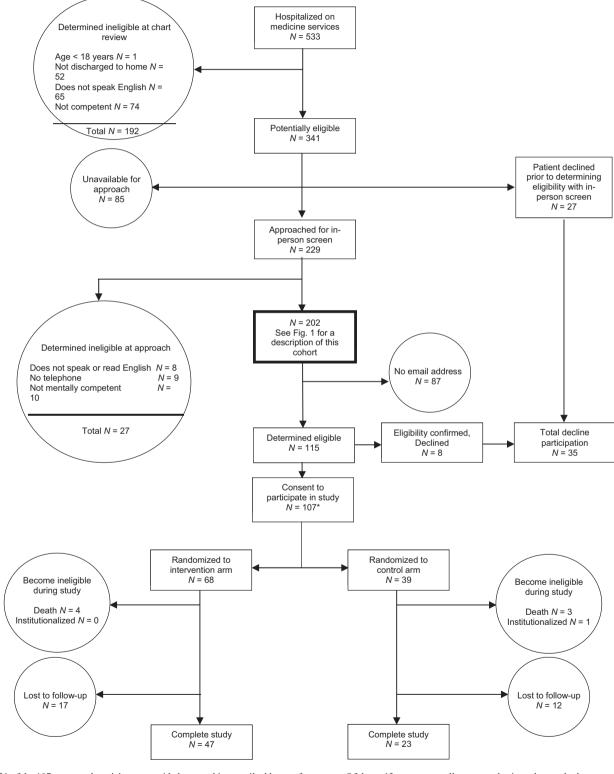
# **Supplementary Material A**

#### Flow diagram of patients considered for inclusion in the study



<sup>\* 21</sup> of the 107 consented participants provided nonworking email addresses for contact. Of these, 12 were eventually contacted using other methods including telephone and U.S. mail.

# **Supplementary Material B**

#### **Example Hospital Discharge Summary**

# **Discharge Summary**

**DATE OF ADMISSION:** 09/01/2016 **DATE OF DISCHARGE:** 09/10/2016

PCP: Joe Smith

# **Discharge Diagnosis**

Cellulitis

CHF exacerbation

# **Consults Completed**

Surgery Infectious Disease Cardiology

# **Operations/Procedures**

Biopsy, 9/7

# **Principal Diagnostic Studies/Results**

Chest X-ray 9/2 Bilateral pulmonary edema. No clear effusion.

# **Reason for Admission**

Leg Cellulitis

#### **Hospital Course**

Mr. Bond is a 50-year-old man with CAD, CHF who presented with leg pain, found to have cellulitis.

#### #Cellulitis

Treated with 5 days of vancomycin, with good improvement. Had leg biopsy which showed Gram-negative organisms, presumed contaminant. Narrowed to po cephalexin to complete 7-day course, covering predominantly Gram-positive organisms, including staph and strep.

-Continue cephalexin to complete 7-day course on 9/12.

#### #CHF

Some volume overload on admission, with X-ray showing pulmonary edema. Diuresed with 40 IV Lasix  $\times$  2 days with improvement in dyspnea and was net negative 4 L. Then resumed home medications and pt with stable respiratory status and weight for 2 days prior to discharge.

- -Continue Lasix
- -Follow-up cards

#### Condition

Fair; T – 36.8, P- 86, BP 132/78 Gen: well appearing, in NAD

HEENT: MMM, EOMI, sclera anicteric

Lungs: CTAB, normal WOB CV: RRR, no m/r/g. JVP flat

Abd: soft, nontender, nondistended

Skin: mild erythema on left leg, resolving. No purulence

# **Disposition**

[x] Home [\_] Skilled Nursing Facility [\_] Other: \_

# **Clinical Follow-up, Including Appointments**

Primary care visit, 9/20/16 Cardiology 9/27/16

# **Diagnostic Studies Recommended**

None.

# Pending Results: (as of this Summary)

None.

#### Therapeutic Recommendations

Continue your antibiotics.

Avoid soaps or rubs.

Continue wound management.

Continue Lasix, and contact your doctor if you are gaining weight or having difficulty with breathing.

# **Allergies**

Penicillin

#### **Discharge Medications**

Tylenol 325 mg q6 hour Cefalexin 750 mg daily, for 2 days Aspirin 81 mg daily HCTZ 12.5 mg daily Metoprolol 25 mg daily Lasix 20 mg po daily

#### **Code Status**

- Full Code

UW Medicine physicians mentioned in this note can be reached by calling MedCon at 800–326–5300.

If any part of this transcript is missing or to request other transcripts for this patient call 206–744–9000. For online access to patient records enroll in U-Link at uwmedicine.org/u-link.

# **Supplementary Material C**

# **Study Surveys**

1. I know what medica			Agree	☐ Strongly Agree	□ N/A
2. I know what each o  ☐ Strongly Disa			ations do □ Agree	☐ Strongly Agree	□ N/A
3. I know when I shoul ☐ Strongly Disa			□ Agree	☐ Strongly Agree	□ N/A
4. I understand why I v  ☐ Strongly Disa			spital □ Agree	☐ Strongly Agree	□ N/A
5. It would be a good i ☐ Strongly Disa	•		ad their hosp □ Agree	ital records. □ Strongly Agree	□ N/A
6. I understand what I  ☐ Strongly Disa			•	l □ Strongly Agree	□ N/A
<ul> <li>7. How confident are y</li> <li>Extremely</li> <li>Quite a bit</li> <li>Somewhat</li> <li>A little bit</li> <li>Not at all</li> </ul>	ou in filling o	out forms b	by yourself?		
<ul> <li>8. I would like to be ab</li> <li>Family member</li> <li>My primary care do</li> <li>My caregiver</li> <li>Other</li> <li>No one (I would not Other, please described)</li> </ul>	ctor share)	ny hospital	record with	[check all that apply]:	

Follow-up Survey			
1. I know what medications I need to t  ☐ Strongly Disagree ☐ Disagr		☐ Strongly Agree	□ N/A
2. I know what each of my prescribed ☐ Strongly Disagree ☐ Disagr		☐ Strongly Agree	□ N/A
3. I know when I should visit the docto ☐ Strongly Disagree ☐ Disagr		☐ Strongly Agree	□ N/A
4. I understand why I was admitted to ☐ Strongly Disagree ☐ Disagr	· ·	☐ Strongly Agree	□ N/A
5. It would be a good idea if patients c  ☐ Strongly Disagree ☐ Disagr		pital records. □ Strongly Agree	□ N/A
6. I understand what I need to do afte ☐ Strongly Disagree ☐ Disagr		al □ Strongly Agree	□ N/A
7. I wish I had more information about ☐ Strongly Disagree ☐ Disagr	•	ı □ Strongly Agree	□ N/A
8. The training on accessing my medical Disagree Disagree		ul. * □ Strongly Agree	□ N/A
9. I would like to be able to share my  My primary care doctor Family member My caregiver No one (I would not share) Other (please explain)		th [check all that app	ıly]:
10. Since you were discharged from th  ☐ Yes ☐ No ☐ Don't Know  11. Were you able to login to the pati ☐ Yes ☐ No  (If no, skip next question)		attempt to login to tl	ne patient portal?

12. Did you read your discharge summary on the computer using Harborview's Patient Portal (eCare)?  ☐ Yes ☐ No (If no, skip next question)
13. It was helpful to have access to my discharge summary  ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree ☐ N/A
[If answer to 11 or 12 is no]  14. Please tell us why you [either didn't login to the portal or didn't read your discharge summary] [check all that apply]  □ Technical difficulties □ Didn't feel well enough □ Wasn't able to because of personal/time constraints □ Didn't think about it/forgot □ Forgot password □ Other (please explain)
15. I prefer to go to a hospital that will let me see my hospital records  ☐ Yes ☐ No ☐ Don't know
Having access to my medical records:  16. Would increase my trust in doctors  ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree ☐ N/A
17. Would increase my satisfaction with care  ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree ☐ N/A
18. Patients are often given many pieces of paper when they leave the hospital. Check all that apply.  □ I don't remember getting them  □ I received them  □ I read them  □ I do not know where they are  □ I found them helpful  □ I found them confusing
19. What suggestions do you have for improvement in Harborview's patient portal (eCare) and discharge summaries? [Text field]
Thank you for participating in this study! So that we can send you the \$25 gift card please provide us with the best street address to reach you. [Record address]
*These questions will only be asked of the intervention arm patients