A handwritten signature in cursive script that reads "Signature".

Matthew Swain  
ONC Program Analyst



**Proposed Invitation  
Contacts**

**Final Reminder Cover  
Letter**

[DATE]

[FIRSTNAME] [LASTNAME]  
[ADDR1]  
[ADDR2]  
[CITY], [STATE] [ZIP]

Dear [FIRSTNAME] [LASTNAME],

We are writing to remind you to please participate in the National Survey on Health Information Exchange in Clinical Laboratories, a survey of clinical laboratories to assess the electronic exchange of key laboratory information across the United States. The Office of the National Coordinator for Health Information Technology (ONC) is conducting this survey in collaboration with NORC at the University of Chicago. This survey is supported by the College of American Pathologists (CAP) and the College of Healthcare Information Management Executives (CHIME).

This is a **final reminder** to encourage your participation.

**Your participation in the survey is critical in helping us better understand reporting capacity and the volume of electronic laboratory information exchange occurring in the United States.** If you recently mailed your completed survey, please accept our sincere thanks and ignore this reminder. If you have not yet participated, please know that your responses will contribute vital data on information exchange capacities.

**This survey should be completed by the lab director, the lab manager, or another individual who is most knowledgeable about your laboratory's information exchange capacities. Your Laboratory Information Specialist or Information Technology staff may also help in completing some questions.** If you feel that you are not the best person to complete the survey, please have the individual(s) most familiar with these areas complete the survey.

Please use the hardcopy questionnaire included in this mailing to complete the survey. A business reply envelope is also provided for return of the hardcopy questionnaire (no additional postage required). The survey will take approximately **20 minutes** to complete. Your participation is voluntary and you may skip any question. Your answers are confidential and will be used only in aggregate form in reports issued by ONC.

For more information about the purpose and importance of this survey or to receive help filling out the survey form, please feel free to contact our Lab Survey Help Line toll free at 1-800-975-2754 or email at [LabSurvey@norc.org](mailto:LabSurvey@norc.org). For questions about your rights as a study participant, you may call Kathleen Parks, the NORC IRB Administrator, toll-free at 866-309-0542.

Your responses to the National Survey on Health Information Exchange in Clinical Laboratories are critical to its success. We hope you decide to participate in this important effort.

Sincerely,

A stylized, handwritten signature in black ink, appearing to read "Matthew Swain".

Matthew Swain  
ONC Program Analyst