PULSE ON INFORMATION TECHNOLOGY

Data from the National Physician Survey (NPS) 2004 indicate that 71% of Canadian physicians have access to the Internet at their main patient care setting. Overall, 65% of GP/FPs are able to access the Internet at their main patient care setting, compared to 78% of specialists. Male physicians are slightly more likely to have Internet access in their main patient care setting than are their female colleagues (76% versus 70%).

Availability of Internet access at work is highest among physicians under age 35, and decreases across age ranges, to 61% among physicians age 65 and older. Differences in the availability of Internet access in the main patient care setting are most apparent when comparing those in office-based locations (60%) to those in hospital-based settings (87%). Physicians working in hospital settings are, at 72%, much more likely than physicians working out of offices (41%) to have high-speed Internet access.

A number of health information technology aids may be available to physicians in their main patient care settings, such as online access to journals, CPGs and medical databases which, at 58%, is the most widely-available type of health information technology (**Chart 1**). Forty-three percent of physicians have access to electronic patient appointment tracking systems, and 34% have access to online CME/CPD courses at their main patient care setting. Electronic patient health records are available in the main patient care setting to 26% of Canadian physicians, while electronic decision aids and electronic warning systems for adverse prescribing or drug interaction are available to 12% of physicians in their main patient care setting.

Just as the location of the main patient care setting has an impact on the availability of Internet access, it can also have an impact on the type of health information technology available to physicians. Twice as many hospital-based physicians have electronic patient health records (38% versus 19%), and hospital-based physicians are also much more likely to have an electronic interface to external laboratory/diagnostic imaging services (42% compared to 22%). More than three-quarters (77%) of physicians in hospital settings have online access to journals, CPGs, and medical databases, compared to less than one-half (45%) of office-based physicians.

Although there are notable differences in the availability of health information technology based on the location of the main patient care setting, these differences diminish when we examine the uptake of the technology when it is available. For example, 78% of all physicians who have access to electronic patient health records make use of them, with hospital-based physicians only slightly more likely to do so, at 80%, compared to 76% of office-based physicians (**Chart 2**). Similarly, 80% of hospital-based physicians use an electronic interface to external laboratory/diagnostic imaging services if available, compared to 76% of office-based physicians.

The NPS also asked physicians to indicate which types of health information technology they had on a personal digital assistant (PDA); warning systems for adverse prescribing or drug interactions, and telemedicine/webcasting/videoconferencing are the most likely to be found on PDAs, at 7.6% each. Three percent of Canadian physicians have online access to journals, CPGs, and medical databases on their PDAs, and less than 1% have electronic decision aids on a PDA. Although younger physicians tend to be more likely to have various types of health information technology on a PDA, there is also some penetration among older physicians. For example, electronic warning systems for adverse drug reactions can be found on the PDAs of 15% of physicians under age 35 and 9% of those age 35 to 44, while 6% of physicians aged 55-64 also use such systems on their PDAs.

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