cetic.br

ICT in Health Survey 2025

—

EXECUTIVE SUMMARY

nic.br cgi.br

Brazilian Network Information Center – NIC.br

CEO : Demi Getschko
CFO : Ricardo Narchi
CTO : Frederico Neves
Director of Special Projects and Development : Milton Kaoru Kashiwakura
Chief Advisory Officer to CGI.br : Hartmut Richard Glaser

Regional Center for Studies on the Development of the Information Society – Cetic.br

Executive and Editorial Coordination : Alexandre F. Barbosa
Scientific Coordination : Heimar de Fátima Marin
Research Coordination: Fabio Senne
Survey Project Coordination : Luciana Portilho and Manuella Maia Ribeiro (Coordinators), Ana Laura Martínez, Bernardo Ballardin, Daniela Costa, Fabio Storino, Leonardo Melo Lins, Lúcia de Toledo F. Bueno, Luísa Adib Dino, and Luiza Carvalho
Statistics and Quantitative Methods Coordination : Marcelo Pitta (Coordinator), Camila dos Reis Lima, João Claudio Miranda, Mayra Pizzott Rodrigues dos Santos, Thiago de Oliveira Meireles, and Winston Oyadomari
Sectoral Studies and Qualitative Methods Coordination : Graziela Castello (Coordinator), Javiera F. Medina Macaya, Mariana Galhardo Oliveira, and Rodrigo Brandão de Andrade e Silva
Process and Quality Management Coordination : Nádilla Tsuruda (Coordinator), Juliano Masotti, Kayky Ferreira, Maísa Marques Cunha, and Rodrigo Gabriades Sukarie
ICT in Health Survey Coordination : Luciana Portilho
Field management : Ipsos-Ipec: Rosi Rosendo, Guilherme Militão, Ligia Amstalden Rubega, Denise Dantas de Alcântara, and Paulo Vieira
Editing support team : Comunicação NIC.br: Carolina Carvalho and Leandro Espindola
Proofreading and revision in Portuguese : Tecendo Textos
Translation into English : Prioridade Consultoria Ltda.: Isabela Ayub, Lorna Simons, Luana Guedes, Luísa Caliri, and Maya Bellomo Johnson
Graphic design : Pilar Velloso
Publishing : Grappa Marketing Editorial (www.grappa.com.br)

Cetic.br Advisory Board

Carolina Botero Cabrera (Fundación Karisma), Eduardo Parajo (Durand Távola/Abranet), Raúl Echeberría (ALAI), Sonia Jorge (GDIP), and Tawfik Jelassi (UNESCO)

Brazilian Internet Steering Committee – CGI.br
(in April, 2026)

Coordinator
Renata Vicentini Mielli

Members
Alexandre Reis Siqueira Freire
Beatriz Costa Barbosa
Bianca Kremer
Cláudio Furtado
Cristiane Vianna Rauen
Cristiano Reis Lobato Flôres
Débora Peres Menezes
Demi Getschko
Henrique Faulhaber Barbosa
Hermano Barros Tercius
José Roberto de Moraes Rêgo Paiva Fernandes Júnior
Lisandro Zambenedetti Granville
Luanna Sant'Anna Roncaratti
Marcelo Fornazin
Marcos Adolfo Ribeiro Ferrari
Nivaldo Cleto
Pedro Helena Pontual Machado
Percival Henriques de Souza Neto
Rafael de Almeida Evangelista
Rodolfo da Silva Avelino

Executive Secretary
Hartmut Richard Glaser

Executive Summary ICT in Health 2025

The ICT in Health survey, conducted since 2013, investigates the adoption and use of information and communication technologies (ICT) in Brazilian healthcare facilities, allowing for the monitoring of the evolution of digital health in the country. In this edition, the results highlight the consolidation of digital infrastructure in health services, with the universalization of access to computers and the Internet, as well as advances in the provision of digital services to patients and the adoption of emerging technologies, such as Artificial Intelligence (AI). At the same time, challenges related to the interoperability of information systems, data security, and institutional capacity building persist, highlighting inequalities between types of facilities and administrative jurisdictions.

The "Analysis of Results" section of the survey presents more details about the results of this edition.

ICT Infrastructure

In 2025, access to computers and the Internet remained virtually universal in Brazilian healthcare facilities, reaching 99% of units, with no differences between the public and private sectors. Desktop computers are still the primary device (97%), followed by laptops (71%) and tablets (41%).

Significant differences can be observed in the usage profile of these devices. The use of laptops was more frequent in private facilities (83%) and in inpatient facilities with more than 50 beds (91%). Tablets were more prevalent in public facilities (53%) and in Primary Health Units (PHU) (63%), possibly associated with the activities of primary care teams.

97% OF PHU USE AN ELECTRONIC SYSTEM TO RECORD PATIENT INFORMATION

The universalization of connectivity reinforces its role as a structuring element for the functioning of health services, enabling the use of electronic systems, communication between professionals, and the provision of digital services.

Electronic health records and information exchange

The use of electronic systems to record patient information remained stable in 2025 (92% of healthcare facilities). Small improvements were observed in inpatient facilities with up to 50 beds (from 78% to 81% between 2024 and 2025) and in diagnosis and therapy services (SADT) (from 94% to 96%), indicating the continuity of the sector's computerization process.

This progress is reflected in the greater availability of patient data in electronic format, such as information related to patient demographics (92%), detailed clinical notes from encounters with clinicians or medical history (82%), and patient's diagnoses, health problems, or conditions (79%), which are available in this format in most healthcare facilities.

Despite this, the ability to exchange information between facilities is still limited. By 2025, 44% of units had systems that allowed for the sending or receiving of electronic referrals, with a higher incidence in the public sector (64%) compared to the private sector (28%). This trend is repeated in other types of clinical information

exchange, such as discharge reports and clinical data, demonstrating greater integration in public healthcare networks (Chart 1).

This edition features a new indicator that investigates the integration of healthcare facilities into the National Health Data Network (RNDS). The results indicate that 44% of them were integrated, more commonly in PHU (72%), in the public sector (64%), and in the North (53%) and Northeast (50%) regions (Chart 2). These results indicate progress in the implementation of national interoperability policies, although the fragmentation of systems still represents a significant challenge for care coordination.

Digital services for patients and telehealth

There has been a growing trend in the provision of certain digital services to patients in recent years. In 2025, viewing lab test results was offered by 39% of facilities, followed by booking appointments (34%) and booking lab tests (32%). The most significant increase occurred in online interactions with the healthcare team, which rose from 16% in 2023 to 35% in 2025, indicating greater use of digital communication channels.

The availability of these services varies depending on the type of facility. SADT showed greater availability of viewing lab test results (72%), while PHU stood out in interaction with health teams (42%) and viewing electronic medical records (25%), reflecting the specifics of the care provided.

The adoption of telehealth services also progressed. Teleconsulting was the most widespread service, present in 36% of facilities, followed by teleconsultation (28%), telediagnosis (27%), and telemonitoring (20%). These results indicate an expansion in the use of these technologies, with the potential to strengthen care coordination and expand access to health services.

Adoption of emerging technologies

The 2025 edition of ICT in Health introduced a methodological shift by expanding the investigation into the use of Big Data and AI to all facilities with computers, not just those with an information technology (IT) department, reflecting greater accessibility of these technologies and their use through external services.

BOX 1

—

INFORMATION SECURITY AND DATA PROTECTION

The adoption of information security practices remains limited in healthcare facilities. In 2025, 42% of units had an information security policy, with significant differences between the public sector (28%) and the private sector (54%). Inpatient facilities with more than 50 beds (72%) and SADT (64%) showed higher levels of adoption of these policies. Furthermore, around half of the facilities (47%) conducted information security training for their employees, a crucial measure to mitigate risks associated with the improper use of systems and the exposure of sensitive data.

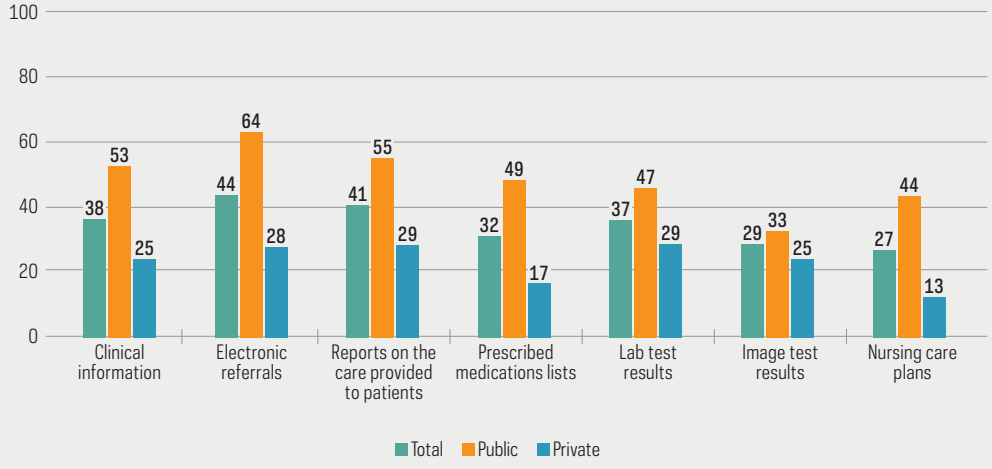
Regarding compliance with the Brazilian General Data Protection Law (LGPD), the results indicate that less than half of the facilities implemented the actions investigated by the survey. The most common practice was conducting internal awareness campaigns (46%), while more robust measures, such as appointing a Data Protection Officer (30%) and implementing response plans (30%), remain restricted to a smaller percentage of facilities. These results highlight challenges in consolidating data governance in the context of digital health.

CHART 1

—

Healthcare facilities by available electronic healthcare information exchange functionalities (2025)

Total number of healthcare facilities that used the Internet in the last 12 months (%)



28%
of facilities offer teleconsultation

27%
of facilities offer telediagnosis services

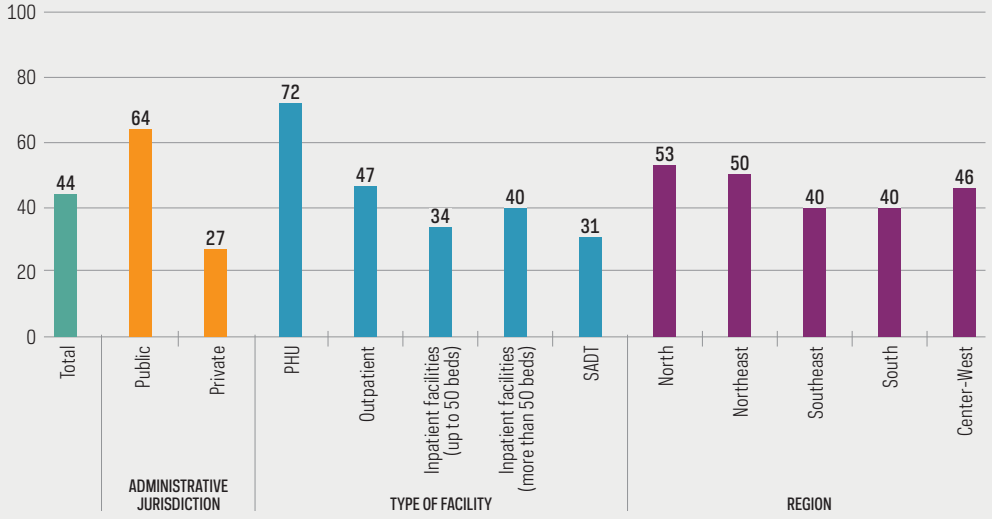
20%
of facilities offer telemonitoring

CHART 2

—

Healthcare facilities by integration to the RNDS (2025)

Total number of healthcare facilities that used the Internet in the last 12 months (%)



The results indicate that 9% of facilities conducted Big Data analytics, with a higher incidence in the private sector (11%) and among inpatient facilities with more than 50 beds (30%). The use of this technology is strongly associated with the analysis of data generated internally by the facilities, such as medical records and administrative files, as well as information from smart devices.

Cloud services, such as email (63%) and file storage or databases (57%), were present in more than half of healthcare facilities, while office software (32%) and processing capacity (38%) were the least used or available cloud tools.

Other emerging technologies investigated by the survey were used by a smaller percentage of facilities: 9% used the Internet of Things (IoT), and 5% used robotics.

15% OF INPATIENT FACILITIES WITH MORE THAN 50 BEDS USED IoT

ARTIFICIAL INTELLIGENCE

AI was used by 18% of healthcare facilities, more frequently in inpatient facilities with more than 50 beds (31%) and in SADT (29%), indicating a greater concentration of these technologies in contexts with greater technical and organizational capacity.

Among the facilities that use AI, generative language models stand out, present in 76% of them, followed by text mining tools (52%) and workflow automation (48%) (Chart 3). These technologies are mainly used for organizing clinical and administrative processes (45%), improving digital security (36%), and treatment efficiency (32%) (Chart 4).

Despite progress, significant barriers to adoption remain. Among inpatient facilities with more than 50 beds, the following stand out: high costs (63%), not being a priority (56%), and limitations related to data availability and professional training (51%). In SADT, factors such as lack of interest (60%), concerns regarding privacy (50%), and high costs (47%) also appear as significant obstacles.

The results of the ICT in Health 2025 survey indicate the consolidation of digital infrastructure in healthcare facilities, advances in the provision of digital services, and the adoption of emerging technologies. However, challenges related to interoperability, data governance, and reducing inequalities between different types of facilities persist. In this context, strengthening public policies and investments in training, infrastructure, and systems integration will be fundamental to ensuring that digital transformation contributes to a more efficient, equitable, and population-centered healthcare system.

Survey methodology and access to data

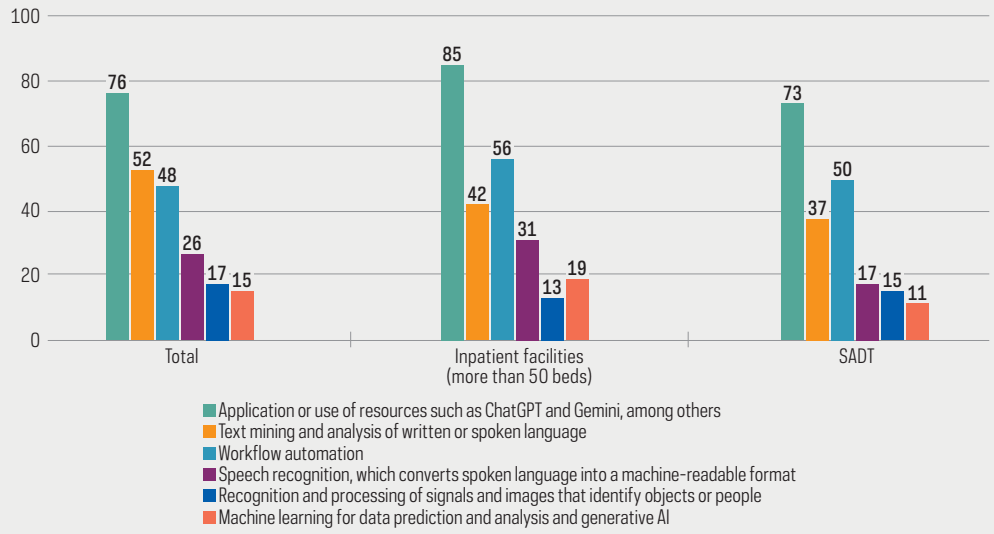
The twelfth edition of the ICT in Health survey collected data about healthcare facilities. Data was collected using telephone interviews and a web questionnaire with 3,270 managers between February and November 2025. The results of the survey, including the tables of estimates, totals, and margins of error, are available on the website of the Regional Center for Studies on the Development of the Information Society (Cetic.br)—https://www.cetic.br/en/. The methodological and data collection reports are available in both book format and on the website.

CHART 3

—

Healthcare facilities that used AI technologies, by type of tool (2025)

Total number of healthcare facilities that used AI technologies (%)



18%
of healthcare facilities used AI

31%
of inpatient facilities with more than 50 beds used AI

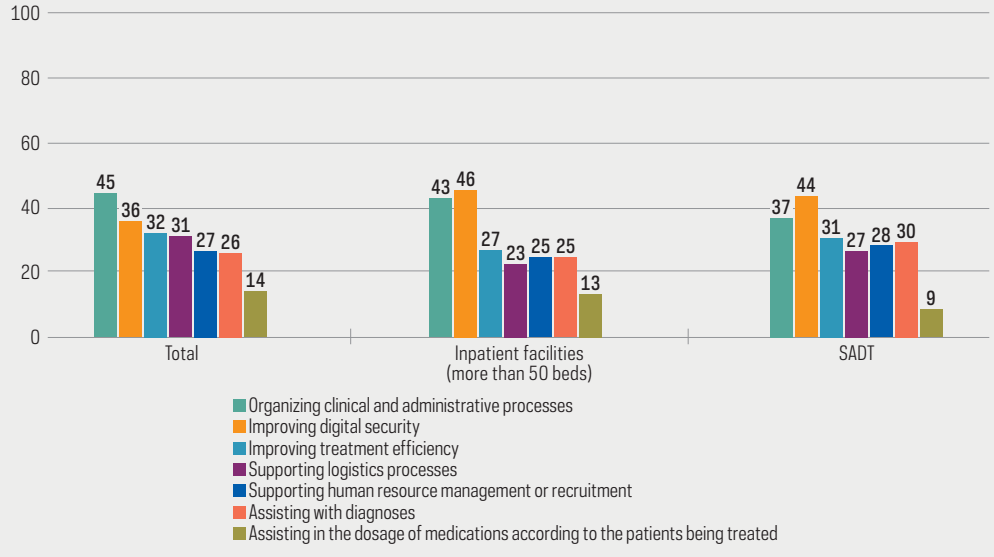
29%
of SADT used AI

CHART 4

—

Healthcare facilities that used AI technologies, by type of application (2025)

Total number of healthcare facilities that used AI technologies (%)



Access the full survey data!

In addition to the results presented in this publication, tables of indicators, questionnaires, information on how to access the microdata, and the presentation of the results of the launch event are available on the Cetic.br|NIC.br website, as well as other publications on the topic of the survey.

The tables of results (https://cetic.br/en/pesquisa/saude/indicadores/), available for download in Portuguese, English, and Spanish, present the statistics produced, including information on the data collected and cross-referencing for the variables investigated in the study. The information available in the tables follows the example below:

Code and indicator name

Population to which the results refer

B0 - HEALTHCARE FACILITIES BY AVAILABILITY OF AN ELECTRONIC SYSTEM TO RECORD PATIENT INFORMATION

Total number of healthcare facilities that used the Internet in the last 12 months

PERCENTAGE (%)		YES	NO	DOES NOT KNOW	DID NOT ANSWER	DOES NOT APPLY
TOTAL		92	7	0	0	1
ADMINISTRATIVE JURISDICTION	Public	91	8	0	0	1
	Private	93	6	0	0	1
REGION	North	85	14	0	0	0
	Northeast	90	8	0	0	1
	Southeast	93	5	0	0	1
	South	95	5	0	0	0
	Center-West	94	6	0	0	0
TYPE OF FACILITY	Outpatient	92	7	0	0	1
	Inpatient (up to 50 beds)	81	18	0	0	1
	Inpatient (more than 50 beds)	94	5	0	0	0
	Diagnosis and therapy services	96	3	1	0	0

Indicator responses

Results tabulation cut-outs: total (population as a whole) and characteristics of analysis (region, age group, etc.), different in each survey

Results: can be in % or totals

Source: Brazilian Network Information Center. (2026). *Survey on the use of information and communication technologies in Brazilian healthcare facilities: ICT in Health 2025* [Tables].

How to reference the tables of indicators

This publication is also available in Portuguese on the Cetic.br|NIC.br website.