PUBLICATIONS

Peer-reviewed Journal Articles


**Book Chapters**


**Conference Proceedings**


Deng, X., Khuntia, J., & Ghosh, K. (2013). Psychological Empowerment of Patients with Chronic Diseases: The Role of Digital Integration (Nominated for Best Paper Award). *International Conference on Information Systems (ICIS)*. *(Acceptance rate: 10%-14%; only top 5% of the accepted papers are nominated for Best Paper award)*.


**Conference Presentations**


**Workshop Presentations**


Ghosh, K. & Jha, S. Examining Moderating Roles of Recognition, Perceived Group Need, And Perceived Future Returns on Participation in Open Source Software Projects. Presented at the Technology Innovation and Management (TIM) division workshop, Annual Meeting of the Academy of Management (AOM), San Antonio, TX, August, 2011.

Editorial Notes


Research Grants

Principal Investigator, “Building Digital Capabilities for Community Engagement to Provide Healthcare for The Underserved: Perspectives from Indigenous Population in Canada”, SBS Faculty Research Grant, $2400.00, Suffolk University, 2022-2023.

Principal Investigator, “A Pilot Study to Examine the Efficiency of Nurse Shift Electronic Reporting Process”, Office of Research and Sponsored Programs, $5000.00, Lamar University, 2015-2016.

Principal Investigator, “Reducing 30-day Readmission Rates among Chronic Heart Failure Patients”, PepsiCo, $5000.00, 2016.

Paper(s) Under Review

Ghosh, K., Al- Amin, M., Li, K., & Muhlestein, D. Health Information Technology to Advance Care in Accountable Care Organizations: Implications for Medicare Patients (status: under review at *Health Care Management Review*).

Working Papers


Applied Research (with Industry)

*Examine Technology Preferences of Medicare and Medicaid Patients:*
Study conducted patients visiting Chronic Disease Management Clinics affiliated to a Health Institution in Texas to understand their preferred choice of communication with care provider. Recommendations to leadership included (a) sending 'customized' automated messages to individual patients over voicemail on a weekly basis (b) integrating EMRs with the customized voicemail messaging system to improve care coordination. Initiatives improved care quality by 20% and patient satisfaction by 30%.

*Reduce 30-day Re-admission Rates among Patients with Cardiac Heart Failure:*
Study conducted at a Heart Clinic affiliated to a 400+ bed hospital to reduce 30-day re-admissions among heart failure patients and improve rates of reimbursements. Telemedicine/remote patient monitoring solution was recommended to manage post-operative care. These resulted in lowering 30- day re-admissions for heart failure patients and increased patient reimbursement rates by 18%.

*Clinical Workflow Practices for Bedside Reporting during Shift-change:*
Study to understand how technology improves clinical workflow practices during nurse-shift bedside reporting at a Medical-surgical unit of a large hospital located in Texas. Recommendations to administrators include redesign of software reporting tool ((that gets inputs from EMRs/Meditech) interface to make it more ‘intuitive’ and meet key reporting needs. The outcomes of these measures include increased direct patient-provider time by 20% and improved patient care experience by 25%.