

Iowa City HSR&D Developmental Program

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BACKGROUND / RATIONALE:

Telehealth has the potential to enhance patient care by increasing access to specialized and primary health care and decreasing costs.

OBJECTIVE(S):

The goal of this program was evaluation of specific applications: (1) triage of patients in the Iowa Veteran's Home (IVH) by staff in the Urgent Care Clinic (UCC) of the Iowa City VA Medical Center (ICVAMC); (2) follow-up evaluation of patients in subspecialty clinics; and (3) Chronic Wound Consultation clinics.

METHODS:

For the UCC portion of the study, consultation procedures were developed and pilot tested. Using established procedures, specialty clinic and wound consultation appointments are scheduled, except that the patient remained at a distant site. Data were collected on the outcome of the consultation, providers present, and patient and provider satisfaction.

FINDINGS / RESULTS:

For the UCC study, even though patients were quite favorable to the technology, no patients were referred for telemedicine urgent care consults. There were 75 specialty clinic consultations. Most of these are follow-up visits (97%, n=73). The most frequent outcome was a change in treatment plan and the patient remains at IVH (n=32, 43%) or no change in treatment (n=21, 28%). Physician's ratings were favorable overall. Patients were satisfied (72%) with the consult format. Patients believed the specialist understood their problem and felt it was easier to get medical care via telemedicine. For the Chronic Wound Consultation Clinic, inter-rater reliability for nine different wound characteristics ranged from 54 to 100 percent. The long-term care residents found the telehealth consultation to be as good as the in-person assessment. Nurses were equally satisfied with both the telehealth and in-person consultations.

STATUS:

Project work is completed.

IMPACT:

Telemedicine has the potential to improve access to specialized care for veterans, enhance training of health professions students, provide patient and staff education, improve patient satisfaction and clinical outcomes, and relieve family/caregiver burden. While there is great potential, it needs to be clear how and under what conditions telemedicine contributes to improved patient care. Two additional pilot projects were implemented, and at least two investigator-initiated research proposals were submitted. A methodology was developed to evaluate telemedicine programs and applications.

PUBLICATIONS:**Journal Articles**

1. Wakefield BJ, Buresh KA, Flanagan JR, Kienzle MG. Interactive video specialty consultations in long-term care. *Journal of The American Geriatrics Society* 2004; 52: 789-793.