

Exploring the Utility of Health
Information Network Data as a
Surveillance/Screening Tool in
Addressing Health Implications of

Environmental Exposures
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 The findings and conclusions in this presentation are those of the author(s) and do not necessarily represent the official view of the Centers for Disease Control and Prevention.

Could Nationwide Concerns Over Per- and Polyfluoroalkyl Substances (PFAS) Be More Readily Addressed By Linking Contaminants in Water Data and Electronic Health Records (EHRs)?

- US EPA's 3rd Unregulated Contaminant Monitoring Rule required all public water systems that served more than 10,000 individuals to monitor for 6 PFAS between 2013-2015; the requirement also applied to 800 smaller systems
- Many of the health outcomes of interest are routinely collected at provider office visits (e.g. lipid profiles (total cholesterol, LDL, HDL, triglycerides, thyroid function/disease, cardiovascular disease, hypertension)
- If CDC's Environmental Public Health Tracking program could gain access to Electronic Health Records, it may allow for more timely preliminary assessment to address public health concerns

Desired Outcomes of Pilot to Assess PFAS in New Castle, DE

 Determine utility of EHRs as a screening/surveillance tool to detect "noise in the system"

 Determine the comparability of All Payer Claims Data and EHR data in identifying differences in outcomes and indicators in "exposed" vs "unexposed" populations

 Determine the value of EHR ecologic analyses in the design of long term analytic epidemiologic studies

For more information, contact NCEH 1-800-CDC-INFO (232-4636)

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