

The effect of providing patients with access to their electronic health record is unclear

Ammenwerth E, Neyer S, Hörbst A, Mueller G, Siebert U, Schnell-Inderst P. [Adult patient access to electronic health records](#). Cochrane Database of Systematic Reviews. 2021;(2):Art. No.: CD012707. DOI: 10.1002/14651858.CD012707.pub2.

What is the context of this review?

- Healthcare organisations increasingly offer patients access to data stored in the institutional electronic health records.
- Electronic health records (EHRs) are used by healthcare professionals to access all health-related information for a patient's care.
- Patient access to EHRs could improve patient-centred care, and also encourage patients to take part in decisions about their own health and care.

What question is being addressed?

- What are the effects of providing adult patients with access to EHRs?

How was the review done?

- The authors conducted searches in several databases in June 2017 and April 2020.
- A total of 6,966 studies were found in initial searches, but only 10 studies were included after assessing their eligibility.
- Studies examined patient access to EHRs, and some EHRs included additional functionalities (for example, health-related reminders, secure messaging, and general educational health information).
- The review was partly funded by the Tyrolean Research Agency.

How up to date is this review?

- The review included studies published up to April 2020.

Box 1: Coverage of OHT building blocks

This review addresses [OHT building blocks #4 and #5](#):

- 1) defined patient population
- 2) in-scope services
- 3) patient partnership and community engagement
- 4) patient care and experience (domain 19 – digital access to health information)**
- 5) digital health (domain 35 – electronic health record)**
- 6) leadership, accountability and governance
- 7) funding and incentive structure
- 8) performance measurement, quality improvement, and continuous learning

What are the main results of the review?

- Compared with usual care, it is unclear whether access to EHRs affected:
 - patients' knowledge and understanding of diabetes and of blood glucose testing; or
 - how often patients communicated with their healthcare provider.
- Compared with usual care, access to EHRs may make little to no difference in:
 - patients feeling empowered or satisfied with their care; or
 - how many patients died or reported serious unwanted effects.
- A few studies suggest that access to EHRs slightly helped monitoring for risk factors, but other studies have not seen improvement in patients continuing to take their medications.
- Accessing EHRs may not have affected how often patients used healthcare services.
- No studies reported any unwanted effects on whether access to EHRs may have affected patients' anxiety, worry, or depression.

How confident are we in the results?

- This is a recent and high-quality systematic review with an AMSTAR score of 10/10.
- The authors are not confident in the results due to the very small number of studies found, and the overall quality of the evidence was rated very low to low.
- There is a need for more robust studies on adult patient access to EHRs, and these studies should consider modern, up-to-date technology (such as access to EHRs via mobile devices).

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