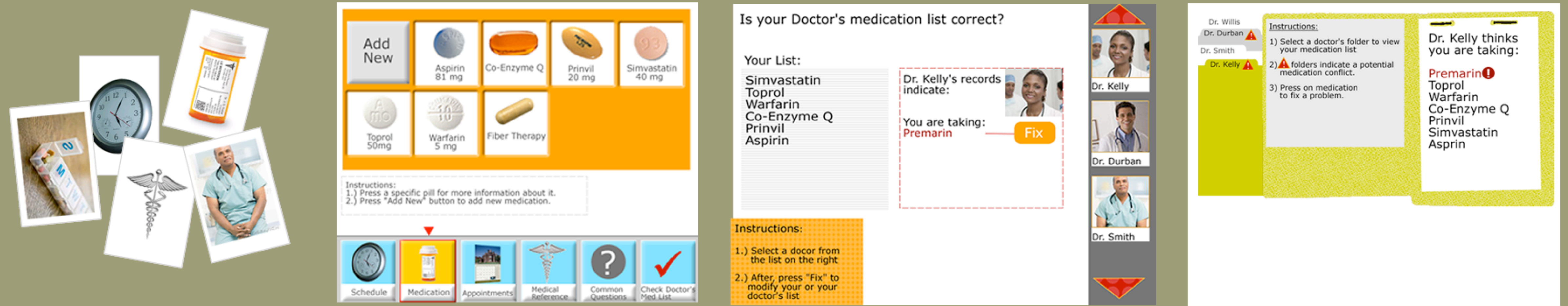


The Colorado Care Tablet (CO Care Tablet) is a Personal Health Record (PHR) Tablet PC application that helps older adults during transitions of care coordinate their care among multiple providers and caregivers. The tablet also empowers older adults and their caregivers by providing access to understandable and authoritative medication information. Throughout our study we have relied on the Rapid Iterative Testing and Evaluation (RITE) method to test, inform, and develop our iterative prototypes.

RITE 2: Evaluated participants performance on a card sorting exercise, a series of tasks on a new combined interface, and three medication reconciliation prototypes.

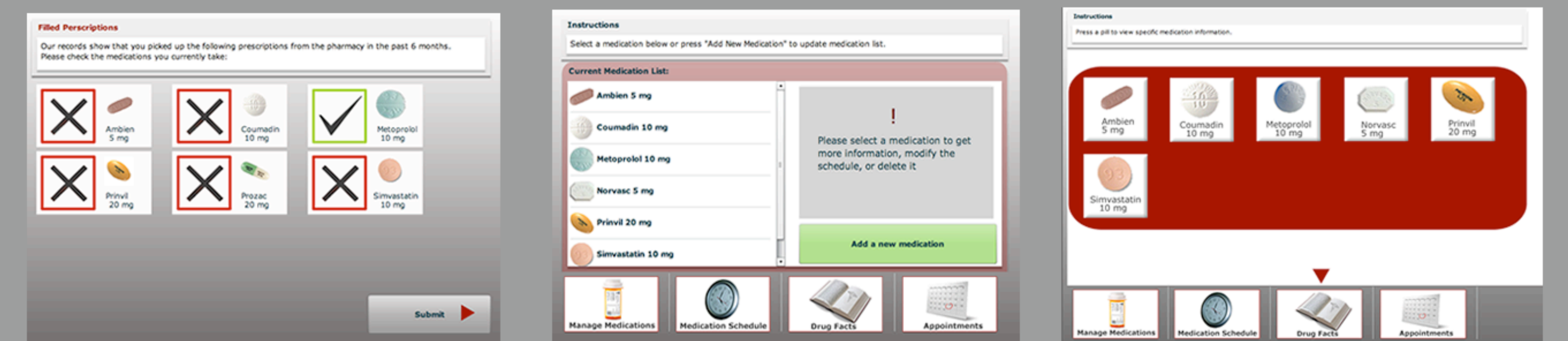


Successful features: the new navigation system, combined pill-dosage-name for medication identification and page specific instructions

Problems: extensive use of computer lingo (help, save, edit) and the concept of a personal medication list

A total of sixteen individuals, ranging between 58-86 in age, participated in the four iterative RITE sessions described below. Eight of our participants were female and two classified themselves as caregivers. Three participants were severely physically disabled and subsequently their interactions during the sessions were degraded.

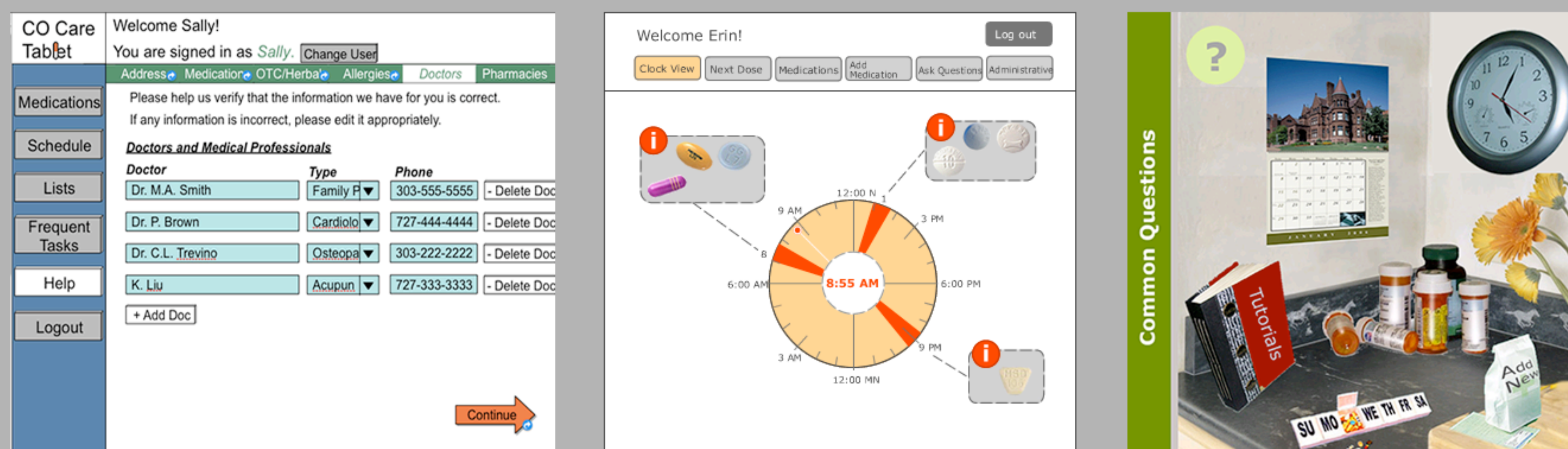
RITE 3-4: Studied interactions with touch-screen, functional prototype, and initial tablet setup with pharmacy fulfillment data.



Successful features: using fulfillment data to setup tablet, looking up medication information, and adding a new medication

Problems: some confusion regarding the purpose of fulfillment data, deleting medication from a list, adding non-prescription medications, and scanning barcodes from the appropriate screen

RITE 1: Studied how users navigated, interpreted, and performed specific tasks on three distinct paper prototypes: text-based, abstract, and pictorial.



Successful features: personalized, screen-specific help, combined visual and textual navigation, the concept of a medication scheduling clock, optional levels of complexity, and a preference for a visual versus textual interface

Problems: distinguishing between active and passive interface components, the concept of medication reconciliation, and a purely pictorial navigation system

We are currently integrating the interface with the Robert Wood Johnson Foundation common component architecture. This fall, we will collaborate with the University of Colorado Hospital to populate the CO Care Tablet with real patient data and reevaluate the CO Care Tablet in the wild.

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