Oncology Nursing Perceptions of Patient Electronic Portal Use: A Qualitative Analysis

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Purpose/Objectives: To identify nursing staff reactions to and perceptions of electronic portal use in a cancer setting.

Research Approach: Qualitative.

Setting: Outpatient clinic at the Harold C. Simmons Comprehensive Cancer Center of the University of Texas Southwestern Medical Center in Dallas.

Participants: 13 nurses with a range of credentials and experience, representing infusion, medical oncology, and bone marrow transplantation clinics.

Methodologic Approach: Two focus groups were conducted. Theoretical thematic content analysis of data was performed.

Findings: Key themes that emerged for consideration of electronic portals included work volume and flow, patient expectations and safety, variation in use of communication technologies, and education and management.

Interpretation: The current study provides insight into the implications of electronic portals by identifying nursing staff reactions to this technology. These reactions are predominantly related to the impact on clinical workload and patient safety and expectations.

Implications for Nursing: As clinical cancer facilities incorporate electronic portal technology into their operations, attention to the impact on staff workload, division of labor, patient safety, and patient expectations should be considered.

The electronic health record (EHR) is widely implemented in clinical practices (Fernald, Wearner, & Dickinson, 2013; Jain, Seidman, & Blumenthal, 2010; Krist et al., 2014). Bolstered by government prioritization and support, the EHR has seen uptake in primary care and specialty practices, emergency departments, and inpatient facilities (Office of the National Coordinator for Health Information Technology, 2010). Within the EHR, electronic portals have been designed to enhance the timeliness, efficiency, transparency, and patient-centeredness of care (Feeley & Shine, 2011). Electronic portals provide patients with real-time access to their personal patient health records (PHRs) and communication with healthcare providers (Fisher, Bhavnani, & Winfield, 2009). Patients who opt to use the electronic portal may view upcoming appointments; personal health information, such as allergies, medications, social history, family history, and medical history; and laboratory and radiology results. In addition, portals may allow patients to communicate electronically with clinic staff members and medical providers (Hassol et al., 2004; Ralston, Coleman, Reid, Handley, & Larson, 2010). Such communication can include making appointment and medication refill requests, asking clinical questions, and reporting symptom development or changes.