

Reference Number: FOI/LHCH/2017023
From: Information/IT
Date: 25 January 2017
Subject: Electronic Patient Records

Q1 Please provide the supplier (company) name of Electronic Medical Records system currently in use at your Trust/hospital. Please provide all suppliers if more than one system is in place.

A1 [Our primary electronic patient record system is provided by Allscripts Healthcare Solutions Inc.](#)

Q2 Please supply the brand name of the Electronic Medical Record system currently in use at your Trust/hospital. Please provide all suppliers if more than one system is in place.

A2 [Allscripts Sunrise Enterprise / Sunrise Clinical Manager](#)