ATTACHMENT F

Observation Form

Observer (initials):

Study site #:

Day of observation: Beginning time: Ending time:

Please note the start time and end time of each instant where you observe patient-reported information being used by the clinician or office staff (PERSON, e.g., physician), what task is performed (TASK, e.g., reading an e-mail sent by a patient), the technology used (TECHNOLOGY, e.g., e-mail, and then the text is copied and pasted into the EHR), the environment (ENVIRONMENT, e.g., physician’s office), and remarks about the organization (ORGANIZATION).

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| --- | --- | --- | --- | --- | --- |
| **TIME** | **PERSON** | **TASKS** | **TECHNOLOGIES** | **ENVIRONMENT** | **ORGANIZATION** |
|  |  |  |  |  |  |