



GEORGETOWN UNIVERSITY  
GRADUATE SCHOOL OF ARTS AND SCIENCES

This is to certify that we have examined the thesis or dissertation of

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entitled

The Effect of Electronic Healthcare Record Adoption on Patient-specific Health Education Prescription,  
Time Utilization, and Returned Appointments: A Propensity Score Weighted Analysis

submitted to the faculty of Graduate School of Arts and Sciences

in partial fulfillment of the requirements for the degree of

Master of Public Policy in Public Policy

This dissertation is complete and satisfactory in all respects, and any and all revisions required  
by the final examining committee have been made.

Thesis Advisor	Signature	Date
Committee Member	Signature	Date
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Director of Graduate Studies	Signature	Date

This dissertation has been accepted by the Graduate School of Arts and Sciences.

For the Dean

Date