

The Role of Health Information Technology in Pharmacy and Administrative Functionality

Salem Saleh Salem Alzulayq¹, Fahad Abdullah Al Alhareth²,

Ali Hamad Hadi

Almuhamidh³, Hamad Saleh Alkulayb⁴, Saleh Falah Saleh

Zubayd⁵, Salem Ali

Harmal Bani Salman⁶, Hassan Hamad Ali Almansour⁷, Jamal

Ali Bin Salem Al

Kulayb⁸, Muhanna Ali Saleh Al Mansour⁹, Salem Ali

Mohammad Al Rayshan¹⁰, Hamad Nasser Ali Alshaman¹¹

1. Clinical Pharmacy, King Khalid Hospital, Najran, Saudi Arabia
2. Pharmacist, King Khalid Hospital, Najran, Saudi Arabia
3. Pharmacy Technician, Khabbash General Hospital, Najran, Saudi Arabia
4. Pharmacy Technician, Khabbash General Hospital, Najran, Saudi Arabia
5. Pharmacy Technician, King Khalid Hospital, Najran, Saudi Arabia
6. Health Services Administration Department, Abasoud Health Center, Najran, Saudi Arabia
7. Health Services And Hospitals Management, New Najran General Hospital, Najran, Saudi Arabia
8. Health Security, Khabash Hospital, Najran, Saudi Arabia
9. Health Information Technician, Rajla Primary Health Care Center, Najran, Saudi Arabia
10. Health Informatics Technician, Rjala Health Center, Najran, Saudi Arabia
11. Emergency Medical Services, Dhahran Aljanoub General Hospital, Aseer, Saudi Arabia

ABSTRACT

Health Information Technology (HIT) plays a crucial role in enhancing pharmacy operations and administrative functionality within healthcare systems. By integrating advanced electronic health record (EHR) systems, pharmacies can effectively manage patient prescriptions, track drug interactions, and streamline inventory management. HIT facilitates real-time access to patient data, enabling pharmacists to provide personalized medication therapy management. Moreover, automated systems reduce the risk of errors associated with manual entry, improve communication between healthcare providers, and enhance the overall quality of patient care. The adoption of telepharmacy solutions further extends pharmacy services to rural and underserved populations, reinforcing the importance of

Salem Saleh Salem Alzulayq, Fahad Abdullah Al Alhareeth, Ali Hamad Hadi Almuhamidh, Hamad Saleh Alkulayb, Saleh Falah Saleh Zubayd, Salem Ali Harmal Bani Salman, Hassan Hamad Ali Almansour, Jamal Ali Bin Salem Al Kulayb, Muhamna Ali Saleh Al Mansour, Salem Ali Mohammad Al Rayshan, Hamad Nasser Ali Alshaman

accessible healthcare. From an administrative perspective, HIT enhances operational efficiency through improved data management and reporting capabilities. Pharmacy management systems enable effective tracking of workflows, personnel performance, and regulatory compliance, which are essential for meeting industry standards and optimizing resource allocation. Decision support tools within HIT assist pharmacy administrators in making informed choices regarding medication formulary management and cost reduction strategies. Additionally, data analytics enable pharmacies to identify trends in medication use and patient outcomes, thereby facilitating continuous improvement in practices. Overall, the integration of HIT in pharmacy and administrative functions not only streamlines operations but also contributes to better healthcare delivery.

KEYWORDS: Health Information Technology, pharmacy operations, electronic health records, prescription management, inventory management, medication therapy, telepharmacy, operational efficiency, data management, decision support tools, medication formulary, data analytics.

1. Introduction

In today's rapidly evolving healthcare landscape, the integration of Health Information Technology (HIT) has emerged as a transformative force, particularly within pharmacies and administrative functions. HIT encompasses a variety of electronic systems and tools that facilitate the management, exchange, and utilization of health information. From electronic health records (EHRs) to pharmacy management systems, these technologies play a critical role in enhancing the efficacy, safety, and efficiency of pharmaceutical services and administrative operations. As healthcare complexity continues to grow, understanding the synergistic relationship between HIT, pharmacy, and administrative functionality becomes imperative for both practitioners and policymakers [1].

The evolving demand for pharmaceuticals, combined with an increasing emphasis on patient safety, has necessitated innovations that optimize drug management processes. Pharmacies, whether community-based or hospital-affiliated, face the dual challenge of delivering high-quality care while managing operational costs. HIT provides a framework for streamlining pharmacy workflows, reducing medication errors, and improving patient outcomes. For instance, computerized physician order entry (CPOE) systems allow healthcare providers to electronically submit medication orders, minimizing the risks associated with handwritten prescriptions and enhancing communication between prescribers and pharmacists [2].

Moreover, the role of HIT extends beyond the pharmacy itself; it influences various administrative functionalities within the healthcare system. Administrative tasks, including scheduling, billing, and regulatory compliance, can be cumbersome and susceptible to human error without robust technological interventions. The implementation of electronic administrative systems, such as practice management software, not only aids in optimizing resource allocation but also facilitates timely and accurate reporting necessary for regulatory adherence. Thus, HIT fosters a more

The Role of Health Information Technology in Pharmacy and Administrative Functionality cohesive and integrated approach to healthcare delivery by aligning pharmacy operations with broader organizational goals [3].

Additionally, the use of HIT in pharmacy and administrative functions supports enhanced data analytics and reporting capabilities. By harnessing large datasets, healthcare organizations can glean insights into prescription patterns, patient outcomes, and operational efficiencies, enabling them to make informed strategic decisions. This data-driven approach is invaluable for identifying areas for improvement, managing medication therapy, and ultimately optimizing patient care. Furthermore, as value-based care models continue to proliferate, the ability to track and analyze health outcomes becomes essential for demonstrating the effectiveness of pharmaceutical interventions [4].

The regulatory landscape presents both challenges and opportunities for HIT integration in pharmacies and administrative roles. Government initiatives, such as the Health Information Technology for Economic and Clinical Health (HITECH) Act, have incentivized the adoption of EHRs and HIT solutions among healthcare providers, including pharmacies. However, compliance with regulations and ensuring interoperability among various systems remain persistent obstacles. It is essential to address these challenges to maximize the potential benefits of HIT, particularly in enhancing communication and collaboration among healthcare providers, pharmacist-led patient care, and administrative efficiency [5].

Furthermore, the COVID-19 pandemic has underscored the urgency for rapid advancements in HIT within the pharmacy sector and administrative functions. Telepharmacy, for example, has gained traction, enabling pharmacists to provide pharmaceutical care remotely, thereby expanding access to vital services during critical times. The need for a secure, streamlined communication platform among pharmacy teams, prescribers, and patients has never been more critical. As healthcare progressively shifts towards a more digital framework, the potential of telecommunication technologies to enhance patient-provider interactions while alleviating administrative burdens is becoming increasingly apparent [6].

Integration of Electronic Health Records in Pharmacy Practice:

The integration of Electronic Health Records (EHR) in pharmacy practice has emerged as a transformative force within the healthcare landscape. This evolution not only enhances the efficiency and accuracy of pharmacy operations but also promotes better patient outcomes through improved medication management and collaborative care. The transition from traditional paper-based systems to electronic records signifies a pivotal shift in the way pharmacists interact with prescribers, patients, and other healthcare professionals [7].

Electronic Health Records are digital versions of patients' paper charts, offering a comprehensive and real-time view of patient information accessible to authorized users. EHRs are designed to streamline the documentation and management of patient care, encompassing various elements such as medical history, medications, allergies, immunizations, laboratory results, and radiology images. The integration of EHR systems into pharmacy practice allows pharmacists to access and update vital patient information swiftly, leading to enhanced clinical decision-making [8].

The significance of EHR integration in pharmacy practice can be observed through multiple lenses. Firstly, it addresses the need for accurate, up-to-date patient information, allowing pharmacists to apply their clinical knowledge effectively. Having a centralized repository of patient data enables pharmacists to conduct thorough medication reviews, assess potential drug interactions, and identify therapeutic duplications. This comprehensive understanding fosters a more personalized approach to patient care, as pharmacists can tap into the complete medical history and current medications of the patients [9].

Secondly, EHR integration enhances the communication between pharmacists and other healthcare providers. Traditionally, the flow of information among prescribers, pharmacists, and patients has been fragmented, complicating the medication management process. EHR systems enable real-time data sharing, reducing the risk of errors caused by miscommunication. For instance, when a physician prescribes a medication, the pharmacist can immediately verify its appropriateness against the patient's EHR, allowing for prompt interventions if necessary [9]. Improved communication not only helps in minimizing medication errors but also strengthens interprofessional collaboration, thereby contributing to a more robust healthcare team [9].

Benefits of EHR Integration in Pharmacy Practice

The integration of EHRs within pharmacy practice offers a multitude of benefits:

1. Improved Medication Safety: One of the primary advantages of EHR integration is the enhancement of medication safety. By having direct access to patient medication histories and allergies, pharmacists can prevent adverse drug reactions and ensure that all prescribed drugs fit within the patient's overall treatment plan [10].
2. Enhanced Patient Outcomes: With pharmacists playing an increasingly vital role in patient care, EHR systems allow for improved monitoring of medication adherence and therapeutic outcomes. Pharmacists can follow up on patients' medication regimens, assess their adherence, and intervene whenever necessary [10].
3. Streamlined Workflow: The digitization of patient records simplifies administrative tasks for pharmacy staff. Prescription processing times are reduced when pharmacists can access patient information quickly, allowing for more efficient service delivery. This streamlining of workflows not only enhances staff productivity but also leads to better customer satisfaction.
4. Data Analytics and Reporting: EHRs enable pharmacists to leverage data analytics for quality improvement initiatives. Automated reports can track medication utilization patterns, adherence trends, and clinical outcomes, providing valuable insights that pharmacy teams can utilize to enhance their services [11].
5. Regulatory Compliance: The integration of EHR systems assists pharmacies in adhering to regulatory requirements concerning documentation and reporting. With electronic systems, pharmacists can easily access and retrieve records needed for audits, quality assessments, or compliance reviews [11].

The Role of Health Information Technology in Pharmacy and Administrative Functionality Challenges in EHR Integration

Despite the many benefits, integrating EHRs into pharmacy practice is not without its challenges. One of the primary hurdles is the initial cost associated with transitioning to an electronic system. Many independent pharmacies and smaller operations may struggle with the financial burdens of implementing and maintaining EHR software [12].

Additionally, there is a steep learning curve associated with new technologies. Pharmacists and staff require proper training to navigate the EHR systems effectively, which can take time and lead to temporary disruptions in workflow. Resistance to change, particularly from staff accustomed to traditional practices, can further complicate the transition process.

Another significant challenge is data interoperability. Many EHR systems are not designed to work seamlessly with one another, leading to difficulties in accessing and sharing information across different platforms. This lack of interoperability can hinder the goal of achieving a fully integrated healthcare ecosystem characterized by cohesive communication and data sharing [12].

Looking ahead, the integration of EHRs in pharmacy practice promises to continue evolving. As technology advances, the focus will increasingly shift towards enhancing usability and interoperability among various health information systems. The development of standardized protocols for data exchange will be crucial in promoting seamless communication between pharmacists, prescribers, and other healthcare providers [13].

Furthermore, the integration of artificial intelligence and machine learning into EHR systems is poised to revolutionize patient care. Innovative algorithms can analyze patient data, predict potential medication-related issues, and suggest evidence-based interventions for pharmacists. This technological evolution will empower pharmacists to engage proactively in medication therapy management, ultimately elevating the quality of care [13].

Additionally, as the healthcare industry increasingly adopts value-based care models, pharmacists will play a crucial role in contributing to population health management. EHR systems can facilitate data collection and analysis on a larger scale, enabling pharmacists to engage in initiatives aimed at improving overall health outcomes for their patient populations [14].

Enhancing Medication Management through HIT Solutions:

The management of medications is a critical component of patient care, directly influencing treatment outcomes, patient safety, and overall healthcare costs. As the complexity of medication regimens increases, driven by the rise of chronic diseases and polypharmacy, the need for effective medication management systems becomes more pronounced. Health Information Technology (HIT) solutions offer innovative pathways to address these challenges, paving the way for improved medication management in clinical practice [15].

Understanding the Landscape of Medication Management

Medication management involves a systematic approach to prescribing, dispensing, and administering medications to ensure optimal therapeutic outcomes. This encompasses various activities, including medication reconciliation, adherence monitoring, patient education, and management of potential drug interactions. Effective medication management is essential in mitigating risks associated with medication errors, which are estimated to affect millions of patients annually, often resulting in hospitalizations or even fatalities [15].

The growing prevalence of chronic conditions, such as diabetes, hypertension, and mental health disorders, necessitates the management of multiple medications concurrently. This reality often leads to complications like medication adherence challenges, increased potential for drug interactions, and heightened healthcare costs.

As healthcare systems grapple with these issues, effective solutions that streamline and enhance medication management are required [16].

The Role of Health Information Technology (HIT)

Health Information Technology encompasses a spectrum of digital tools and systems designed to facilitate the collection, storage, analysis, and sharing of health-related data. In the realm of medication management, HIT can significantly enhance processes along various stages, including prescribing, dispensing, administration, and monitoring [17].

1. Electronic Health Records (EHRs): EHR systems serve as comprehensive repositories for patient health information, integrating medication records into an accessible format for healthcare providers. By consolidating medication histories, EHRs enable clinicians to make informed prescribing decisions, minimizing the risks of drug-drug interactions and allergies. Additionally, automated alerts can notify providers of potential issues before they prescribe [18].
2. Computerized Physician Order Entry (CPOE): CPOE systems allow physicians to enter medication orders directly into an electronic platform, reducing the risk of transcription errors associated with handwritten prescriptions. These systems often include clinical decision support tools that facilitate adherence to best practices and guideline recommendations, thus enhancing patient safety and care quality [19].
3. Medication Management Applications: Emerging HIT solutions, such as mobile and web-based applications, empower patients to manage their medications actively. These apps can send reminders for medication intake, facilitate tracking of dosages, and provide educational resources on potential side effects and interactions. By involving patients in their medication management, these tools promote adherence and vigilance in monitoring their health status [19].
4. Telehealth Solutions: The integration of telehealth technologies into medication management allows for remote consultations and monitoring, particularly advantageous for patients in rural or underserved areas. Through virtual appointments, healthcare providers can evaluate medication effectiveness, make necessary adjustments, and provide ongoing support, fostering a continuous care model [20].

5. Pharmacogenomics and HIT: Personalized medicine is emerging as a vital aspect of medication management. Pharmacogenomic testing, which assesses how genetics affects individual responses to drugs, can be integrated into HIT systems. This integration ensures that clinicians select the most effective medication based on a patient's genetic makeup, thereby minimizing adverse drug reactions and optimizing therapeutic outcomes [20].

Enhancing Care Coordination

Interdisciplinary collaboration is fundamental to effective medication management. HIT solutions facilitate improved communication among healthcare providers, pharmacists, and patients, leading to better care coordination. For instance, EHRs equipped with secure messaging features enable immediate communication between prescribers and pharmacists, enhancing the prescription verification process.

Furthermore, shared access to medication records ensures that all relevant parties are informed about patient medication regimens, allowing for more cohesive care strategies [21].

Additionally, population health management platforms leverage data analytics to identify trends in medication adherence and utilization across diverse populations. By analyzing this data, healthcare organizations can implement targeted interventions to address specific areas of concern, such as medication misuse in high-risk communities or populations [22].

Challenges and Considerations

Despite the clear benefits of implementing HIT solutions in medication management, certain challenges must be navigated. One significant hurdle lies in ensuring interoperability among disparate EHR systems. The lack of standardized data formats and communication protocols can hinder seamless information exchange, undermining the effectiveness of integrated medication management approaches [23].

Moreover, the usability of HIT systems plays a crucial role in their adoption by healthcare providers and patients alike. Systems that are overly complex or not tailored to the needs of users may lead to frustration and decreased utilization. Thus, usability testing and user feedback are essential components in the design and implementation of HIT solutions [24].

Furthermore, concerns regarding data privacy and security are paramount in healthcare. Given the sensitive nature of health information, it is vital to prioritize robust security measures to protect patient data from breaches and unauthorized access, ensuring compliance with regulations such as the Health Insurance Portability and Accountability Act (HIPAA) [25].

Telepharmacy: Expanding Access and Improving Patient Care:

In recent years, the healthcare landscape has undergone significant transformation, driven largely by advancements in technology and the growing demand for accessible, patient-centered care. Among these innovations, telepharmacy has emerged as a powerful tool, leveraging digital communication and telehealth platforms to increase access to pharmaceutical services, improve patient adherence to medication regimens,

Salem Saleh Salem Alzulayq, Fahad Abdullah Al Alhareth, Ali Hamad Hadi Almuhamidh, Hamad Saleh Alkulayb, Saleh Falah Saleh Zubayd, Salem Ali Harmal Bani Salman, Hassan Hamad Ali Almansour, Jamal Ali Bin Salem Al Kulayb, Muhamna Ali Saleh Al Mansour, Salem Ali Mohammad Al Rayshan, Hamad Nasser Ali Alshaman

and enhance overall health outcomes. It is crucial to understand the concept of telepharmacy, its benefits, challenges, and its role in expanding access and improving patient care [26].

Telepharmacy refers to the provision of pharmaceutical care via telecommunications technology. This practice enables pharmacists to conduct consultations, provide medication therapy management (MTM), monitor patient adherence, and offer counseling remotely. By utilizing platforms like video conferencing, secure messaging, and mobile applications, pharmacists can reach patients who may not have the means to visit a physical pharmacy, whether due to geographic barriers, mobility issues, or time constraints [27].

Importantly, telepharmacy is not a replacement for traditional pharmacy services; rather, it serves as an adjunct, offering an alternative for patients who may benefit from additional support. Telepharmacy is governed by specific legal frameworks that can vary by location, addressing the licensure of pharmacists and the regulation of remote prescriptions. The evolution of telepharmacy has been notably accelerated by the COVID-19 pandemic, which necessitated the rapid adaptation of health services to meet the changing demands of patients [28].

One of the most significant advantages of telepharmacy is its ability to expand access to pharmaceutical care, particularly for underserved populations. Rural and remote communities often experience a shortage of healthcare providers, including pharmacists. In these settings, telepharmacy can bridge the gap, providing essential services to patients who may otherwise have limited access to qualified pharmaceutical care [29].

Moreover, telepharmacy can facilitate medication delivery services, ensuring that medications reach patients in a timely manner. By reducing the necessity for patients to travel long distances to pick up prescriptions, telepharmacy helps to mitigate logistical challenges, enabling individuals to adhere to their treatment plans more effectively. In cases where patients experience geographical isolation, this model can be particularly vital in ensuring consistent access to necessary medications, thereby improving adherence and health outcomes.

Another critical component of telepharmacy is its potential to enhance patient engagement and education. Through remote consultations, pharmacists can provide individualized counseling, ensuring that patients understand their medications, potential side effects, and the importance of adherence. This educational component can significantly empower patients, fostering a sense of ownership over their health care [30].

Additionally, telepharmacy provides a platform for pharmacists to conduct followups and monitor patients' progress. Enhanced communication channels allow pharmacists to reach out to patients to check on their medication regimens, assess side effects, and address any concerns they may have. This ongoing support is crucial for chronic disease management, as it can contribute to a stronger therapeutic alliance between the patient and the pharmacist, ultimately leading to better health outcomes [31].

Medication Therapy Management (MTM) is an essential service provided by pharmacists that plays a pivotal role in ensuring medication safety, efficacy, and adherence. Telepharmacy facilitates MTM by allowing pharmacists to conduct comprehensive medication reviews with patients remotely. During these sessions, pharmacists can assess potential drug interactions, evaluate the appropriateness of current therapies, and recommend adjustments as necessary [32].

Through telepharmacy, pharmacists can provide personalized medication plans tailored to the specific needs of each patient. Such targeted interventions can help to prevent medication-related problems, reduce healthcare costs associated with adverse drug events, and promote overall patient safety. By combining the analytical skills of pharmacists with technology, telepharmacy enhances the capacity for proactive medication management [33].

Despite its numerous advantages, telepharmacy is not without challenges. Technical issues such as poor internet connectivity can hinder effective communication between pharmacists and patients, particularly in rural areas. Additionally, patients who are not technologically savvy may struggle to navigate telehealth platforms, limiting their ability to access remote pharmacy services. Addressing these barriers will require ongoing investment in technology infrastructure and training for both patients and healthcare providers [34].

Furthermore, there are regulatory and legal hurdles that telepharmacy must navigate. Each state or country may have different laws governing the practice, which can complicate telepharmacy operations, particularly for pharmacists who wish to provide services across state or national lines. Ensuring compliance with privacy laws and patient confidentiality is also paramount, as pharmacists must safeguard sensitive information while utilizing digital communication tools.

Looking forward, the potential of telepharmacy is vast. As healthcare continues to trend toward patient-centered care, telepharmacy is likely to play an increasingly important role in enhancing accessibility, promoting health literacy, and improving patient outcomes. Integrating telepharmacy with broader telehealth initiatives can create cohesive healthcare ecosystems that prioritize seamless communication among various healthcare providers [35].

Moreover, advances in technology such as artificial intelligence (AI) and machine learning could lead to enhanced drug interaction screening, predictive analytics for medication adherence, and personalized treatment plans. These technologies would not only augment the capabilities of pharmacists but also improve the efficiency of telepharmacy services [36].

Operational Efficiency: Streamlining Pharmacy Administration:

In the ever-evolving landscape of healthcare, operational efficiency has emerged as a pivotal factor in enhancing the quality of patient care while simultaneously reducing costs. Pharmacy administration, as a critical component of healthcare delivery, faces unique challenges that necessitate a comprehensive approach to streamline its operations [37].

Salem Saleh Salem Alzulayq, Fahad Abdullah Al Alhareth, Ali Hamad Hadi Almuhamidh, Hamad Saleh Alkulayb, Saleh Falah Saleh Zubayd, Salem Ali Harmal Bani Salman, Hassan Hamad Ali Almansour, Jamal Ali Bin Salem Al Kulayb, Muhamna Ali Saleh Al Mansour, Salem Ali Mohammad Al Rayshan, Hamad Nasser Ali Alshaman

Operational efficiency in pharmacy administration refers to the capability of an organization to deliver pharmaceutical services effectively and economically. It encompasses various aspects, including the management of pharmacy workflows, inventory control, staff utilization, and adherence to regulatory compliance. A pharmacy that operates efficiently can minimize waste, reduce errors, and optimize the provision of medications and pharmaceutical care [38].

Efficiency in this context is not solely about financial savings; rather, it is about maximizing value for patients. Operational efficiency means that pharmacists can spend more time on direct patient care activities, such as counseling patients on medication use, monitoring drug therapy for efficacy and safety, and collaborating with healthcare providers to ensure appropriate treatment regimens. As the role of pharmacists expands beyond dispensing medications to include comprehensive medication management, streamlined operations become increasingly vital [39].

Challenges to Operational Efficiency in Pharmacy Administration

While the need for efficient operations in pharmacy administration is clear, several challenges hinder the realization of this goal:

1. Complex Regulations and Compliance: Pharmacies are subject to stringent regulations at both federal and state levels. Maintaining compliance requires significant administrative resources, which can detract from direct patient care activities. Regulatory burdens may result in increased documentation, a greater likelihood of errors, and inefficient workflows [40].
2. Inefficient Workflow Processes: Many pharmacies still rely on outdated processes and technologies that hinder productivity. Manual prescription processing, inadequate inventory management systems, and unoptimized staff schedules can lead to delays, higher error rates, and unfulfilled patient needs.
3. Staffing Challenges: Recruitment, retention, and training of pharmacy personnel are persistent challenges. Insufficient staffing levels can result in high workloads, burnout, and reduced job satisfaction, ultimately impacting operational efficiency. Furthermore, a lack of ongoing training can leave pharmacy staff ill-prepared to handle evolving medication therapies and patient needs [40].
4. Technology Integration Issues: While technological advancements hold the potential to significantly improve pharmacy operations, the integration of new systems can be complex and costly. Many pharmacies struggle with fragmented systems that do not communicate effectively, leading to information silos and inconsistent patient data.
5. Resistance to Change: Cultural resistance within pharmacy teams can impede the adoption of new practices and technologies. Employees may hesitate to embrace changes that challenge established routines, limiting the potential benefits of innovative solutions [41].

Strategies for Streamlining Pharmacy Administration

Addressing the challenges to operational efficiency necessitates a multifaceted approach involving technology, process innovation, and a culture that supports continuous improvement. Below are several strategies that can significantly enhance operational efficiency in pharmacy administration:

1. Implementing Advanced Technology Solutions: The integration of automation in pharmacy operations can greatly enhance efficiency. Automated dispensing systems can reduce the time spent on filling prescriptions, while electronic health record (EHR) systems enable seamless access to patient data, facilitating better clinical decision-making. Furthermore, pharmacy management software can streamline inventory management, reducing costs associated with overstocked or expired medications [42].
2. Workflow Optimization: Conducting a thorough analysis of existing workflows can help identify bottlenecks and inefficiencies. Lean methodologies, which focus on minimizing waste while maximizing value, can be utilized to redesign workflows that prioritize patient care. Streamlining the verification process, enhancing communication among staff, and standardizing procedures can foster a more efficient pharmacy environment [42].
3. Staff Training and Development: Continuous professional development is crucial for fostering an adaptable and skilled pharmacy workforce. Regular training programs ensure that staff are equipped with the latest knowledge about drug therapies, regulatory changes, and pharmacy technologies. Not only does this contribute to improved operational efficiency, but it also enhances job satisfaction and retention rates.
4. Enhancing Communication and Collaboration: Effective communication within the pharmacy team and with other healthcare providers is imperative. Utilizing collaborative software and regular interdisciplinary meetings can facilitate better teamwork and optimize patient care. Encouraging an open dialogue among pharmacists, technicians, and physicians can lead to a more cohesive approach to medication management [43].
5. Fostering a Culture of Continuous Improvement: To achieve sustained operational efficiency, pharmacies must cultivate a culture that embraces change and encourages innovation. This involves actively seeking feedback from staff on operational bottlenecks and encouraging the implementation of new ideas. Leadership should actively support initiatives aimed at improving efficiency, ensuring that all team members are engaged in the process.
6. Utilizing Data Analytics: Leveraging data analytics enables pharmacies to monitor performance metrics, identify trends, and make informed decisions. Analyzing prescription patterns, inventory turnover rates, and patient satisfaction surveys can provide valuable insights for improving operations. As organizations become more data-driven, they can position themselves to respond proactively to challenges and opportunities [43].

Data Analytics in Pharmacy: Driving Quality Improvement:

In today's fast-paced healthcare environment, data analytics has emerged as a critical tool for enhancing the quality of care in various fields, including pharmacy. As the complexity of patient care increases and the volume of health-related data expands, the need for effective data-driven decision-making has never been more pronounced [44].

Data analytics refers to the systematic computational analysis of data, aimed at uncovering patterns, trends, and insights that can inform decision-making. Within the pharmacy sector, the proliferation of electronic health records (EHRs), patient management systems, and medication management platforms has generated vast amounts of clinical and operational data. Pharmacists, equipped with analytical skills, can leverage this data to create solutions that target quality improvement initiatives [44].

Recent legislative efforts have emphasized the significance of data in improving healthcare outcomes. The American Recovery and Reinvestment Act of 2009 incentivized the adoption of EHRs, while the Affordable Care Act reinforced the focus on quality care metrics in reimbursement models. These legislative changes promote the integration of data analytics within pharmacy practice, forcing stakeholders to prioritize quality improvement strategies predicated on evidencebased insights.

Medication Therapy Management is an essential service provided by pharmacists to optimize therapeutic outcomes for patients. Data analytics can enhance MTM by identifying patients who are at risk for medication-related problems. Through predictive analytics, pharmacists can analyze patient data to pinpoint adherence issues, potential drug interactions, and improper prescribing trends. As a result, targeted interventions can be implemented to mitigate risks and improve patient adherence to medication regimens [45].

For instance, a pharmacy leveraging data analytics may identify a cohort of patients who exhibit low adherence to chronic disease medications. By conducting a deeper analysis, the pharmacy can discover that socio-economic factors or lack of understanding related to medication instructions are prevalent among this group. Armed with this insight, pharmacists can tailor educational materials and outreach interventions to improve medication adherence rates, ultimately improving patient health outcomes [46].

Data analytics can identify areas for quality improvement within pharmacy practice. Utilizing data dashboards, pharmacists can monitor performance indicators such as medication error rates, patient satisfaction scores, and the number of adverse drug reactions. Continuous monitoring allows for timely interventions and the establishment of quality improvement plans.

Implementing a Continuous Quality Improvement (CQI) framework enables pharmacies to regularly assess and refine their practices. For example, if data displays a trend in medication dispensing errors, a pharmacy may decide to conduct root cause analyses to explore the reasons behind these errors. This, in turn, informs staff training programs, workflow adjustments, and technology enhancement initiatives. Over time,

The Role of Health Information Technology in Pharmacy and Administrative Functionality
these strategies can significantly reduce error rates and enhance patient safety and trust [47].

Pharmacovigilance, the science related to detecting, assessing, and understanding adverse drug reactions, can be greatly enhanced through data analytics. With the rise of big data, pharmacists can harness analytics to evaluate large datasets for signals of adverse drug reactions or treatment failures. By establishing a reliable feedback loop from real-world patient outcomes, pharmacies can engage in proactive risk management [48].

Pharmacies can analyze claims data, EHRs, and patient-reported outcomes to gather real-world evidence. This information can inform not only clinical decisions but also support market access and pricing strategies for new medications. By tracking longterm patient outcomes associated with drugs, pharmacists can provide evidence that facilitates patient access and informs prescribing guidelines [49].

While the advantages of data analytics in pharmacy are substantial, ethical considerations must be at the forefront of these initiatives. Protecting patient privacy and ensuring data security should be a primary concern. Compliance with regulatory frameworks, such as the Health Insurance Portability and Accountability Act (HIPAA) in the United States, is essential in maintaining patient confidentiality. Additionally, pharmacists must be conscientious regarding biases that may arise from data selection and interpretation to ensure equitable access to quality care [49].

As the pharmacy industry continues to evolve, the role of data analytics will likely expand further. Emerging technologies such as artificial intelligence (AI) and machine learning (ML) present immense potential in predicting patient outcomes, personalizing medication plans, and streamlining operational efficiencies. However, challenges remain, including the need for standardized data collection methods, integration across disparate systems, and the requisite training for pharmacists to utilize advanced analytical tools effectively [49].

Regulatory Compliance and HIT in Pharmacy Operations:

In an era marked by rapid technological advancement, healthcare operations, particularly in pharmacy settings, have witnessed transformative changes. Among the most significant of these changes is the incorporation of Health Information Technology (HIT) into pharmacy operations. However, the integration of HIT must take place within a framework of regulatory compliance to ensure the safety, efficacy, and security of pharmaceutical care [50].

Regulatory compliance in pharmacy refers to the adherence to a complex set of laws, regulations, and guidelines that govern the practice of pharmacy and the handling of pharmaceutical products. These regulations are established by multiple authorities, including federal agencies such as the Food and Drug Administration (FDA), state boards of pharmacy, and organizations like the Drug Enforcement Administration (DEA). Compliance ensures that pharmacies operate within the legal framework designed to protect public health and safety, define pharmacy practices, and safeguard patient information [50].

Salem Saleh Salem Alzulayq, Fahad Abdullah Al Alhareth, Ali Hamad Hadi Almuhamidh, Hamad Saleh Alkulayb, Saleh Falah Saleh Zubayd, Salem Ali Harmal Bani Salman, Hassan Hamad Ali Almansour, Jamal Ali Bin Salem Al Kulayb, Muhamna Ali Saleh Al Mansour, Salem Ali Mohammad Al Rayshan, Hamad Nasser Ali Alshaman

Compliance encompasses various aspects of pharmacy operations, including the proper handling and dispensing of medications, maintaining accurate records, ensuring the security of controlled substances, and adhering to protocols for patient privacy as mandated by the Health Insurance Portability and Accountability Act (HIPAA). Without strict adherence to these regulations, pharmacies risk exposing themselves to legal liabilities, potential penalties, and significant reputational damage [51].

Health Information Technology encompasses a range of digital tools that enhance the management, organization, and dissemination of health information. In pharmacy operations, HIT includes electronic health records (EHR), computerized physician order entry (CPOE), pharmacy management systems, and automated dispensing systems. These technologies streamline various processes—such as medication ordering, dispensing, and monitoring—ultimately improving patient safety and operational efficiency [52].

For instance, the use of EHRs allows for better coordination of care, as pharmacists can access patient records that contain comprehensive medication histories. CPOE improves the accuracy of medication orders by reducing the risks associated with handwriting errors. Automated dispensing systems not only enhance inventory management but also improve the accuracy of medication dispensing, thereby minimizing the chances of adverse drug events [53].

Incorporating HIT into pharmacy operations can reduce operational costs, improve workflow efficiencies, and ensure timely access to critical patient information. The automation of routine tasks frees up pharmacists to focus more on direct patient care—an aspect that contributes significantly to enhanced patient outcomes [53].

Effective integration of HIT in pharmacy operations does not occur in a vacuum. The relationship between technology and regulatory compliance is multifaceted, requiring pharmacies to navigate a plethora of laws and standards that govern both. To maintain compliance while leveraging technology, pharmacies must ensure that their HIT systems align with applicable regulations [54].

One of the paramount challenges lies in maintaining patient privacy and confidentiality in line with HIPAA regulations. Pharmacies must implement robust cybersecurity measures that safeguard electronic patient information from unauthorized access or breaches. This demands regular software updates, employee training on data privacy protections, and the establishment of policies regarding electronic communications and data sharing [54].

Moreover, licensing and accreditation for HIT systems themselves must also be taken into account. Regulatory bodies often require that the technology employed by pharmacies meet specific standards for efficacy and safety. Therefore, pharmacies must conduct due diligence in selecting HIT systems and ensure that vendors maintain necessary certifications and compliance with industry regulations [54].

Despite the obvious benefits that HIT offers to pharmacy operations, challenges persist in ensuring regulatory compliance. One significant issue is the rapid pace of

The Role of Health Information Technology in Pharmacy and Administrative Functionality technological advancement, which often outstrips the ability of regulatory frameworks to keep pace. This misalignment can lead to uncertainty regarding compliance obligations, particularly as new forms of technology—such as telepharmacy and mobile health applications—become more prevalent [54].

Furthermore, the constant evolution of regulations itself can pose challenges. Changes in federal or state laws may require pharmacies to rapidly adjust their policies and practices. For instance, the evolving landscape of prescription opioid regulations necessitates that pharmacies have robust tracking systems to comply with stringent reporting requirements. Failure to act swiftly on regulatory changes may result in non-compliance [55].

In addition to the regulatory landscape, workforce issues also play a critical role in ensuring compliance. Ongoing training is essential to equip pharmacy staff with the tools and knowledge necessary to navigate both HIT systems and regulatory complexities. Pharmacies must foster a culture of compliance, where employees understand the importance of adhering to legal standards and recognize their role in safeguarding patient information [55].

Future Trends in Health Information Technology for Pharmacy and Administration:

The domain of health information technology (HIT) is evolving at an unprecedented pace, driven by the dual forces of technological innovation and the pressing need for enhanced healthcare delivery. In particular, the fields of pharmacy and healthcare administration stand to benefit substantially from these advancements. As we look to the future, several key trends are emerging that promise to reshape the landscape of pharmacy practice and healthcare administration, promoting improved patient outcomes, operational efficiencies, and a more holistic approach to medication management and healthcare delivery [56].

1. Integration of Artificial Intelligence (AI) and Machine Learning (ML)

One of the most significant trends in health information technology is the increased integration of artificial intelligence and machine learning into pharmacy services and healthcare administration. AI can analyze vast datasets rapidly, identifying patterns and insights that humans may overlook. In pharmacy, this technology can enhance medication therapy management by predicting patient adherence, optimizing drug selection based on genetic profiles, and identifying potential adverse drug interactions before they occur.

On an administrative level, AI tools can streamline operations by predicting staffing needs, managing supply chains, and enhancing decision-making processes through predictive analytics. For instance, machine learning algorithms can forecast medication demand trends, allowing pharmacies to optimize inventory levels and reduce waste. This synergy of AI in pharmacy ensures that patient care remains central and proactive, significantly mitigating risks associated with medication errors and promoting effective resource allocation [57]. 2. Telepharmacy and Remote Pharmacist Services

The rise of telehealth has spurred the development of telepharmacy, which presents a significant trend in pharmacy practice and administration. Remote pharmacist services

Salem Saleh Salem Alzulayq, Fahad Abdullah Al Alhareth, Ali Hamad Hadi Almuhamidh, Hamad Saleh Alkulayb, Saleh Falah Saleh Zubayd, Salem Ali Harmal Bani Salman, Hassan Hamad Ali Almansour, Jamal Ali Bin Salem Al Kulayb, Muhamna Ali Saleh Al Mansour, Salem Ali Mohammad Al Rayshan, Hamad Nasser Ali Alshaman

enable pharmacists to provide consultations, medication reviews, and patient education through virtual platforms. As more patients seek convenience and accessibility in their healthcare engagements, telepharmacy offers a solution that extends pharmacist reach into underserved or rural areas.

Telepharmacy not only improves access to pharmaceutical services but also empowers patients to engage with their healthcare providers from the comfort of their homes. This trend aligns with the broader shift toward patient-centered care and supports the initiatives aimed at improving health equity. Furthermore, administrative processes can benefit from telepharmacy through streamlined workflow, reduced overhead costs, and enhanced data collection capabilities [58].

3. Blockchain Technology for Secure Data Management

Data security and integrity are paramount in health information systems, especially in pharmacy where sensitive patient information is often handled. Blockchain technology presents a robust solution for enhancing data security and ensuring transparent, tamper-proof records. By employing blockchain, pharmacies can ensure the secure handling of prescription histories, tracking each transaction from the prescribing physician to the dispensing pharmacist.

Moreover, blockchain can facilitate better supply chain management within pharmacies, enabling the tracking of medications from manufacturer to patient. This capability serves to combat counterfeit drugs, reduce fraud, and improve the overall integrity of medication management processes. The administrative implications are profound as well, promoting effective auditing, compliance, and regulatory oversight in pharmaceutical operations [59].

4. Enhanced Interoperability Through Health Information Exchange (HIE)

Interoperability is a foundational principle in health information technology, aiming to create seamless communication between disparate healthcare systems. Future trends will likely see significant progress in health information exchanges (HIE), where pharmacies can share patient data and medication histories with other healthcare providers in real-time.

This enhancement can radically improve medication reconciliation processes and support collaboration among healthcare providers in managing complex patient care situations. Efficient data sharing will empower pharmacists to make informed decisions regarding medication therapy, ultimately improving patient safety. The administrative aspects also benefit, as HIE fosters a more coordinated approach to patient management, facilitating comprehensive care plans and reducing duplication of services [60].

5. Personalized Medicine and Pharmacogenomics

As the science of pharmacogenomics—how genes affect a person's response to drugs—advances, the future of pharmacy is increasingly leaning towards personalized medicine. Health information technology will play a pivotal role in integrating pharmacogenomic data into electronic health records (EHRs), enabling pharmacists

The Role of Health Information Technology in Pharmacy and Administrative Functionality and healthcare providers to tailor medication plans based on individual genetic profiles.

This trend holds the promise of optimizing drug efficacy while minimizing adverse effects, representing a shift from the traditional “one-size-fits-all” model of medication therapy. Pharmacists, as integral members of the healthcare team, will need to leverage technology to interpret genetic data effectively and engage patients in shared decision-making about their treatment options. On the administrative side, integrating pharmacogenomic data can enhance clinical decision support tools, providing providers with the insights they need to make informed choices [61].

6. Mobile Health Applications and Patient Engagement Tools

Mobile health applications are revolutionizing how patients interact with the healthcare system, particularly in medication management and adherence. Future trends indicate an increase in pharmacist involvement in developing and utilizing these apps to enhance patient engagement and education. These mobile platforms can facilitate medication reminders, provide educational resources, and enable direct communication between patients and pharmacists.

By empowering patients with tools to manage their medications effectively, pharmacists can contribute to higher adherence rates and improved health outcomes. Furthermore, these mobile solutions can provide valuable data analytics that inform pharmacy operations and administrative strategies. For instance, insights gained from app usage can guide pharmacies in optimizing their services and tailoring patient outreach efforts [62].

2. Conclusion:

In conclusion, the integration of Health Information Technology (HIT) into pharmacy and administrative functions significantly transforms the landscape of healthcare delivery. By improving medication management, enhancing patient safety, and streamlining administrative processes, HIT serves as a critical tool in optimizing pharmacy operations. The implementation of electronic health records, telepharmacy, and data analytics empowers pharmacists and administrative professionals to make informed decisions, ensuring that patient care is both efficient and effective. Furthermore, these technologies facilitate better communication among healthcare providers, leading to improved collaboration and coordination in patient management.

As the healthcare industry continues to evolve, embracing advancements in HIT will be essential for pharmacies to meet the growing demands of patients and regulatory standards. Future developments in technology promise to further enhance pharmacy services and administrative capabilities, paving the way for innovative solutions that prioritize patient outcomes. Ultimately, the ongoing investment in and commitment to Health Information Technology will play a pivotal role in shaping a more responsive, efficient, and patient-centered healthcare system.

Salem Saleh Salem Alzulayq, Fahad Abdullah Al Alhareth, Ali Hamad Hadi Almuhamidh, Hamad Saleh Alkulayb, Saleh Falah Saleh Zubayd, Salem Ali Harmal Bani Salman, Hassan Hamad Ali Almansour, Jamal Ali Bin Salem Al Kulayb, Muhamna Ali Saleh Al Mansour, Salem Ali Mohammad Al Rayshan, Hamad Nasser Ali Alshaman

References

Hersh WR, Totten AM, Eden KB, Devine B, Gorman P, Kassakian SZ, et al. Outcomes from health information exchange: systematic review and future research needs. *JMIR Med Inform.* 2015;3(4):e39. doi: 10.2196/medinform.5215.

Dumitru D, editor. The pharmacy informatics primer. Bethesda (MD): American Society of Health-System Pharmacists; 2009.

Brodowy B, Nguyen D. Optimization of clinical decision support through minimization of excessive drug allergy alerts. *Am J Health Syst Pharm.* 2016;73(8):526–8. doi: 10.2146/ajhp150252.

Taggart LR, Leung E, Muller MP, Matukas LM, Daneman N. Differential outcome of an antimicrobial stewardship audit and feedback program in two intensive care units: a controlled interrupted time series study. *BMC Infect Dis.* 2015;15(1):480. doi: 10.1186/s12879-015-1223-2.

Lam JH, Ng O. Monitoring clinical decision support in the electronic health record. *Am J Health Syst Pharm.* 2017;74(15):1130–3. doi: 10.2146/ajhp160819.

Jones SS, Rudin RS, Perry T, Shekelle PG. Health information technology: an updated systematic review with a focus on meaningful use. *Ann Intern Med.* 2014;160(1):48–54. doi: 10.7326/M13-1531.

Fox BI, Thrower MR, Felkey BG, editors. Building core competencies in pharmacy informatics. Washington (DC): American Pharmacists Association; 2010.

El Morr C. Introduction to health informatics: a Canadian perspective. Toronto (ON): Canadian Scholars; 2018.

American Society of Health-System Pharmacists. ASHP statement on the pharmacist's role in clinical informatics. *Am J Health Syst Pharm.* 2016;73(6):410–3. doi: 10.2146/ajhp150540.

Pitre M. Should pharmacy informatics officer positions be based in, and report to, the pharmacy department, rather than the health information technology department? The “pro” side. *Can J Hosp Pharm.* 2011;64(6):459–60. doi: 10.4212/cjhp.v64i6.1089.

Rafizadeh R, Turgeon RD, Batterink J, Su V, Lau A. Characterization of venous thromboembolism risk in medical inpatients using different clinical risk assessment models. *Can J Hosp Pharm.* 2016;69(6):454–9. doi: 10.4212/cjhp.v69i6.1608.

Troiano D, Jones MA, Smith AH, Chan RC, Laegeler AP, Le T, et al. ASHP guidelines on the design of database-driven clinical decision support: strategic directions for drug database and electronic health records vendors. *Am J Health Syst Pharm.* 2015;72(17):1499–505. doi: 10.2146/sp150014.

Stokes LB, Rogers JW, Hertig JB, Weber RJ. Big data: implications for health system pharmacy. *Hosp Pharm.* 2016;51(7):599–603. doi: 10.1310/hpj5107-599.

Flynn A, Fox BI, Clauson KA, Seaton TL, Breedon E. An approach for some in advanced pharmacy informatics education. *Am J Pharm Educ.* 2017;81(9) doi: 10.5688/ajpe6241.

Fox BI, Flynn A, Clauson KA, Seaton TL, Breedon E. An approach for all in pharmacy informatics education. *Am J Pharm Educ.* 2017;81(2) doi: 10.5688/ajpe81238.

Fernandes O, Toombs K, Pereira T, Lyder C, Bjelajac Mejia A, Shalansky S, et al. Canadian consensus on clinical pharmacy key performance indicators: knowledge mobilization guide. Ottawa (ON): Canadian Society of Hospital Pharmacists; 2015.

Lo E, Rainkie D, Semchuk WM, Gorman SK, Toombs K, Slavik RS, et al. Measurement of clinical pharmacy key performance indicators to focus and improve your hospital pharmacy practice. *Can J Hosp Pharm.* 2016;69(2):149–55. doi: 10.4212/cjhp.v69i2.1543.

Pharmacy informatics community. Chicago (IL): Healthcare Information and Management Systems Society; 2019.

The Role of Health Information Technology in Pharmacy and Administrative Functionality Better information for improved health: a vision for health system use of data in Canada. Ottawa (ON): Canadian Institute for Health Information; 2013.

Clauson KA, Breeden EA, Fingado AR, Kaing CL, Flynn AJ, Cutler TW. A progress report on the state of pharmacy informatics education in US pharmacy schools and colleges. *Am J Pharm Educ.* 2018;82(7) doi: 10.5688/ajpe6332.

Notice to stakeholders – policy statement on the naming of biologic drugs. Ottawa (ON): Health Canada; 2019.

Paterno MD, Maviglia SM, Gorman PN, Seger DL, Yoshida E, Seger AC, et al. Tiering drug-drug interaction alerts by severity increases compliance rates. *J Am Med Inform Assoc.* 2009;16:40–46. doi: 10.1197/jamia.M2808.

Li P, Ali S, Tang C, Ghali WA, Stelfox HT. Review of computerized physician handoff tools for improving the quality of patient care. *J Hosp Med.* 2013;8:456–463. doi: 10.1002/jhm.1988.

Kaushal R, Kern LM, Barron Y, Quaresimo J, Abramson EL. Electronic prescribing improves medication safety in community-based office practices. *J Gen Intern Med United States.* 2010;25:530–536. doi: 10.1007/s11606-009-1238-8.

Nuckols TK, Smith-Spangler C, Morton SC, Asch SM, Patel VM, Anderson LJ, et al. The effectiveness of computerized order entry at reducing preventable adverse drug events and medication errors in hospital settings: a systematic review and meta-analysis. *Syst Rev.* 2014;3:56. doi: 10.1186/2046-4053-3-56.

Brailer D. The decade of health information technology, Framework for Strategic Action [Internet] [cited 2004].

Devine EB, Hansen RN, Wilson-Norton JL, Lawless NM, Fisk AW, Blough DK, et al. The impact of computerized provider order entry on medication errors in a multi specialty group practice. *J Am Med Inform Assoc.* 2010;17:78–84. doi: 10.1197/jamia.M3285.

Dainty KN, Adhikari NKJ, Kiss A, Quan S, Zwarenstein M. Electronic prescribing in an ambulatory care setting: a cluster randomized trial. *J Eval Clin Pract.* 2012;18:761–767. doi: 10.1111/j.1365-2753.2011.01657.x.

Kohn LT, Corrigan JM, Donaldson MS. To Err Is Human [Internet] [cited 2000].

Popovich D. 30-Second Head-to-Toe Tool in Pediatric Nursing: Cultivating Safety in Handoff Communication. *Pediatr Nurs.* 2011;37:55–59.

Strom BL, Schinnar R, Aberra F, Bilker W, Hennessy S, Leonard CE, et al. Unintended effects of a computerized physician order entry nearly hard-stop alert to prevent a drug interaction: a randomized controlled trial. *Arch Intern Med.* 2010;170:1578–1583. doi: 10.1001/archinternmed.2010.324.

Joint Commission International Accreditation Standards for Hospitals. The Joint Commission. 2014;23.

Patient Safety Dictionary [Internet] National Patient Safety Foundation. [Update 2017; Accessed 2017 September].

Shah NR, Seger AC, Seger DL, Fiskio JM, Kuperman GJ, Blumenfeld B, et al. Improving acceptance of computerized prescribing alerts in ambulatory care. *J Am Med Inform Assoc.* 2006;13:5–11. doi: 10.1197/jamia.M1868.

Clinical Decision Support (CDS) [Internet] Office of the National Coordinator for Health Information Technology.

Khammarnia M, Kassani A, Eslahi M. The Efficacy of Patients' Wristband Bar-code on Prevention of Medical Errors: A Meta-analysis Study. *Appl Clin Inform.* 2015;6:716–727. doi: 10.4338/ACI-2015-06-R-0077.

Shojania KG, Jennings A, Mayhew A, Ramsay CR, Eccles MP, Grimshaw J. The effects of on-screen, point of care computer reminders on processes and outcomes of care. *Cochrane Database Syst Rev.* 2009;3:CD001096. doi: 10.1002/14651858.CD001096.pub2.

Salem Saleh Salem Alzulayq, Fahad Abdullah Al Alhareth, Ali Hamad Hadi Almuhamidh, Hamad Saleh Alkulayb, Saleh Falah Saleh Zubayd, Salem Ali Harmal Bani Salman, Hassan Hamad Ali Almansour, Jamal Ali Bin Salem Al Kulayb, Muhamna Ali Saleh Al Mansour, Salem Ali Mohammad Al Rayshan, Hamad Nasser Ali Alshaman

van Wyk JT, van Wijk MAM, Sturkenboom MCJM, Mosseveld M, Moorman PW, van der Lei J. Electronic alerts versus on-demand decision support to improve dyslipidemia treatment: a cluster randomized controlled trial. *Circulation*. 2008;117:371–378. doi: 10.1161/CIRCULATIONAHA.107.697201.

Roshanov PS, Fernandes N, Wilczynski JM, Hemens BJ, You JJ, Handler SM, et al. Features of effective computerised clinical decision support systems: meta-regression of 162 randomised trials. *BMJ*. 2013;346:f657. doi: 10.1136/bmj.f657.

Crossing the Quality Chasm [Internet] [cited 2001].

Computerized Provider Order Entry [Internet] Agency for Healthcare Quality & Research. [cited 2017].

Davis J, Riesenber LA, Mardis M, Donnelly J, Benningfield B, Youngstrom M, et al. Evaluating outcomes of electronic tools supporting physician shift-to-shift handoffs: A Systematic Review. *J Grad Med Educ*. 2015;7:174–180. doi: 10.4300/JGME-D-1400205.1.

Cheung A, van Velden FHP, Lagerburg V, Minderman N. The organizational and clinical impact of integrating bedside equipment to an information system: a systematic literature review of patient data management systems (PDMS). *Int J Med Inform*. 2015;84:155–165. doi: 10.1016/j.ijmedinf.2014.12.002.

Hofstetter PJ, Kokesh J, Ferguson AS, Hood LJ. The impact of telehealth on wait time for ENT specialty care. *Teledmed J E Health*. 2010;16:551–556. doi: 10.1089/tmj.2009.0142.

Stavropoulou C, Doherty C, Tosey P. How effective are incident-reporting systems for improving patient safety? *Milbank Q*. 2015;93:826–866. doi: 10.1111/1468-0009.12166.

Nagykaldi Z, Aspy CB, Chou A, Mold JW. Impact of a Wellness Portal on the delivery of patient-centered preventive care. *J Am Board Fam Med*. 2012;25:158–167. doi: 10.3122/jabfm.2012.02.110130.

Kew KM, Cates CJ. Remote versus face-to-face check-ups for asthma. *Cochrane Database Syst Rev*. 2016;4:CD011715. doi: 10.1002/14651858.CD011715.pub2.

Olayiwola JN, Anderson D, Jeppeal N, Aseltine R, Pickett C, Yan J, et al. Electronic consultations to improve the primary care-specialty care interface for cardiology in the medically underserved: a cluster-randomized controlled trial. *Ann Fam Med*. 2016;14:133–140. doi: 10.1370/afm.1869.

Klersy C, Boriani G, De Silvestri A, Mairesse GH, Braunschweig F, Scotti V, et al. Effect of telemonitoring of cardiac implantable electronic devices on healthcare utilization: a metaanalysis of randomized controlled trials in patients with heart failure. *Eur J Heart Fail*. 2016;18:195–204. doi: 10.1002/ejhf.470.

Inglis SC, Clark RA, McAlister FA, Ball J, Lewinter C, Cullington D, et al. Structured telephone support or telemonitoring programmes for patients with chronic heart failure. *Cochrane Database Syst Rev*. 2010;8:CD007228. doi: 10.1002/14651858.CD007228.pub2.

Daniel H, Sulmasy L. Physicians for the H and PPC of the AC of Policy recommendations to guide the use of telemedicine in primary care settings: An American College of Physicians position paper. *Ann Intern Med*. 2015;163:787–789. doi: 10.7326/M15-0498.

Fiks AG, Mayne SL, Karavite DJ, Suh A, O'Hara R, Localio AR, et al. Parent-reported outcomes of a shared decision-making portal in asthma: a practice-based RCT. *Pediatrics*. 2015;135:e965–e973. doi: 10.1542/peds.2014-3167.

Kew KM, Cates CJ. Home telemonitoring and remote feedback between clinic visits for asthma. *Cochrane Database Syst Rev*. 2016;8:CD011714. doi: 10.1002/14651858.CD011714.pub2.

Savage SW, Schneider PJ, Pedersen CA. Utility of an online medication-error-reporting system. *Am J Health Syst Pharm*. 2005;62:2265–2270. doi: 10.2146/ajhp040622.

Tan K, Lai NM. Telemedicine for the support of parents of high-risk newborn infants.

Omboni S, Guarda A. Impact of home blood pressure telemonitoring and blood pressure control: a meta-analysis of randomized controlled studies. *Am J Hypertens.* 2011;24:989– 998. doi: 10.1038/ajh.2011.100.

Hempel S, Maggard M, Nguyen D. Prevention of wrong site surgery, retained surgical items, and surgical fires: A systematic review.

Shekelle PG, Wachter RM, Pronovost PJ, Schoelles K, McDonald KM, Dy SM, et al. Making health care safer II: an updated critical analysis of the evidence for patient safety practices. *Evid Rep Technol Assess (Full Rep)* 2013;211:1–945.

Gregersen TL, Green A, Frausing E, Ringbaek T, Brondum E, Suppli Ulrik C. Do telemedical interventions improve quality of life in patients with COPD? A systematic review. *Int J Chron Obstruct Pulmon Dis.* 2016;11:809–822. doi: 10.2147/COPD.S96079.

Safe use of health information technology. *Sentinel Event Alert.* 2015;54:1–6.

Sittig DF, Singh H. A New Socio-technical Model for Studying Health Information Technology in Complex Adaptive Healthcare Systems. *Qual Saf Health Care.* 2010;19(Suppl 3):i68–i74. doi: 10.1136/qshc.2010.042085.

Campanella P, Lovato E, Marone C, Fallacara L, Mancuso A, Ricciardi W, et al. The impact of electronic health records on healthcare quality: a systematic review and meta-analysis. *Eur J Public Health.* 2016;26:60–64. doi: 10.1093/eurpub/ckv122.