

2012 National Survey on Health Information Exchange in Clinical Laboratories

If you have questions, please call 1-800-975-2754

Please answer questions in this survey about:

Your Privacy is Protected. All information that would let someone identify you will be kept private. NORC at the University of Chicago will not share your personal information with anyone without your OK. Your responses to this survey are also completely **confidential**. You may notice a number on the cover of the survey. This number is used **only** to let us know if you returned your survey so we don't have to send you reminders.

Your Participation is Voluntary. You may choose to answer this survey or not.

What To Do When You're Done. Once you complete the survey, place it in the envelope that was provided, seal the envelope, and return the envelope to:

National Survey on Health Information Exchange in Clinical Laboratories NORC

1 N STATE ST, FL 16

CHICAGO, IL 60602-9925

If you want to know more about this study, please call toll-free at 1-800-975-2754 or email LabSurvey@norc.org.

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 (0955-0014). 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: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer

DEFINITIONS (Ordered Alphabetically)

Electronic Health Record (EHR)	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.
Electronically	Any computerized exchange typically transmitted over the internet or through a network, using health information technologies such as Electronic Health Record (EHRs) and direct access via a lab portal. Please do not include fax machines.
Health Information Exchange	The electronic movement of health-related information among organizations according to nationally recognized standards.
Health Information Organization	An organization that oversees and governs the exchange of health-related information among organizations according to nationally recognized standards.
HL7 (Health Level 7)	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.
LIMS (Laboratory Information Management System)	A collection of computerized methods to acquire, analyze, store, and report laboratory data.
LIS (Laboratory Information System)	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.
LOINC test names (Logical Observation Identifiers Names and Codes)	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"
Message standards	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.
Ordering practitioners	A physician or, when appropriate, a non-physician practitioner who orders services for the patient.
Personal Health Record (PHR)	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.
Portal	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.
SNOMED CT organism codes (Systematized Nomenclature of Medicine)	A standard terminology that includes standard codes for organisms and other results; for example "Test name: Salmonella Enteridis, SNOMED CT Code:7352500."
Structured format	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).
Tests	A clinical diagnostic laboratory service. Service and test are synonymous.
Test results	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.

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 in hospitals. Some hospitals 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 only2 ☐ More than one state
Q2. Indicate the type of organization that is responsible for establishing policy for overall operation of your hospital. Please select only one.
Government, nonfederal 1
Nongovernment, not-for profit (NFP) 6
Investor-owned, for-profit 8
Government, federal 11 Air Force 12 Army 13 Navy 14 Public Health Service 15 Veteran's Affairs

16 Federal other than 41-45 or 47-48

17 ☐ PHS Indian Service18 ☐ Department of Justice

Q3.	What is your job title?			
	1 Laboratory Director			
	2 ☐ Laboratory Manager3 ☐ Laboratory Information Sy	/stem D	irector	
	4 Medical Laboratory Techn			I
	Laboratory Technician 5	linical l	ahorato	orv
	Scientist	illilicai L	.aboratt	л у
	6 Staff Pathologist			
	 7 ☐ Chief Information Officer 8 ☐ Other (please specify) 			
	9 Don't know			
Q4.	How many full time equivale work only in the hospital lab not include administrative at technology staff who are sha of the hospital or hospital sy 1	oratory nd infor ared wir stem.	? This mation the other	s would n er parts
Ω5	Which option below best des			ne of
QU.	testing your laboratory perfo		tile ty	JC 01
	 1 ☐ Anatomic pathology testing 2 ☐ Clinical pathology testing 3 ☐ Both 	ng 	(Go to	Q7)
Q6.	Does your laboratory performage types of clinical pathology to			ollowing
				Don't
		Yes	No	know
	a. Routine chemistry	1 🔲	2 🔲	3 🔲
	b. Clinical Microbiology (e.g., Virology, immunology)	1 🔲	2 🔲	3 🔲
	c. Hematology	1 🔲	2 🔲	3 🔲
	d. Genetics	1 🔲	2 🔲	3 🔲
	e. Other (please specify)			
				_
		1 🗌	2 🗌	3 🔲

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.

Information System (LIS/LIMS)?
1 ☐ Yes 2 ☐ No → (Go to Q11) 3 ☐ Don't Know → (Go to Q11)
Does your Laboratory Information System (LIS/ LIMS) support multiple laboratories in the hospital system or only your laboratory? By multiple laboratories we mean either a laboratory with multiple physical sites or multiple laboratories located within a single hospital.
 1 Multiple laboratories 2 Only one laboratory 3 Don't Know
What type of Laboratory Information System(s) (LIS/LIMS) does your laboratory currently use? Please select all that apply.
 Commercial system managed by the laboratory Commercial system managed by a third-party vendor
3 ☐ Local or internally developed → (Go to Q11) 4 ☐ Other (please specify) → (Go to Q11)
5 ☐ Don't know → (Go to Q11)
Which vendor(s) supplies your Laboratory Information System(s) (LIS/LIMS)? Please select all that apply.
1

Section 3. Methods Used to Send Test (Lab) Results and Volume of Exchange to Ordering Practitioners

PLEASE REMEMBER TO ONLY RESPOND FOR THE LOCATION TO WHICH THIS SURVEY WAS MAILED.

- Q11. We would like to ask you some questions about test results volume for the calendar year 2012. If you cannot report for the calendar year, please identify the period of time used to report the following test volumes and electronic exchange.
 - 1 ☐ 2012 calendar year
 - 2 Other than calendar year. Please enter the periods this report will cover.

	From									То				
Мо	nth	Di	Day Year Month Day		Yea		Year		ay	Year				
				2	0	1					2	0	1	

Q12. Approximately, how many total test results did your laboratory send to ordering practitioners during 2012? By test results we mean a laboratory test that is (1) ordered by an authorized healthcare provider; (2) performed on received specimens; and (3) finalized and results have been produced. e.g., a Complete Blood Count (CBC), not its component parts, should be counted as a single test result. Please consult your records to answer this question. If records are not available, please provide your best estimate.

1											
	Num	ber	of to	tal te	est re	sult	s —	→	(Go	to Q	13)
		□F	rom	Reco	ords						
		□E	stima	ates							
2		on't	Kno	w –	→	(Go	to C	Q12a) –		
	$\overline{}$								_		

Q12a. F at includes the

	ease select the range that imber of <u>total</u> test results
1	□0
2	☐ 1 to 9,999
3	☐ 10,000 to 19,999
4	☐ 20,000 to 29,999
5	☐ 30,000 to 39,999
6	☐ 40,000 to 49,999
7	☐ 50,000 to 59,999
8	☐ 60,000 to 69,999
9	☐ 70,000 to 79,999
10	☐ 80,000 to 89,999
11	☐ 90,000 to 99,999
12	☐ 100,000 to 249,999
13	☐ 250,000 to 999,999
14	☐ 1 million to 1.99 million
15	☐ 2.0 million to 2.99 million
16	☐ 3.0 million to 4.99 million

17 ☐ 5.0+ million

ing any	of the	Q15. Is your laboratory currently capable of sending test results <u>electronically in a structured format</u> (that is, using the HL7 messaging standard and	
Yes	No	Don't know	a vocabulary standard such as LOINC) to an ordering practitioner's Electronic Health Record (EHR)?
1 🔲	2 🔲	з 🔲	1 ☐ Yes → (Go to Q15a)
			2 ☐ No → (Go to Q18) 3 ☐ Don't Know → (Go to Q18) V Q15a. Does your capability of sending test results electronically in a structured format extend
1 🔲	2 🔲	3 🔲	to practitioners not part of your hospital or hospital system?
1 🗌	2 🔲	3 🔲	1 ☐ Yes 2 ☐ No
1 🗆	2 🔲	з 🔲	Q16. Did your laboratory send test results electronically in a structured format during 2012 to an ordering practitioner's Electronic Health Record (EHR)?
			1 ☐ Yes → (Go to Q17) 2 ☐ No → (Go to Q18) 3 ☐ Don't Know → (Go to Q18)
ed in 20	012 for		Q17. Approximately, how many test results did your laboratory send <u>electronically in a structured</u>
Yes	No	Don't know	format during 2012 to ordering practitioners using Electronic Health Records (EHRs)? Please consult your records to answer this question. If records are
1 🔲	2 🔲	3 🔲	not available, please provide your best estimate.
1 🔲	2 🔲	3 🔲	Number of test results (Go to Q18)
1 🔲	2 🔲	3 🔲	☐ From Records ☐ Estimates
1 🔲	2 🔲	3 🔲	 2 ☐ Don't Know → (Go to Q17a) ☐ Q17a. Please select the range that includes the
1 🔲	2 🔲	3 🔲	number of total test results. 1 □ 0
			2
	ting any answer a Yes 1	ring any of the answer a-d. Yes No 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 1 2 1 1 2 1 1 1 2 1 1 1 1 2 1 1 1 1 1 2 1	Yes No Don't know 1

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.

<u> </u>	u	stated format is the primary chamerige your
la	bo	ratory 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 formations.
5		Subscription rates/fees for exchange service providers (including lab hub, third party middleware vendor, and Health Information Exchange providers) are too high

6 Compliance with Clinical Lab Improvement Amendments (CLIA) regulations

8 No challenges experienced in delivering structured

7 Other (please specify)

laboratory results

9 Don't know

Q21.	<u>la</u> te pı la	boı stı rac	ch one of the following issues concerning ratory interfaces for electronic delivery of results in a structured format to ordering titioners is the primary challenge your ratory is currently facing? Please select one
	2		The time required to build interfaces The costs associated with building interfaces Lack of harmonization of industry accepted standards
	5		Lack of specific implementation guides Lack of trained staff (human capital) needed to implement the interfaces Other (please specify)
	7		No challenges experienced in developing laboratory interfaces for delivery of laboratory results Don't know
	W ac de	hic lop	h of the following issues concerning tion of LOINC codes for sending results best ribes the current situation in your laboratory? se 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
	5		maintain LOINC mappings over time 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
			LOINC is not robust enough to support local code
			EHRs do not have the ability to accept LOINC codes
			Other (please specify) No issues experienced in using LOINC codes to
			send laboratory reports 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) limplementation guide for electronic laboratory results to ambulatory Elfor Meaningful Use Stage 2. For mo about the S&I Framework initiatives initiative, visit http://wiki.siframewo+Interface+(LRI)+Initiative	nitiativ subm IRs. LF re info s, inclu	ission RI is rec rmation ding th	an of quired n e <u>LRI</u>
Q23. Has your laboratory implement for laboratory result content and 1 Yes 2 No 3 Don't know			uide
Q24. Does your laboratory allow parepresentatives direct access results?			
 1 □ No → (Go to Q25) 2 □ It is not legal in my state to sdirectly to patients (Go to Q 3 □ Yes → (Go to Q24a) 4 □ Don't Know 		boratory	results
Q24a. If YES, please indicate we following methods of de laboratory uses to delive patients or patients' lega	elivery er resu	your Ilts dire	ectly to
	ai repri	esentat	ives.
	Yes	esentat No	Don't know
a. Mail and/or Fax	-		Don't
b. Web portal solution provided by laboratory	Yes	No	Don't know
b. Web portal solution provided by laboratoryc. Transmission of results to a designated Personal Health Record (PHR)	Yes	No 2 □	Don't know
b. Web portal solution provided by laboratoryc. Transmission of results to a designated Personal Health	Yes 1	No 2 2	Don't know 3 3
 b. Web portal solution provided by laboratory c. Transmission of results to a designated Personal Health Record (PHR) d. Through a community Health Information Organization that provides patient access to 	Yes 1	No 2	Don't know 3 3 3 3
 b. Web portal solution provided by laboratory c. Transmission of results to a designated Personal Health Record (PHR) d. Through a community Health Information Organization that provides patient access to information e. Through a physician's EHR that provides patients 	Yes 1	No 2	Don't know 3

Q26	. Please provide a contact email address and phone number for the person who completed this survey.
	EMAIL ADDRESS 1
	EMAIL ADDRESS 2
	PHONE NUMBER 1
	PHONE NUMBER 2
	THORE NOMBER 2
	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:

National Survey on Health Information Exchange in Clinical Laboratories NORC 1 N STATE ST, FL 16

Chicago, IL 60602-9925

If you prefer, you may:

Fax your completed questionnaire to: 877-504-6296 or e-mail it to LabSurvey@norc.org.

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

If you want to know more about this study, please call toll-free at 1-800-975-2754 or email LabSurvey@norc.org.

VERSION A (HOSPITALS)