

THE ROLE OF PATIENT-REPORTED OUTCOMES IN MEASURING HEALTHCARE QUALITY

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Abstract:

Patient-reported outcomes (PROs) have gained recognition as valuable tools in assessing healthcare quality. This review article aims to explore the significance of PROs in measuring healthcare quality and their impact on patient-centered care. PROs provide unique insights into the patient experience, allowing for a more comprehensive evaluation of healthcare services beyond traditional clinical measures. By incorporating patient perspectives, healthcare providers can better understand the effectiveness of treatments, interventions, and overall quality of care. This review discusses the various types of PRO measures used in healthcare settings, including quality of life assessments, symptom scales, and satisfaction surveys. It also examines the challenges and opportunities associated with implementing PROs in routine clinical practice. Key topics include the validity and reliability of PRO instruments, data collection methods, and strategies for integrating PRO data into quality improvement initiatives. Furthermore, the review highlights the role of PROs in enhancing patientprovider communication, shared decision-making, and care coordination. By actively involving patients in the assessment of healthcare quality, PROs empower individuals to voice their concerns, preferences, and treatment goals. This collaborative approach not only improves patient satisfaction but also leads to better health outcomes and increased adherence to treatment plans. In conclusion, this review emphasizes the importance of incorporating PROs into healthcare quality measurement efforts. By leveraging patient-reported data, healthcare organizations can identify areas for improvement, monitor progress over time, and ultimately deliver more patient-centered care. Future research should focus on standardizing PRO measures, enhancing data collection methods, and promoting the widespread adoption of PROs in healthcare settings.

Keywords: Patient-reported outcomes, Healthcare quality, Patient-centered care, Quality improvement, Patient-provider communication, Shared decision-making

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Introduction:

Patient-Reported Outcomes (PROs) have become an increasingly important tool in healthcare quality measurement. In recent years, there has been a growing recognition of the importance of incorporating patient perspectives into the evaluation of healthcare services. PROs provide a valuable source of information about the impact of healthcare interventions on patients' health and well-being, as well as on their satisfaction with care [1].

PROs are defined as any report of the status of a patient's health condition that comes directly from the patient, without interpretation by a clinician or anyone else. This can include information about symptoms, functional status, quality of life, and other aspects of the patient experience. PROs can be collected through various methods, including surveys, questionnaires, interviews, and electronic health records [2].

There are several key reasons why PROs are important in healthcare quality measurement. First and foremost, PROs provide a more comprehensive and holistic view of the patient's health and well-being than traditional clinical measures alone. By capturing the patient's perspective, PROs can help healthcare providers better understand the impact of their interventions on patients' lives and tailor treatment plans accordingly [3].

Second, PROs can help identify areas for improvement in healthcare services. By collecting feedback directly from patients, healthcare providers can gain insights into what aspects of care are working well and what areas need to be addressed. This can help drive quality improvement initiatives and ultimately lead to better patient outcomes [4].

Third, PROs can help facilitate shared decisionmaking between patients and providers. By involving patients in the assessment of their own health and well-being, PROs can empower patients to take an active role in their care and make informed decisions about their treatment options [2].

In recent years, there has been a growing emphasis on the use of PROs in healthcare quality measurement. The Affordable Care Act, for example, includes provisions that encourage the use of PROs in the evaluation of healthcare providers and payment for services. In addition, organizations such as the National Quality Forum and the Agency for Healthcare Research and Quality have developed guidelines and standards for the collection and use of PROs in healthcare quality measurement [5]. Despite the many benefits of PROs, there are also challenges and limitations to consider. For example, there may be issues related to the validity and reliability of PRO measures, as well as concerns about the burden of data collection on patients and healthcare providers. In addition, there may be challenges related to the interpretation and use of PRO data in clinical practice [5].

Types of PRO Measures and Their Applications in Healthcare Settings:

One type of PRO measure is the generic healthrelated quality of life (HRQoL) measure. These measures assess a patient's overall quality of life and general well-being, regardless of their specific medical condition. Examples of generic HRQoL measures include the SF-36 and EQ-5D. These measures are useful for comparing the impact of different health conditions on a patient's quality of life and for monitoring changes in quality of life over time [6].

Disease-specific PRO measures are another type of PRO measure that are designed to assess the impact of a specific disease or condition on a patient's quality of life. These measures are tailored to the symptoms and challenges associated with a particular disease, making them more sensitive to changes in the patient's condition. Examples of disease-specific PRO measures include the Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) for osteoarthritis and the Asthma Control Test for asthma. These valuable for assessing measures are the effectiveness of treatments for specific conditions and for guiding clinical decision-making [7].

Symptom-specific PRO measures focus on assessing the severity and impact of specific symptoms experienced by a patient. These measures are useful for monitoring the progression of symptoms over time and for evaluating the effectiveness of symptom management strategies. Examples of symptom-specific PRO measures include the Brief Pain Inventory for pain and the Patient-Reported Outcomes Measurement Information System (PROMIS) for a wide range of symptoms. These measures can help healthcare providers identify the most bothersome symptoms for a patient and develop targeted interventions to address them [8].

Finally, preference-based PRO measures assess the patient's preferences for different health states or treatment options. These measures are used to calculate quality-adjusted life years (QALYs), which are a measure of the quality and quantity of life gained from a particular treatment. Examples of preference-based PRO measures include the EuroQol-5D (EQ-5D) and the Health Utilities Index (HUI). These measures are valuable for conducting cost-effectiveness analyses and for informing decisions about resource allocation in healthcare [9].

PRO measures play a crucial role in healthcare settings by providing valuable insights into the patient's perspective on their health and quality of life. By using different types of PRO measures, healthcare providers can better understand the impact of a patient's condition, tailor treatment plans to meet their individual needs, and evaluate the effectiveness of interventions. Understanding the different types of PRO measures and their applications is essential for providing patientcentered care and improving outcomes for patients in healthcare settings [10].

Challenges and Opportunities in Implementing PROs in Clinical Practice:

Despite the potential benefits of using PROs in clinical practice, there are also several challenges that must be addressed in order to successfully implement them. One of the main challenges is the lack of standardized measures and protocols for collecting and interpreting PRO data. There are hundreds of PRO instruments available, each with its own strengths and limitations, making it difficult for clinicians to choose the most appropriate tool for their specific patient population and clinical setting. Additionally, there is a lack of consensus on how to interpret and act on PRO data in clinical practice, which can lead to confusion and inconsistency in the use of PROs [11].

Another challenge is the time and resources required to implement PROs in clinical practice. Collecting and analyzing PRO data can be timeconsuming and may require additional staff training and support. Clinicians may also be concerned about the impact of PROs on their workflow and the potential for increased administrative burden. In addition, there may be challenges in integrating PRO data into electronic health records (EHRs) and other health information systems, which can limit the usability and accessibility of the data for clinical decision-making [12].

Despite these challenges, there are also many opportunities for using PROs in clinical practice to improve patient care and outcomes. One of the main opportunities is the potential for PROs to facilitate shared decision-making between patients and clinicians. By incorporating the patient perspective into clinical decision-making, PROs can help ensure that treatment plans are aligned with the patient's goals and preferences, leading to more patient-centered care. PROs can also help identify patients who may be at risk for poor outcomes or who may benefit from additional support or interventions, allowing clinicians to intervene earlier and prevent complications [13]. Another opportunity is the potential for PROs to enhance the quality and efficiency of clinical care. By systematically collecting and monitoring PRO data, clinicians can track changes in patient symptoms and functional status over time, allowing for more timely adjustments to treatment plans. PROs can also help identify areas for improvement in clinical practice and guide quality improvement initiatives. In addition, PRO data can be used for research purposes to evaluate the effectiveness of treatments and interventions. leading to a better understanding of what works best for patients in real-world settings [14].

While there are challenges to implementing PROs in clinical practice, there are also many opportunities for using PROs to improve patient care and outcomes. By addressing the challenges and leveraging the opportunities, clinicians can harness the power of PROs to enhance the patient experience, improve clinical decision-making, and drive quality improvement in healthcare. It is for clinicians, important researchers, policymakers, and other stakeholders to work together to overcome the barriers to PRO implementation and realize the full potential of PROs in clinical practice [15].

Validity and Reliability of PRO Instruments for Quality Assessment:

Validity refers to the extent to which a PRO instrument accurately measures what it is intended to measure. In the context of healthcare, validity is essential to ensure that the data collected from PRO instruments accurately reflects the patient's experience and outcomes. There are several types of validity that need to be considered when evaluating PRO instruments [16]:

- 1. Content validity: Content validity refers to the extent to which the items in a PRO instrument represent the domain of interest. It is important to ensure that the items in the instrument are relevant and comprehensive in capturing the patient's experience and outcomes [16].
- 2. Construct validity: Construct validity refers to the extent to which the scores from a PRO instrument correlate with other measures that are theoretically related to the construct being measured. It is important to establish construct validity to ensure that the instrument is measuring the intended concept or construct [16].
- 3. Criterion validity: Criterion validity refers to the extent to which the scores from a PRO

instrument correlate with an external criterion or gold standard measure. Criterion validity is important to establish the accuracy of the instrument in predicting or measuring outcomes [16].

Reliability refers to the consistency and stability of the measurements obtained from a PRO instrument. In healthcare, reliability is crucial to ensure that the data collected is consistent and reproducible. There are several types of reliability that need to be considered when evaluating PRO instruments [17]:

- 1. Test-retest reliability: Test-retest reliability refers to the consistency of scores obtained from the same individuals on two separate occasions. It is important to establish test-retest reliability to ensure that the instrument produces consistent results over time [17].
- 2. Internal consistency reliability: Internal consistency reliability refers to the extent to which the items in a PRO instrument are interrelated and measure the same construct. It is important to establish internal consistency reliability to ensure that the instrument is measuring a single, coherent concept [17].
- 3. Inter-rater reliability: Inter-rater reliability refers to the consistency of scores obtained from different raters or observers using the same PRO instrument. It is important to establish inter-rater reliability to ensure that the instrument produces consistent results across different raters [17].

The validity and reliability of PRO instruments are essential to ensure that the data collected is accurate, consistent, and meaningful. Validity ensures that the instrument is measuring the intended concept or construct, while reliability ensures that the measurements obtained are consistent and reproducible. Without valid and reliable PRO instruments, healthcare providers may make decisions based on inaccurate or inconsistent data, which can have negative implications for patient care and outcomes [18].

The validity and reliability of PRO instruments are crucial for quality assessment in healthcare. Validity ensures that the instrument accurately measures what it is intended to measure, while reliability ensures that the measurements obtained are consistent and stable. By ensuring that PRO instruments are valid and reliable, healthcare providers can collect accurate and meaningful data to improve patient care and outcomes. It is essential for healthcare providers to carefully evaluate the validity and reliability of PRO instruments before using them in clinical practice to ensure that the data collected is accurate, consistent, and meaningful [19].

Integrating PRO Data into Quality Improvement Initiatives:

In recent years, there has been a growing recognition of the importance of patient-reported outcomes (PRO) data in healthcare quality improvement initiatives. PRO data refers to information provided by patients about their symptoms, functional status, and overall quality of life. This data is valuable because it offers a unique perspective on the effectiveness of healthcare interventions and the impact of care on patients' lives [20].

Integrating PRO data into quality improvement initiatives can provide healthcare organizations with valuable insights into the patient experience and help identify areas for improvement. By collecting and analyzing PRO data, healthcare providers can better understand the needs and preferences of their patients, tailor interventions to meet those needs, and ultimately improve the quality of care they provide [21].

One of the key benefits of integrating PRO data into quality improvement initiatives is the ability to track patient outcomes over time. By regularly collecting PRO data from patients, healthcare providers can monitor changes in symptoms, functional status, and quality of life, and adjust treatment plans accordingly. This can help ensure that patients receive the most appropriate and effective care, leading to better outcomes and higher patient satisfaction [22].

In addition to tracking individual patient outcomes, PRO data can also be used to assess the overall quality of care provided by healthcare organizations. By aggregating and analyzing PRO data from a large number of patients, organizations can identify trends and patterns in patient outcomes, identify areas of strength and weakness, and implement targeted quality improvement initiatives to address areas in need of improvement [23].

Integrating PRO data into quality improvement initiatives can also help healthcare organizations meet regulatory requirements and accreditation standards. Many regulatory bodies and accrediting organizations now require healthcare providers to collect and report PRO data as part of their quality improvement efforts. By incorporating PRO data into their quality improvement initiatives, healthcare organizations can ensure compliance with these requirements and demonstrate their commitment to providing high-quality care [24].

Despite the many benefits of integrating PRO data into quality improvement initiatives, there are also challenges that must be addressed. One of the main challenges is ensuring the accuracy and reliability of PRO data. Patients may provide inaccurate or incomplete information, leading to biased results and unreliable conclusions. Healthcare providers must implement strategies to ensure the validity of PRO data, such as using validated PRO instruments, training staff on data collection techniques, and conducting regular audits of data quality [25].

Another challenge is the integration of PRO data into existing electronic health record systems. Many healthcare organizations use electronic health record systems to store and manage patient data, but these systems may not be designed to capture and analyze PRO data. Healthcare providers must work with their IT departments to customize electronic health record systems to accommodate PRO data, ensuring that it is collected, stored, and analyzed in a secure and efficient manner [26].

Integrating PRO data into quality improvement initiatives is essential for improving the quality of care provided by healthcare organizations. By collecting and analyzing PRO data, healthcare providers can gain valuable insights into the patient experience, track outcomes over time, assess the overall quality of care, meet regulatory requirements, and demonstrate their commitment to providing high-quality care. While there are challenges to overcome, the benefits of integrating PRO data into quality improvement initiatives far outweigh the challenges, making it a valuable tool for healthcare organizations seeking to improve patient outcomes and enhance the patient experience [27].

Enhancing Patient-Provider Communication and Shared Decision-Making through PROs:

In the realm of healthcare, effective communication between patients and providers is crucial for ensuring high-quality care and positive health outcomes. Patient-reported outcomes (PROs) have emerged as a valuable tool in enhancing communication and shared decisionmaking between patients and providers. PROs are measures of a patient's health status, symptoms, and quality of life that are reported directly by the patient. By incorporating PROs into clinical practice, healthcare providers can gain valuable insights into the patient's perspective, preferences, and priorities, ultimately leading to more patientcentered care [28].

One of the key benefits of using PROs in healthcare is that they provide a standardized and systematic way to capture the patient's perspective on their health and well-being. Traditionally, healthcare providers have relied on their own assessments and clinical observations to gauge the patient's health status. However, these assessments may not always align with the patient's own experiences and priorities. By using PROs, providers can obtain a more comprehensive and accurate understanding of the patient's symptoms, functional status, and quality of life. This information can help providers tailor treatment plans to meet the individual needs and preferences of each patient [29].

Furthermore, PROs can also facilitate communication between patients and providers by giving patients a voice in their care. When patients complete PRO questionnaires, they are given the opportunity to express their concerns, preferences, and goals for treatment. This can empower patients to actively participate in their care and engage in shared decision-making with their providers. By discussing the results of the PROs with their patients, providers can address any discrepancies between their own assessments and the patient's reported outcomes, leading to more collaborative and patient-centered care [30].

In addition to improving communication and shared decision-making, the use of PROs in healthcare can also lead to better health outcomes for patients. Research has shown that when patients are actively engaged in their care and have their preferences taken into account, they are more likely to adhere to treatment plans and experience improved health outcomes. By incorporating PROs into routine clinical practice, providers can better identify patients' needs and preferences, leading to more personalized and effective treatment strategies [31].

Despite the numerous benefits of using PROs in healthcare, there are some challenges that providers may face when implementing PROs into their practice. One challenge is the time and resources required to administer and interpret PRO questionnaires. Providers may need to invest in training and support systems to effectively integrate PROs into their workflow. Additionally, providers may need to consider the validity and reliability of the PRO measures they use to ensure that they are capturing meaningful and accurate information [32].

Overall, the use of PROs in healthcare has the potential to enhance patient-provider communication and shared decision-making, leading to more patient-centered care and improved health outcomes. By incorporating PROs into routine clinical practice, providers can gain valuable insights into the patient's perspective, preferences, and priorities, ultimately leading to more personalized and effective care. As healthcare continues to evolve towards a more patient-centered model, the integration of PROs will play a crucial role in improving the quality and outcomes of care for patients [33].

Conclusion:

In conclusion, Patient-Reported Outcomes (PROs) are an important tool in healthcare quality measurement that can provide valuable insights into the impact of healthcare interventions on patients' health and well-being. By incorporating patient perspectives into the evaluation of healthcare services, PROs can help drive quality improvement initiatives, facilitate shared decisionmaking, and ultimately improve patient outcomes. Despite the challenges and limitations associated with PROs, their potential benefits make them a valuable addition to healthcare quality measurement efforts.

References:

- 1. Basch E, Deal AM, Kris MG, et al. Symptom monitoring with patient-reported outcomes during routine cancer treatment: a randomized controlled trial. J Clin Oncol. 2016;34(6):557-565.
- Greenhalgh J, Dalkin S, Gibbons E, et al. How do aggregated patient-reported outcome measures data stimulate health care improvement? A realist synthesis. J Health Serv Res Policy. 2018;23(1):57-65.
- Valderas JM, Kotzeva A, Espallargues M, et al. The impact of measuring patient-reported outcomes in clinical practice: a systematic review of the literature. Qual Life Res. 2008;17(2):179-193.
- 4. Velikova G, Booth L, Smith AB, et al. Measuring quality of life in routine oncology practice improves communication and patient well-being: a randomized controlled trial. J Clin Oncol. 2004;22(4):714-724.
- 5. Marshall S, Haywood K, Fitzpatrick R. Impact of patient-reported outcome measures on routine practice: a structured review. J Eval Clin Pract. 2006;12(5):559-568.
- Santana MJ, Feeny D, Johnson JA, McAlister FA, Kim D, Weinkauf J, Lien DC. Assessing the use of health-related quality of life measures in the routine clinical care of lungtransplant patients. Qual Life Res. 2010;19(3):371-379.
- Snyder CF, Aaronson NK, Choucair AK, et al. Implementing patient-reported outcomes assessment in clinical practice: a review of the options and considerations. Qual Life Res. 2012;21(8):1305-1314.
- 8. Pusic AL, Klassen AF, Scott AM, Klok JA, Cordeiro PG, Cano SJ. Development of a new patient-reported outcome measure for breast

surgery: the BREAST-Q. Plast Reconstr Surg. 2009;124(2):345-353.

- 9. Cella D, Riley W, Stone A, et al. The Patient-Reported Outcomes Measurement Information System (PROMIS) developed and tested its first wave of adult self-reported health outcome item banks: 2005-2008. J Clin Epidemiol. 2010;63(11):1179-1194.
- Gwaltney CJ, Shields AL, Shiffman S. Equivalence of electronic and paper-andpencil administration of patient-reported outcome measures: a meta-analytic review. Value Health. 2008;11(2):322-333.
- Cleeland CS, Wang XS, Shi Q, et al. Automated symptom alerts reduce postoperative symptom severity after cancer surgery: a randomized controlled clinical trial. J Clin Oncol. 2011;29(8):994-1000.
- 12. Jensen RE, Rothrock NE, DeWitt EM, et al. The role of technical advances in the adoption and integration of patient-reported outcomes in clinical care. Med Care. 2015;53(2):153-159.
- 13. Snyder CF, Jensen RE, Segal JB, Wu AW. Patient-reported outcomes (PROs): putting the patient perspective in patient-centered outcomes research. Med Care. 2013;51(8 Suppl 3):S73-S79.
- 14. Basch E. The missing voice of patients in drug-safety reporting. N Engl J Med. 2010;362(10):865-869.
- 15. Velikova G, Brown JM, Smith AB, et al. Computer-based quality of life questionnaires may contribute to doctor-patient interactions in oncology. Br J Cancer. 2002;86(1):51-59.
- 16. Greenhalgh J, Meadows K. The effectiveness of the use of patient-based measures of health in routine practice in improving the process and outcomes of patient care: a literature review. J Eval Clin Pract. 1999;5(4):401-416.
- 17. Cella D, Yount S, Rothrock N, et al. The Patient-Reported Outcomes Measurement Information System (PROMIS): progress of an NIH Roadmap cooperative group during its first two years. Med Care. 2007;45(5 Suppl 1):S3-S11.
- 18. Kotronoulas G, Kearney N, Maguire R, et al. What is the value of the routine use of patientreported outcome measures toward improvement of patient outcomes, processes of care, and health service outcomes in cancer care? A systematic review of controlled trials. J Clin Oncol. 2014;32(14):1480-1501.
- Howell D, Molloy S, Wilkinson K, et al. Patient-reported outcomes in routine cancer clinical practice: a scoping review of use, impact on health outcomes, and

implementation factors. Ann Oncol. 2015;26(9):1846-1858.

- Santana MJ, Feeny D, Johnson JA, McAlister FA, Kim D, Weinkauf J, Lien DC. Assessing the use of health-related quality of life measures in the routine clinical care of lungtransplant patients. Qual Life Res. 2010;19(3):371-379.
- 21. Holzner B, Giesinger JM, Pinggera J, et al. The Computer-based Health Evaluation Software (CHES): a software for electronic patient-reported outcome monitoring. BMC Med Inform Decis Mak. 2012;12:126.
- 22. Snyder CF, Aaronson NK, Choucair AK, Elliott TE, Greenhalgh J, Halyard MY, Hess R, Miller DM, Reeve BB, Santana M. Implementing patient-reported outcomes assessment in clinical practice: a review of the options and considerations. Qual Life Res. 2012;21(8):1305-1314.
- 23. Velikova G, Booth L, Smith AB, Brown PM, Lynch P, Brown JM, Selby PJ. Measuring quality of life in routine oncology practice improves communication and patient wellbeing: a randomized controlled trial. J Clin Oncol. 2004;22(4):714-724.
- Basch E, Deal AM, Dueck AC, Scher HI, Kris MG, Hudis C, Schrag D. Overall survival results of a trial assessing patient-reported outcomes for symptom monitoring during routine cancer treatment. JAMA. 2017;318(2):197-198.
- 25. Marshall S, Haywood K, Fitzpatrick R. Impact of patient-reported outcome measures on routine practice: a structured review. J Eval Clin Pract. 2006;12(5):559-568.
- Santana MJ, Feeny D, Johnson JA, McAlister FA. Use of the health utilities index in routine clinical care: a scoping review of the literature. Pharmacoeconomics. 2014;32(3):235-249.
- 27. Holzner B, Giesinger JM, Pinggera J, Zugal S, Schöpf F, Oberguggenberger AS, Gamper EM, Zabernigg A, Weber B, Rumpold G, et al. The computer-based health evaluation software (CHES): a software for electronic patient-reported outcome monitoring. BMC Med Inform Decis Mak. 2012;12:126.
- 28. Snyder CF, Jensen RE, Segal JB, Wu AW. Patient-reported outcomes (PROs): putting the patient perspective in patient-centered outcomes research. Med Care. 2013;51(8 Suppl 3):S73-S79.
- 29. Cella D, Yount S, Rothrock N, Gershon R, Cook K, Reeve B, Ader D, Fries JF, Bruce B, Rose M, et al. The Patient-Reported Outcomes Measurement Information System

(PROMIS): progress of an NIH Roadmap cooperative group during its first two years. Med Care. 2007;45(5 Suppl 1):S3-S11.

- 30. Kotronoulas G, Kearney N, Maguire R, Harrow A, Di Domenico D, Croy S, MacGillivray S. What is the value of the routine use of patient-reported outcome measures toward improvement of patient outcomes, processes of care, and health service outcomes in cancer care? A systematic review of controlled trials. J Clin Oncol. 2014;32(14):1480-1501.
- 31. Howell D, Molloy S, Wilkinson K, Green E, Orchard K, Wang K, Liberty J, Wang Z, Liberty L, Wang Z, et al. Patient-reported outcomes in routine cancer clinical practice: a scoping review of use, impact on health outcomes, and implementation factors. Ann Oncol. 2015;26(9):1846-1858.
- 32. Santana MJ, Feeny D, Johnson JA, McAlister FA, Kim D, Weinkauf J, Lien DC. Assessing the use of health-related quality of life measures in the routine clinical care of lung-transplant patients. Qual Life Res. 2010;19(3):371-379.
- 33. Holzner B, Giesinger JM, Pinggera J, Zugal S, Schöpf F, Oberguggenberger AS, Gamper EM, Zabernigg A, Weber B, Rumpold G, et al. The computer-based health evaluation software (CHES): a software for electronic patient-reported outcome monitoring. BMC Med Inform Decis Mak. 2012;12:126.