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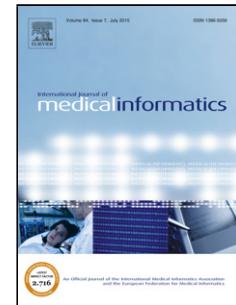
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• **Summary points**

What was known before the study?

- For a number of years, the Canadian health care system has debated the introduction of e-health and literally spent billions of dollars to implement part of it with the purpose of improving the quality and cost-effectiveness of patient care.
- In spite of being one of the most "connected" countries in the world, Canada has seen slow progress and has not produced a good value-for-money ratio.
- The quality of clinical decisions rests on the reliability of patient data and the clinical knowledge of decision makers, that is, physicians and supporting staff.
- Previous studies have investigated why e-health is encountering resistance among many physicians and why it has had mitigated interaction with clinicians.

What the study contributed to the body of knowledge;

- The study shows that, as technology becomes friendlier to use, the rate of adoption of e-health exchange system increases among physicians and patients along with the diversity of platforms.
- Contrary to anecdotal stories blaming the slow progress of adoption mostly on confidentiality of patients' files, this study reveals that intertwined factors including technological, psychological, sociological, and organizational are at least as important if not more important to consider.
- Progress is contingent upon the understanding of the technical skills of health care professionals (physicians and supporting staff), their specific work environment, and their buy-in into a system that has been proven to improve the quality of physicians' diagnoses and patients' healthcare.
- The Canadian National Physician Survey, with a target sample of 67,027 subjects in 2014, yields a wealth of information ready to be exploited and critical to assess the moving direction of e-health applications in the country.

Introduction

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