**Supplementary Table A: Data Collection Form for In-Person Observations**

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| Task Start Time: |  | | |
| Multitasking: 🖵 | Interruption: 🖵 | Location: Patient Room/Nurse Station/Hallway/Elevator/Other | |
| 🖵 Computer Use (EMR / Email / Reading Ref. / Unknown / Other)  🖵 Face to Face Communication  🖵 Phone – Cell / Land Line (Dictation / Talking / Typing)  🖵 Receive page  🖵 Patient Care (Admit New, Rounding on Patient, Procedure, Other)  🖵 Emergency Care  🖵 Professional Development (Conference /Other)  🖵 Personal  🖵 Travel | | | Notes: |

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| --- | --- | --- | --- |
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| Multitasking: 🖵 | Interruption: 🖵 | Location: Patient Room/Nurse Station/Hallway/Elevator/Other | |
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