# *e*merge network

eMERGE Network: <u>External Collaborator</u> Manuscript Concept Sheet		
Reference Number (to be assigned by CC)	NT398	
Submission Date	07/13/2020	
Project Title	The Devil is in the details: Perspectives of health system stakeholders on implementing a standardized family health history tool into the electronic health record.	
Tentative Lead Investigator (first author)	Wiesner, Georgia	
Tentative Senior Author (last author)	Smith, Maureen or Alanna Rahm	
eMERGE Site Sponsor & Contact	Sponsor: Dan Roden Contact: Sarah Bland	
All Other Authors	The study is not open to other authors. See table	
Sites Participating	Vanderbilt, Northwestern, Geisinger. This project also includes Lori Orlando, and MeTree investigators from Duke University.	
Background / Significance	Family health history (FHH) reliably identifies patients at risk for common conditions and rare genetic disorders. While several collection programs exist, FHH is not systematically integrated into health system electronic health record (EHR). MeTree is a patient facing FHH platform developed at Duke University that collects, analyzes and creates clinician decision reports on 45 inherited conditions.  This is an extension grant to VUMC eMERGE site to assess the barriers and facilitators to integrating FHH into the EHR. The main outcome of this to understand the perspectives of the stakeholders in the health system about the institutional level needs in integrating and using a systematic collection of FHH of	
their institutions.  This paper is the second in a set of three planned manuscripts about this program and Genomics (eMERGE) network sites (Northwestern University, Geisinger, Vanderbilt University Medical Center), will be performed to assess the institution needs in implementing the MeTree FHH platform. The Consolidated Framew Implementation Research (CIFR) method was used to design and analyze a 2st survey focusing on use and collection of FHH, impact on workflow, data secularly and confidence in FHH collection. A short video about MeTree will be shown each stakeholder. The interviews will be recorded, analyzed and coded using Dedoose program by at least 2 reviewers. Codes will be reviewed, harmonized content, and tabulated by provider type and site to identify thematic trends.		

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Desired Data - Common Variables* (Available from the CC)	<ul> <li>□ Demographics</li> <li>□ ICD9/10 codes</li> <li>□ Common Variable Meds</li> <li>□ CPT codes</li> <li>□ Other: Case/Control status on Phase I and Phase II phenotypes</li> <li>□ BMI</li> <li>NONE NEEDED</li> </ul>		
Other Desired Data (Available from participating sites)	Please specifically list out any data elements that participating sites would collect or extrac from clinical or other sources for this project (i.e. not common variables above)  NONE NEEDED		
Desired Genetic Data	<ul> <li>eMERGE I-III Merged set (HRC imputed, GWAS)</li> <li>eMERGE PGx/PGRNseq data set</li> <li>eMERGEseq data set (Phase III)</li> <li>eMERGE Whole Genome sequencing data set</li> <li>eMERGE Exome chip data set</li> <li>eMERGE Whole Exome sequencing data set</li> <li>Other (not listed above):</li> <li>NONE NEEDED</li> </ul>		
Does project pertain to an existing eMERGE Phenotype?	<ul><li>☐ Yes, if so please list</li><li>☐ XX-No</li></ul>		
Planned Statistical Analyses	Study is qualitative and descriptive in nature. Summary statistics for each paper will be presented		
Ethical Considerations	Exempt- low risk		
Available Funding or Resources	Extension funds to VUMC eMERGE parent grant		
Target Journal	TBD		
	Completion of draft and submission of manuscript, Summer, 2020		

(This section should include the key dates for completion of project, including approval, project duration, draft completion, and submission.)

Milestones

### \*Common Variables available across all datasets:

- <u>Demographics:</u> sex, year of birth, decade of birth, race, ethnicity
- <u>Codes</u>: (repeated values & age at event): ICD, CPT, Phecodes
- <u>BMI</u>: (repeated value & age at event) height, weight, BMI
- <u>Labs</u>: (lab **name**, **repeated lab value & age at event)** Serum total cholesterol, LDL, HDL, Triglycerides, Glucose fasting/non-fasting/unknown, & White Blood Cell count

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- <u>Medications</u>: (medication name, repeated, & age at event) Cerivastatin sodium, Rosuvastatin, Simvastatin, Fluvastatin, Pravastatin, Lovastatin, Atorvastatin, & Pitavastatin
- Other: Case/Control status on Phase I and Phase II phenotype: only on GWAS dataset participants

#### Table of investigators and support staff for eMERGE-MeTree Project.

Not all of these individuals will be authors, as it depends on their role in each project.

Site	Name	Email
VUMC	Roden, Dan	dan.roden@vumc.org
VUMC	Denny, Josh	josh.denny@vumc.org
VUMC	Wiesner, Georgia	georgia.wiesner@vumc.org
VUMC	Warner, Jeremy	jeremy.warner@vumc.org
VUMC	Ramirez, Andrea	andrea.h.ramirez@vumc.org
VUMC	Rosenbloom, Trent	trent.rosenbloom@vumc.org
VUMC	Beller, Marc	marc.beller@vumc.org
VUMC	Wang, Janey	janey.wang@vumc.org
VUMC	Bland, Sarah	sarah.bland@vumc.org
VUMC	Pirtle, Claude	claude.j.pirtle@vumc.org
VUMC	Brelsford, Kate	kathleen.m.brelsford@vumc.org
VUMC	Hammack, Catherine	catherine.m.hammack@vumc.org
VUMC	Hearring, Simeon	simeon.l.hearring@vumc.org
VUMC	Elizabeth Jasper	elizabeth.jasper@vumc.org
Duke	Orlando, Lori	orlan002@duke.edu
Duke	Haga, Susanne	Susanne.haga@duke.edu
Duke	Sperber, Nina	nina.sperber@duke.edu
Duke	Ginsburg, Geoffrey	geoffrey.ginsburg@duke.edu
Duke	Rakhra-Burris, Tejinder	teji.rb@duke.edu
Duke	Mbochi, Gladwell	gladwell.mbochi@duke.edu
Duke	Stein, Pete	pstein@littlegreensoftware.com
Duke	Brown, Tres	Tres.Brown@duke.edu
Duke	Mills, Rachel	r.mills@duke.edu
Duke	McCloud, Rhonda	rhonda.mccloud@dm.duke.edu
GHS	Williams, Marc	mswilliams1@geisinger.edu
GHS	Buchanan, Adam	ahbuchanan@geisinger.edu
GHS	Rahm, Alanna	akrahm@geisinger.edu
GHS	Walton, Nephi	nawalton@geisinger.edu
GHS	Johnson, Darren	dkjohnson3@geisinger.edu
GHS	Goehringer, Jess	jgoehringer@geisinger.edu
GHS	Wood, Shannon	researchgrants@geisinger.edu
NWU	Smith, Maureen	m-smith6@northwestern.edu
NWU	Chisholm, Rex	r-chisholm@northwestern.edu
NWU	Wehbe, Firas	firas.wehbe@northwestern.edu
NWU	Rasmussen, Luke	luke.rasmussen@northwestern.edu
NWU	Hoell, Christie	christin.hoell@northwestern.edu
NWU	Kaiser, Darren	dkaiser@nm.org
NWU	Chmiel, Ryan	rchmiel@nm.org
NWU	Reddy, Madhu	mreddy@northwestern.edu
NWU	Xinos, Stavroula	sxino@nm.org
NWU	Ronald, Jason	jronald@nm.org
NWU	Aufox, Sharon	s-aufox@northwestern.edu
NWU	Look, Sandra	sandra-look@northwestern.edu

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HMS Alterovitz, Gil

HMS Alterovitz, Gil gil.alterovitz@gmail.com