

The Impact of telemedicine/teleconsultation on healthcare delivery in Rural India

*Dissertation submitted For the Partial fulfillment of the award of the Degree of
Master of Business Administration (MBA) in Hospital and Healthcare
Management*

Submitted By
Prabha Nishad
MBA in Hospital and Healthcare Management
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Under the supervision
S.P. Chattopadhyay
Assistant Professor



1, Prabhu Dayal Marg, Near Sanganer Airport, Jaipur (302029), Rajasthan, India
Phone: +91-141-3924700, Fax: +91-141-3924738
Email: iihmr@iihmr.edu.in
URL: www.iihmr.edu.in

2023

Declaration by Student

I hereby declare that this dissertation titled “**The impact of telemedicine/teleconsultation on healthcare delivery in Rural India**” is the bonafide record of my original research work. I declare that it has not been shared with any other university or institution for the award of any degree or diploma. Information derived from published or unpublished work from others has been duly acknowledged in the text.

Name of the student: Prabha Nishad

Date:

Certificate

This is to certify that Prabha Nishad in partial fulfillment of the requirements for the award of the degree of MBA (Hospital and Health Management from the IIHMR University, Jaipur has successfully completed her/his internship at Medyseva, Indore from 1st March 2023 - 30th May 23.

Place:

Preceptor/Head of the Organization

Date:

Name of the organization

2nd June, 2023

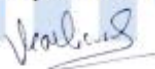
TO WHOMSOEVER IT MAY CONCERN

This is to certify that Ms. Prabha Nishad, Final Year Student of MBA-HHM from IIHMR University, Jaipur, Rajasthan has undertaken Summer Internship with our organization to have an overview and understanding of Rural Markets and Future of Telemedicine in Rural India, with our organization for the period from 1st March, 2023 to 30th May, 2023

During the period of her internship, she has been found to be very punctual, quick learner, detailed oriented and disciplined person always open to learn new things and come forward with new ideas. She will be an asset to the organization she joins.

We wish Ms. Prabha Nishad all the best and success in her career endeavours.

Yours faithfully
for **Medyseva Technology Private Limited**


(Dr. Vishesh Kasliwal)
MD



Acknowledgment

I want to sincerely thank and appreciate each of the following people for their contributions during my time at Medyseva Technologies.

First of all, let me thank Dr. Vishesh Kasliwal (Founder of Medyseva Technologies) for his essential advice, help, and encouragement during my internship. His guidance and leadership have played a crucial role in my professional development as a healthcare provider.

I also want to express my gratitude to my mentor, Mr. Mohit Jain for his constant support and direction while I was working at Medyseva Technologies. I am thankful for the chance to have studied with them; their knowledge, skill, and dedication have served as a constant source of encouragement and inspiration.

I also want to extend my sincere gratitude to Dr. Rachita Kasliwal, Co-founder of Medyseva Technologies, for giving me the chance to work and study in such a prominent healthcare facility. His vision and leadership have been crucial in establishing Medyseva Technologies as a premier center of excellence in healthcare.

Finally, I would like to give Dr. P.R. Sodani (President, IIHMR University, Jaipur) my sincere gratitude for allowing me to complete this internship. I now want to thank S.P Chattopadhyay, my academic mentor at IIHMR University, for his exceptional cooperation, priceless direction, and supervision. His meticulous and kind nature is evident in this report.

I also want to express my sincere gratitude to my respected university's Placement Cell for helping me with the internship application process and occasionally providing internship guidelines.

I view this chance as a significant turning point in my professional progress. To achieve my intended career goals, I will make every effort to use the knowledge and abilities I have acquired as effectively as I can. I will also keep working to make improvements.

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Abstract

Title: To study the impact of telemedicine/teleconsultation on healthcare delivery in Rural India.

1.Introduction: Medyseva is a healthcare startup focusing on Telemedicine in Rural India. It seeks to become the healthcare partner of all citizens in a way that gets access to high-quality healthcare services with ease and at affordable prices. It bridges the gap between urban doctors and rural patients through Medyseva Kendra's state-of-the-art technology, which covers the entire spectrum of services that are needed to keep one healthy - from having virtual consultations to getting surgeries, from booking diagnostic tests to digitizing medical records.

2. Research Question:

- What is the scope of telemedicine in healthcare?
- What is the awareness level of people of Rural Indore towards telemedicine/teleconsultation?

3. Objectives:

- To review the status of telemedicine usage in the rural area of Indore.
- To identify the challenges faced by the patient to access health care services in rural areas.
- To understand the future of telemedicine in rural areas of Indore.

4. Methodology:

- **Study design:** Cross-sectional study design
- **Study setting:** 50 samples will be collected from the data of the patient list and the health camp of Medyseva.
- **Sample size:** 50 Sample size.
- **Study tool:** Primary data was collected using a face-to-face survey questionnaire method. The random sampling method is used for sampling. Responses were collected from the data of the patient list and the health camp of Medyseva)

5. Analysis: Analysis and interpretation were done using MS Excel and graphical representations to find out the readiness to accept the concept of telemedicine/teleconsultation and the challenges faced by the patients also the future of telemedicine.

6. Conclusion:

Telemedicine is a useful platform for patients undergoing irregular healthcare services due to not

having proper healthcare facilities in the rural areas which triggers a set of clinical indicators which result in ineffective health management. Patients usually avoid illnesses due to irresponsible behavior towards their health, financial burden, or else the patient is dead before not providing proper healthcare facilities to their nearby locations. Telehealth technology is a very effective method for those patients who face barriers in accessing traditional in-person care such as transportation or scheduling conflicts. telemedicine offers new methods for improving healthcare access and quality by extending the reach of healthcare services, and improving the ability of rural areas of India.

CHAPTER - 1

INTRODUCTION

Telemedicine serves as a platform that utilizes information and communication services to deliver healthcare services, facilitating the exchange of valid data for the purpose of diagnosing and treating diseases and ultimately promoting individual health. Telemedicine's/teleconsultations have the potential to aid healthcare systems, organizations, and providers in expanding access to and enhancing the quality of healthcare in rural areas. The utilization of telehealth in rural regions for the delivery and support of healthcare services can alleviate challenges faced by patients, such as transportation issues related to seeking specialized care. Furthermore, telehealth has the capability to improve monitoring, timeliness, and communication within the healthcare system.

Initially, the primary objective of this innovative technology was to provide enhanced and easily accessible healthcare services for remote populations. However, with technological progressions and changing attitudes towards health care, telemedicine has gained exponential popularity. Its reach now extends far beyond inaccessible regions alone; it is revolutionizing the delivery of health-related information within the comfort of patients' homes while simultaneously reducing reliance on traditional medical facilities.

It must be emphasized that telemedicine enables geographically situated patients access to specialized medical attention electronically delivered through highly sophisticated systems. With its increasing prevalence in our current age, these platforms have proven their ability to provide top-notch quality care without causing a dent in one's wallet - an achievement worth celebrating.

With this cutting-edge technology, adherence to healthcare practices is enhanced and the bond between patients and their healthcare providers is strengthened. This innovative platform facilitates the transmission of intricate medical data such as images, audio, videos, and physical examination findings alongside comprehensive medical records. Accessible healthcare services are now available for people living in remote rural areas who can maintain autonomy with continuous health monitoring from afar.

Real-time therapy recording allows interactive communication with doctors that expedites acute problem management while also guaranteeing patient safety through critical treatment surveillance. Monthly evaluations ensure that compliance is tracked automatically - contributing to an overall improvement in care quality and clinical outcomes.

Patients utilize this platform to create, manage, transfer, and utilize electronic health data, as well as to access decision support and information services provided by physicians, nurses, and other healthcare workers.

Prior to the Covid-19 pandemic, telemedicine/teleconsultation had proven successful in managing patients in the United States, Canada, and Australia. Teleconsultation improved access to healthcare, aided in diagnosis, and enhanced the quality of life for patients in rural India.

In developing countries like India, there exists a significant disparity in the distribution of healthcare services. Despite approximately 75% of the Indian population residing in rural areas, more than 75% of doctors are based in cities. The majority of the 620 million rural Indians lack access to basic healthcare facilities. Telemedicine may emerge as the most cost-effective and expedient solution to

bridge the gap in rural healthcare.

In essence, telemedicine has the potential to enhance access to healthcare services and provide patients with cost and time savings.

BACKGROUND

Telemedicine has a number of benefits. It can increase the timely accessibility to appropriate interventions such as the rapid access and some services which may not be otherwise accessible could be accessed.

The healthcare delivery is really challenging in India especially during the Covid time. The particular reasons such as the large geographical distances and the limitation in the available resources.

The advantages of telemedicine can be stated as the cost saving, and patients don't need to travel to distant places for the consultation and treatment. Telemedicine can also play an important role in reducing the cases where there is no need for the patients to physically see the consultant.

The Covid-19 pandemic posed unique challenges. Even though telemedicine will not solve all the challenges, it can utilize to evaluate and manage the patients. Telemedicine systems can be conducted to prevent the risk to both patients and healthcare professionals. It can also provide rapid medical service to the community. Mainstreaming telemedicine services will reduce the inequities and barriers to access.

However, there has been concern on the practice of telemedicine. Lack of knowledge within the community can be a harbinger for the proper availability of the services.

The population must be aware about the services offered and it will increase the reach of the services. With telemedicine services, there is really a higher chance of maintenance of records and it must be documented. The services must be done with compliance to the existing legal framework.

CHAPTER - 2

REVIEW OF LITERATURE

Vinoth G. Chellaiyan 2019 Jun in his study talk about the uses of telecommunications technology to remotely diagnose and treat patients, particularly in underserved areas. Its origins date back to the early 20th century when ECG signals were transmitted via telephone lines. Over time, telemedicine evolved with contributions from NASA and ISRO. In 2005, India's Health Ministry established a National Telemedicine Taskforce which led to successful initiatives like ICMR-AROGYASREE, NeHA and VRCs. This approach helps family physicians by enabling access to specialists for close patient monitoring through services such as store-and-forward or real-time remote self-monitoring that offer educational healthcare delivery management worldwide including disease screening disaster relief efforts globally though it cannot solve all health care system challenges entirely on its own but can alleviate some of their burdens significantly.

Shengnan Chen March 2013 Telemedicine is becoming more popular as an option for remote medical care and education, but many ventures don't succeed beyond the pilot stage. To help upcoming telemedicine businesses, it's essential to study successful models. This article analyzes the business models of eight telemedicine ventures worldwide using Osterwalder's 'Business Model Canvas.' The selected companies show diverse value chains and apparent success rates. By comparing these models, we can learn valuable insights about business strategies and contextual factors that influenced them. Additionally, this article highlights key differences in telemedicine practices between developing and developed countries with hopes of inspiring new economically sustainable solutions to tackle healthcare challenges locally.

Catalina López, In his study a survey was conducted at the Centre for Telehealth in Bogotá among patients referred to real-time telemedicine consultations. Out of 281 teleconsultations over six months, contact numbers for 156 patients were obtained and 121 (78%) participated in a questionnaire. The results showed that 80% of respondents were satisfied with the service while another small percentage indicated they would use it again. More than half reported positive effects such as medical care improvement, time- and cost-savings but around one third felt face-to-face consultation was better than virtual interaction despite cognitive factors playing a more significant role rather than unfamiliarity with ICTs . These findings could be important to poorer countries especially if they have rural populations that are hard to reach by traditional means like doctors making visits etc'.

Sanjit Bagchi 2006 Mar In rural India, where the majority of the population dwells, healthcare inequality is rampant as only a quarter of medical professionals are stationed there. This results in over 620 million villagers being deprived of standard medical services. The government's allocation towards healthcare expenditure stands at an underwhelming 0.9% of GDP with minimal provisions for remote areas leading to archaic practices and professional segregation amongst countryside physicians owing to inadequate infrastructure at health centers.

Marginalized patients often bear exorbitant expenses when seeking treatment from specialty hospitals situated far away from their hometowns- they have no choice but travel long distances and spend on accommodation leading to further impoverishment. The Indian Institute Of Public Opinion (IIPO), conducted research that revealed nearly nine out of ten individuals were compelled to travel eight kilometers or more just for basic medical attention across these regions.

Telemed J E Health, December 2020 Telemedicine embodies a groundbreaking synergy between medical proficiency and technological advancement, offering critical healthcare access to remote communities. However, navigating the intricate web of ethical and legal quandaries requires careful consideration. To this end, we conducted an in-depth investigation into academic publications dating from 2010-2019 using PubMed, Scopus, and Web of Science databases while employing relevant keywords such as 'telemedicine,' 'ethics,' and 'malpractice.' Our exhaustive search encompassed diverse genres including research papers or qualitative studies with adherence to the Newcastle-Ottawa Scale criteria ultimately yielding a comprehensive analysis of 22 select articles.

Shoba Ramanadhan Telemedicine can help improve healthcare access for rural populations in India. However, addressing the comprehensive needs of these communities requires system-level solutions that prioritize equity and safety while serving marginalized individuals. The Business of Humanity approach offers strategic decision-making to create long-term value and support sustainability. A project in Tuver, a rural village in Gujarat, demonstrated this approach by implementing seven components such as power infrastructure, telehealth services, health promotion, and water/sanitation facilities with key partners like academic institutions & development foundations involved. The early evaluation emphasized the importance of engaging inter-sectoral partners who share similar values/goals to promote a synergistic ecosystem that supports telehealth services successfully overcoming challenges hindered by local intermediaries' effectiveness bridging gaps within technology use among tribal/rural communities ensuring adoption's continued growth potential over time.

Jessica Anderson 2021 Jun This case study delves into the rural healthcare facility's utilization of telehealth during the COVID-19 pandemic, with a keen interest in understanding their approach and its effectiveness. The research followed an action-based methodology that involved careful planning, implementation, review, and adaptation cycles. Our sources of information included literature reviews, document analyses as well as SWOT evaluations aimed at identifying weaknesses/strengths/opportunities/threats associated with implementing telehealth effectively.

To ensure optimal resource management for this program both now and in the future, staffing plans were put in place to guarantee sufficient human resources availability throughout all stages of implementation; thereby providing practical advice to managers/leaders facing similar challenges. Moreover, sustained improvement was achieved through continuous evaluation at different stages so that data could inform further progress while making appropriate addressing strategies regarding ongoing usage given limited published information about such circumstances.

John Craig January 2005 Telemedicine is a revolutionary healthcare approach that enables medical professionals to provide superior care and exchange crucial information across vast distances. This modern practice can be categorized by two types of interaction, namely real-time or prerecorded communication, and the mode of transmission used.

In rural areas specifically, tele-radiology stands out as a highly effective way of delivering healthcare services while optimizing efficiency since patients don't need long drives or flights just for diagnosis purposes alone!

Undoubtedly one of its greatest benefits is enhancing accessibility while maintaining high-quality standards without geographical boundaries being constraints any more than technological possibilities allow them too- which provides valuable insights into how we might optimize future delivery systems further.

However, research still needs improvement especially regarding randomized controlled trials conducted thus far if we are going fully evaluate its impact on people's everyday lives effectively over time – something regulators must take seriously when considering potential regulations around telehealth provisions moving forward.

5.RESEARCH QUESTIONS

1. What is the scope of telemedicine/teleconsultation in healthcare ?
2. What is the awareness level of people of Rural Indore towards telemedicine's/teleconsultation?

6.RESEARCH OBJECTIVES

1. To review the status of telemedicine usage in the rural area of Indore.
2. To identify the challenges faced by the patient to access the HealthCare services in rural areas.
3. To understand the future of telemedicine in rural area of Indore.

CHAPTER – 3

Materials and Methods

3.1 Nature and scope of the study : This is a cross sectional descriptive study and it seeks to identify the growth of telemedicine services among the rural areas of Indore . The major reasons for not being availing any type of telemedicine services are also aimed in this study. This study also aims at identifying and understanding the type of specialties they consulted and the major problems they faced during the consultation, their awareness regarding the telemedicine services available.

3.2 Sampling : The study included the respondents with ages 18 onwards, with consideration of the respondents with ages 18 year onwards as the age group play a role while seeking telemedicine healthcare services. The diversity of the respondents in the sociodemographic factors gave a wide perspective and input about the telemedicine services. The diversity will also provide an insight on the use of technology for availing the proper healthcare services.

Primary data was collected from 200 respondents using a questionnaire. The participants were a mixture of different categories such as people from rural area, people of different age groups and people with different income. The database included the direct and indirect contacts of the author from the school, college and society. Special attention was taken to ensure a diverse mix to the extent possible, in terms of age group, gender and rural areas.

The questionnaire was shared to the respondents with their consent, and the collected data was analyzed on MS-Excel. The study duration was three months started from 1st March 2023 and ending on 30th May 2023.

3.3 Data Collection Process: This comprehensive research endeavor showcases a quantitative and cross-sectional survey, which entailed the enthusiastic participation of individuals who willingly took part in filling out a questionnaire. The said questionnaire was thoughtfully designed to encompass both closed-ended and open-ended inquiries, administered via self-reporting methodology across two parts. The first section delved into sociodemographic features while the second phase explored participants' 14 distinct perceptions and experiences.

A judicious convenience sampling method was employed to reach an optimal sample size of 50 willing smartphone owners with exclusion criteria comprising incomplete responses - thus ensuring data integrity throughout this rigorous academic pursuit.

3.4 Research tool

The comprehensive survey delved into the realm of telemedicine services, encompassing a plethora of platforms and varieties. Its intent was to shed light upon the reasons that deter individuals from availing themselves of these facilities while gauging respondents' levels of cognizance and eagerness towards them. Moreover, it scrutinized variations in regional accessibility concerning different strata within society whilst also analyzing its utilization through an exhaustive literature review preceding the development of Medyseva's service.

3.5 Data analysis

The MS- Excel software was used to analyze the data collected from the respondents and the results & findings are presented.

RESULTS & FINDINGS

The graphical and tabular representation of the result of the survey is given below.

SECTION I – FREQUENCY AND PERCENTAGE DISTRIBUTION OF SOCIO-DEMOGRAPHIC VARIABLES OF GENERAL POPULATION.

SOCIODEMOGRAPHIC VARIABLES	FREQUENCY	PERCENTAGE
1. AGE		
• 18- 20	08	16%
• 21-40	28	56%
• 41-60	14	28%
2. Gender		
• Male	36	72%
• Female	14	28%
3. What is your level of education?		
• Illiterate	10	20%
• Up to Primary	12	24%
• Up to Middle	05	10%
• School	05	10%
• High School	14	28%
• Graduation	04	08%
• Post-Graduation		
4. What is your occupation?		
• Farmer	33	66%
• Shop owner	08	16%
• Private Job	05	10%
• Govt Job	00	-
• Business with employees	00	-
• Unemployed	00	-
• Student	04	8%
• Others (Specify)	00	-

Table no.1 (a) revealed that 8 (16%) belongs to age group of 18-20 and 28 (56%) belongs to age group of 21-40 and 14(28%) belongs to 41-60. It revealed that 36(72%) belongs to male gender and 14(28%) belongs to female gender. It shows that 10(20%) belongs to the category of illiteracy, 12(24%) category belongs to primary, 14(28%) categories belong to graduate and 04(08%) category belongs to high school. It represents that 33(66%) belongs to farmer category, and 08(16%) belongs to shop owner category.

PART -2 Graphical representation

Figure 4.1: Are you aware about telemedicine services?

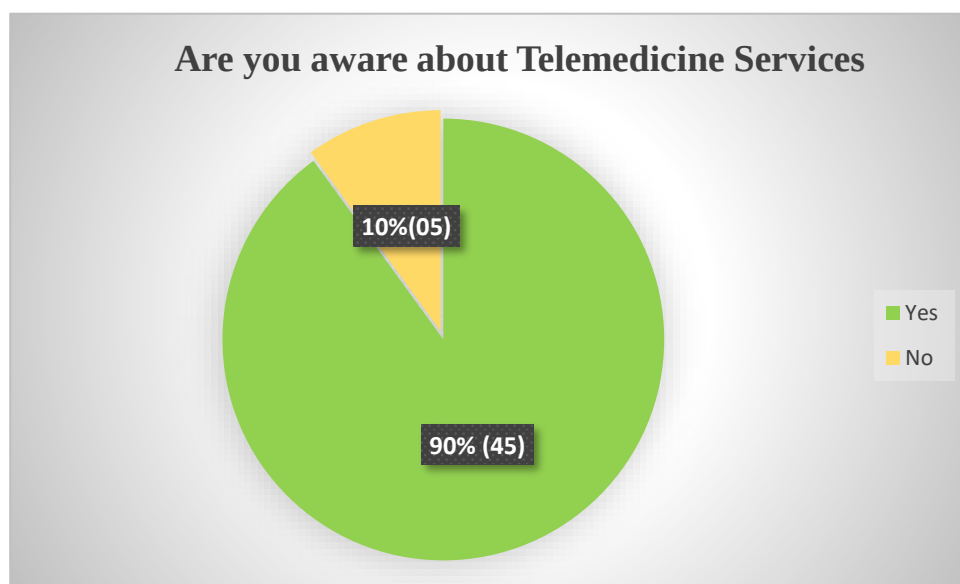
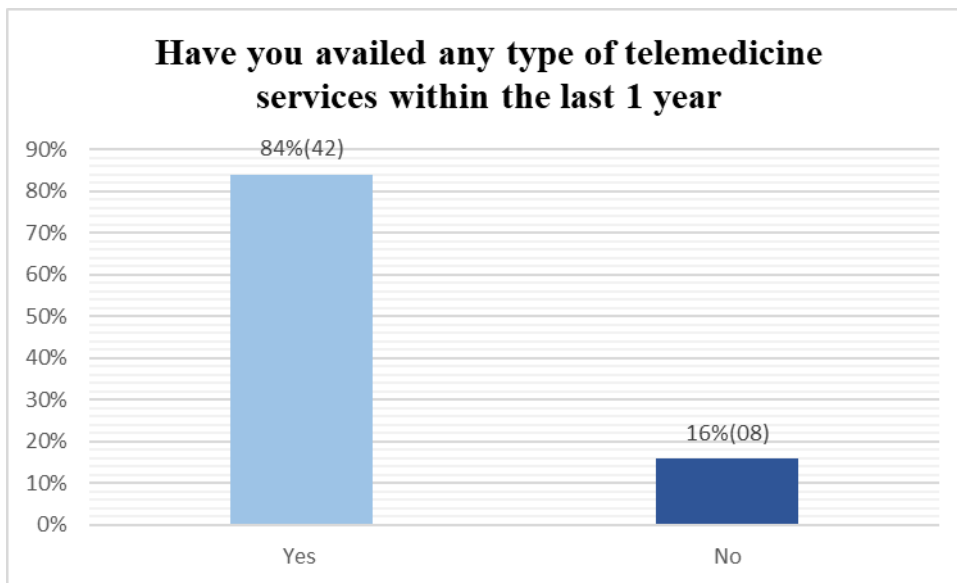


Figure 4.1 Pie chart showing the awareness about telemedicine services.

Majority of the respondent know about the telemedicine services like 90% of the respondents aware about the telemedicine services and 10% of the respondents are not aware of telemedicine services.

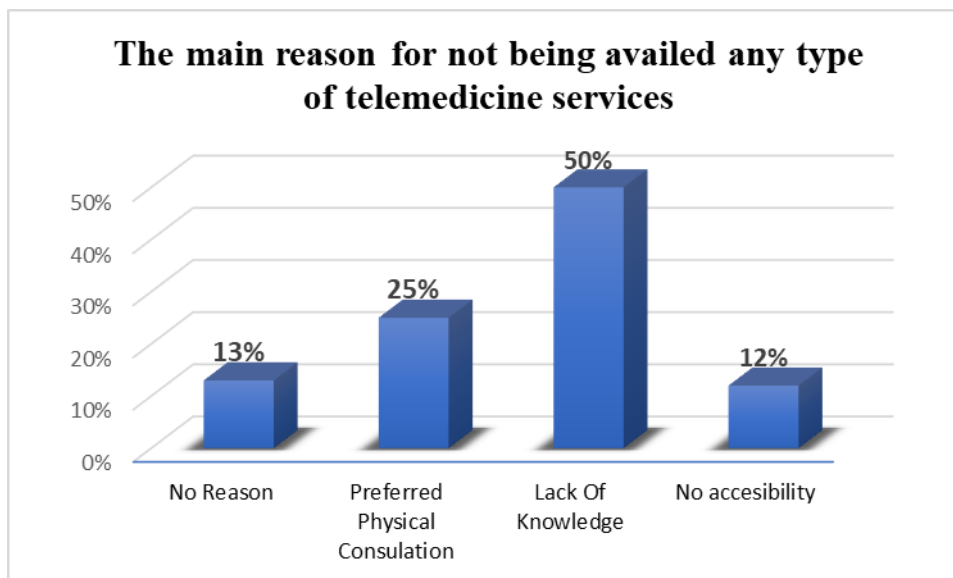
Figure 4.2: Have you availed any type of telemedicine services within the last 1 year?



In figure 4.2 shows that Most of the respondents were availed to the telemedicine services within the last 1 year, like 84% respondents availed the telemedicine services and 16% were not availed the telemedicine services.

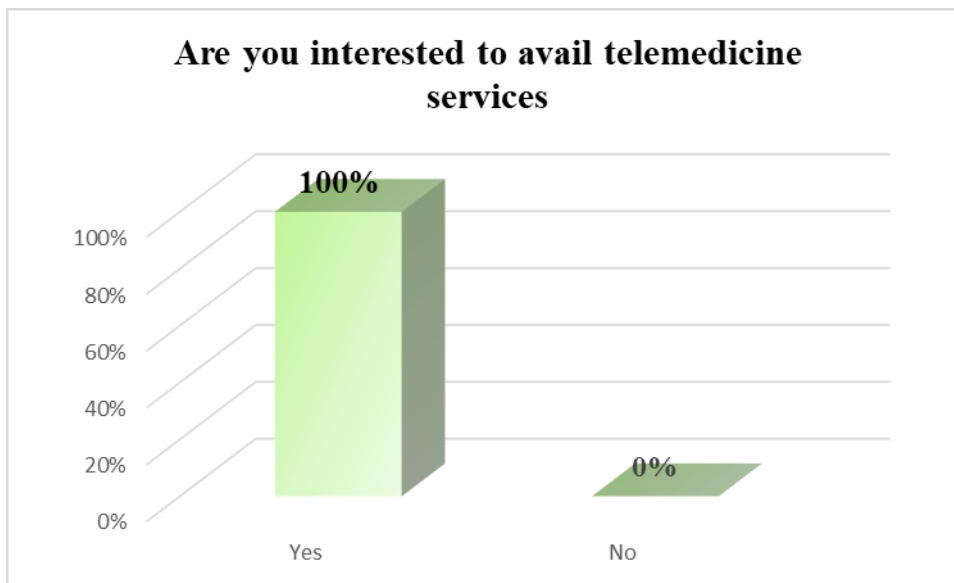
Participants with the response - No

Figure 4.3. what was the main reason for not being availed any type of telemedicine services?



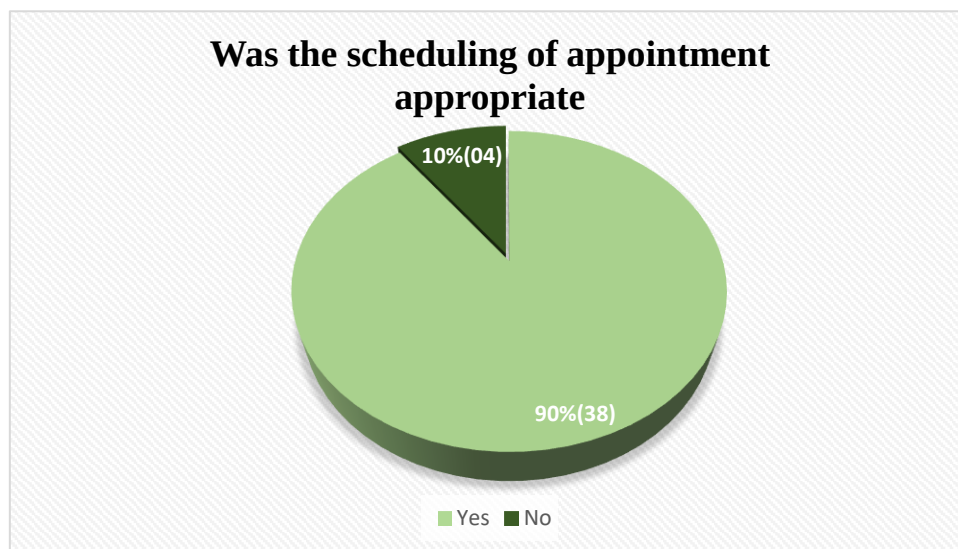
In Figure 4.3 showing this, there are 13% respondents are not availed any telemedicine services without any reason and 25% of respondents are preferred physical consultation and 50% of respondents are not having appropriate knowledge of telemedicine services and 12% of respondents are not having appropriate accessibility.

Figure 4.4. Are you interested to avail telemedicine services?



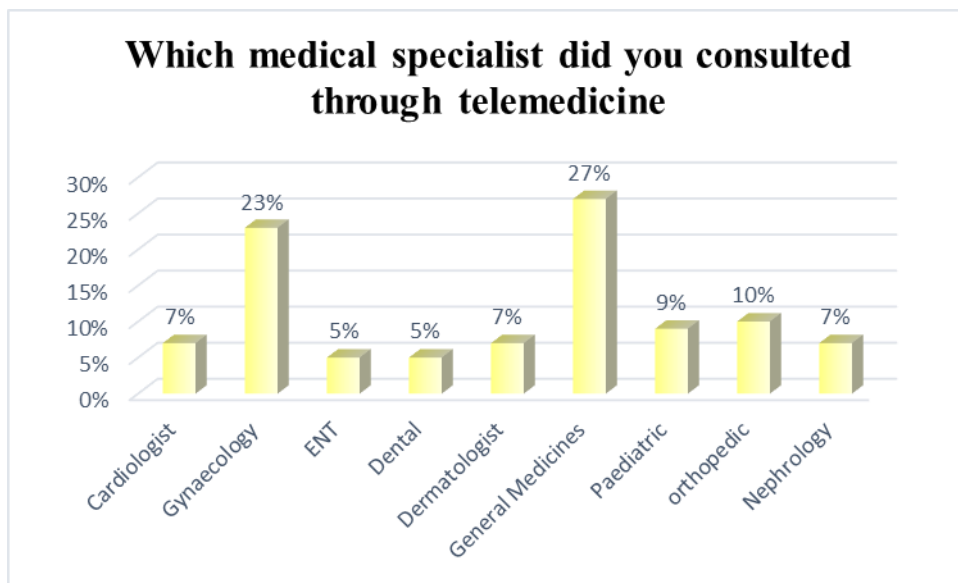
In Figure 4.4 showing 100% respondents are having the interest to avail the telemedicine.

Figure 4.5 Was the scheduling of appointment appropriate.



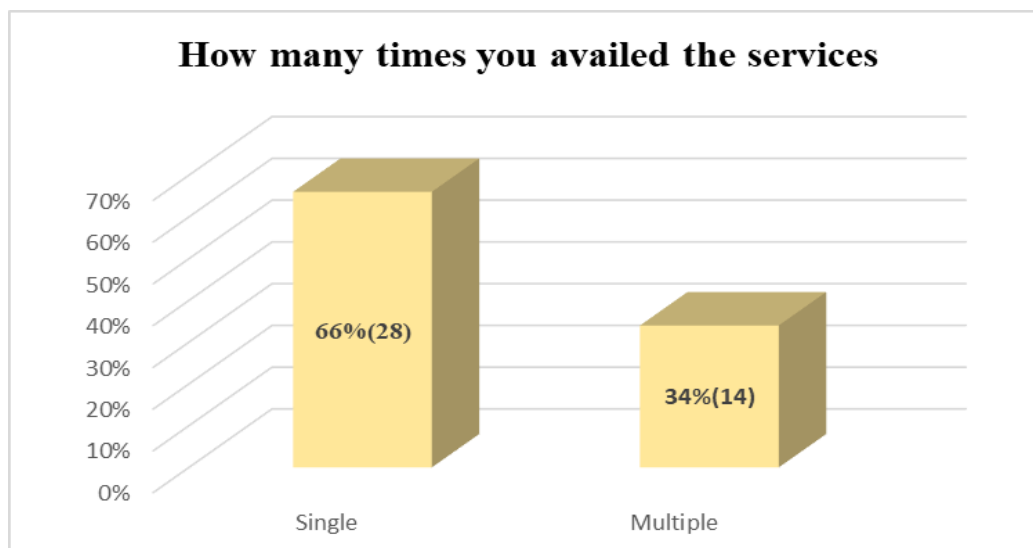
In figure 4.5 shows that those respondents who already availed telemedicine, out of those 90% of the respondent's scheduled appointments were appropriate and 10% of the respondents were experienced not satisfactory appointment.

Figure 4.6. Which medical specialist did you consulted through telemedicine



In figure 4.6 shows that there were maximum respondent were consulted through telemedicine was general medicine and the second most respondent consulted to the gynaecology.

7.How many times you availed the services.



In figure 4.7 shows that out 66% respondents are availed the services for single time and rest of the 34% respondent availed the services for multiple times.

8. What was the main reason for Experienced a Telemedicine services?

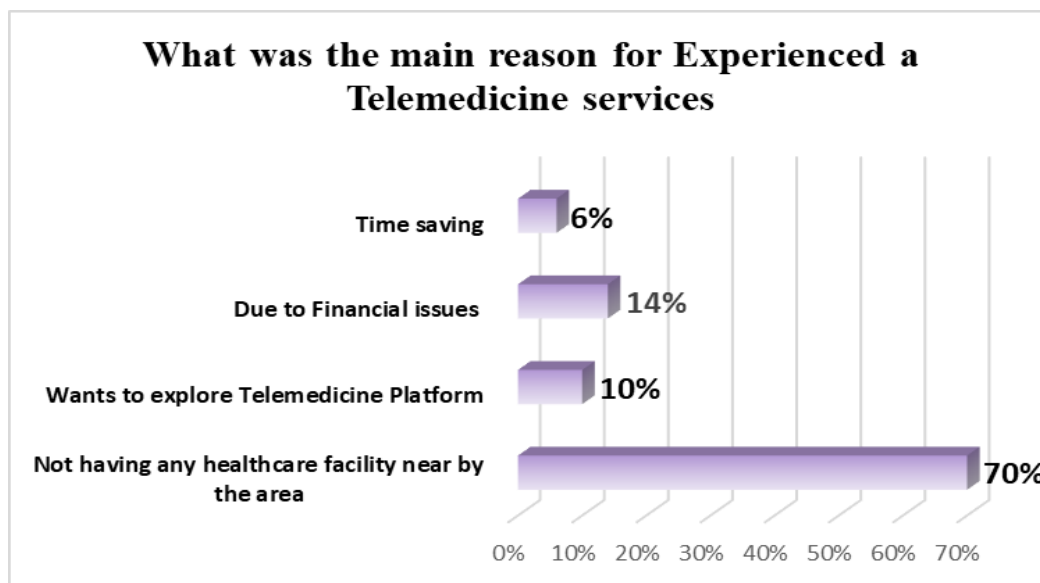
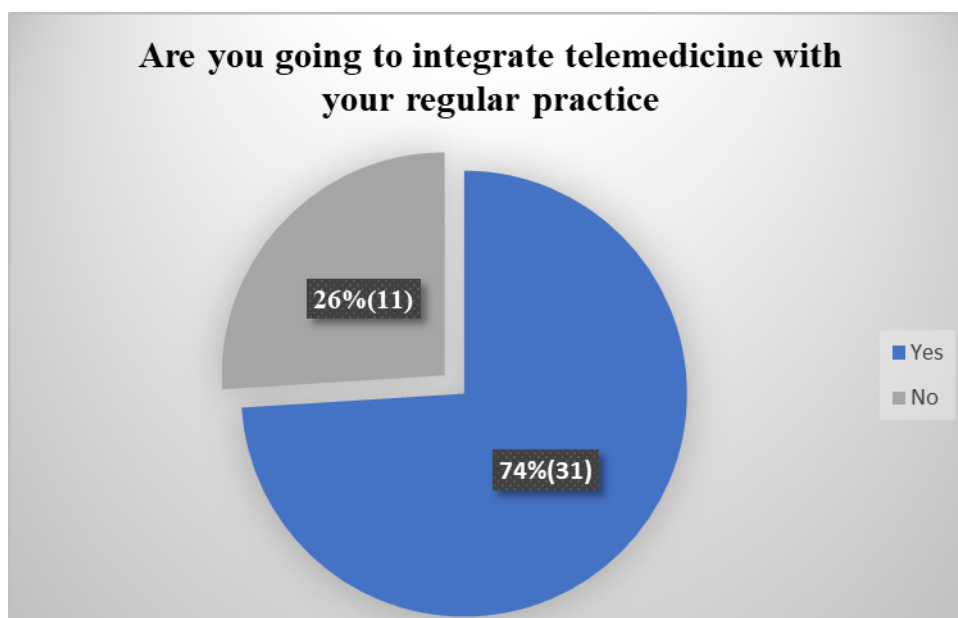


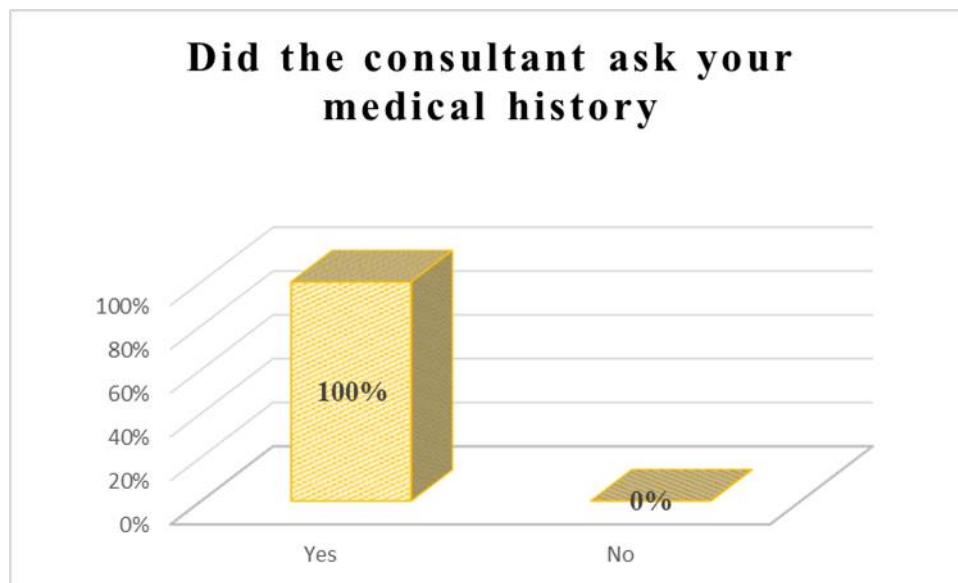
Figure 4.8 shows that the main reason for availed the telemedicine services due to not having any healthcare facilities near by the area and out of the respondents 14% respondents were experienced a telemedicine due to financial issues and 10% of respondents wanted to explore telemedicine services and remaining respondent were experienced due to time saving.

Figure 4.9 Are you going to integrate telemedicine with your regular practice.



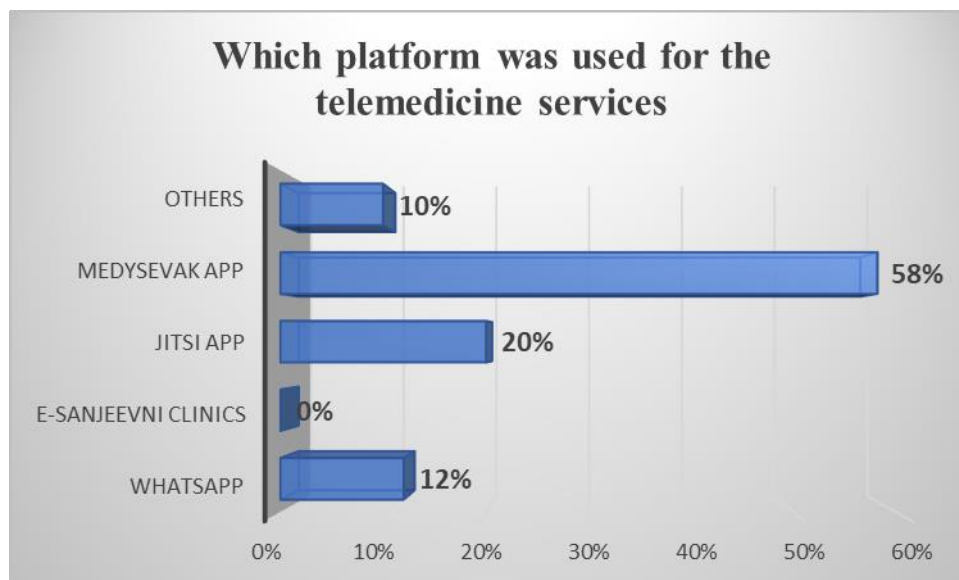
In figure 4.9 shows that there were 74% respondents were saying they are ready to integrate telemedicine with their regular practices and rest of 26% were not ready to integrate telemedicine with their regular practices.

10. Did the consultant ask your medical history



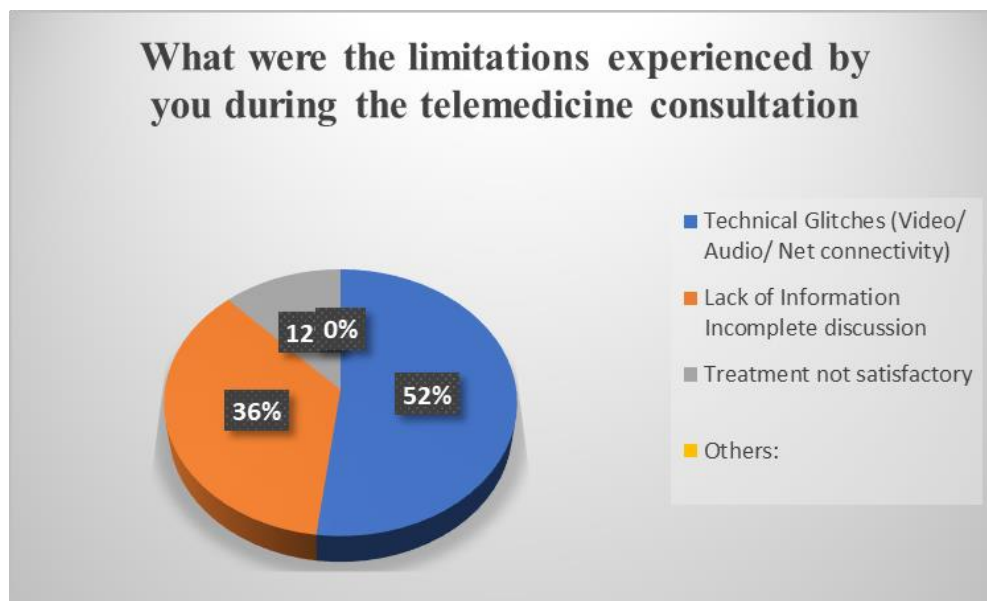
In figure 4.10 shows that 100% respondents asked about their medical history

11. Which platform was used for the telemedicine services



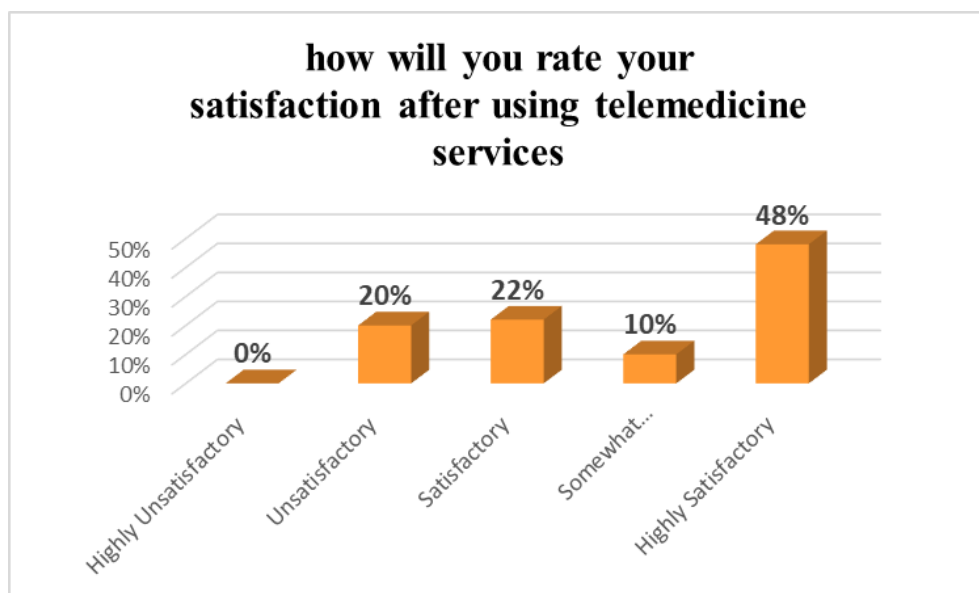
In figure 4.11 shows that's 58% respondents were used the Medyseva app and the 20% respondents were used the Jitsi app and the remaining respondents were used the whatsapp app and the rest of the respondents were used the others app.

12. What were the limitations experienced by you during the telemedicine consultation



In figure 4.12 shows that the 52% respondents experienced the technical glitch and 36% were Experienced incomplete discussion and 12% respondents were not satisfied with their treatment.

13. On scale of 1-5, (1 being the least and 5 being the maximum) how will you rate your satisfaction after using telemedicine services?



In figure 4.13 shows that the rate of satisfaction after using telemedicine services out of which 48% were highly satisfactory with the services and the out of the 22% respondents were saying they are satisfactory with the services and the 20% respondents were feels unsatisfactory and rest of the 10% respondents were somewhat satisfactory with the services

CHAPTER 4

Result and Discussion

Several studies have been conducted to assess the impact and feasibility of telemedicine services in different settings. A cross-sectional study conducted in rural areas of Indore by Medyseva revealed that the majority of respondents agreed that teleconsultation was helpful during their illness. They found telemedicine beneficial due to the lack of healthcare services, reduced travel expenses, and efficient utilization of time and resources, which aligns with the current study's findings. Similarly, another cross-sectional study conducted among health professionals in a resource-limited setting in Ethiopia identified lack of awareness, insufficient professionals, and technological issues as barriers to implementing telemedicine systems. These findings correspond with the current study's identification of technical glitches and lack of awareness as major obstacles to availing telemedicine services.

Additionally, a study conducted at a tertiary care government hospital in Uttar Pradesh focused on telemedicine services and found that the department of obstetrics and gynecology had the highest number of consultations using telemedicine. This study demonstrated an increasing trend in the utilization of specialty services through telemedicine, which is consistent with the participants' experiences in the current study, where they also sought various specialty services.

Furthermore, an observational study conducted at a rural tertiary care center in India aimed to evaluate the feasibility and utility of telemedicine services. It found that male patients utilized telemedicine services nearly twice as much as females, and gastrointestinal problems were the most common reason for seeking consultation. This study highlighted the gender variability in patient preferences for telemedicine and the availability of super specialty consultations through telemedicine services, which aligns with the current study's results regarding consultation patterns in rural areas of Indore.

CHAPTER 5

CONCLUSION

Based on the analysis of the results, the following conclusions can be drawn regarding telemedicine services:

1. Telemedicine services have gained popularity among the community, regardless of their area of residence, education, gender, occupation, and other sociodemographic backgrounds.
2. Respondents from all sections of society have utilized telemedicine services, with a higher utilization rate observed among those residing in rural areas.
3. The usage of telemedicine services by sick respondents highlights the importance of virtual treatment availability and its contribution to providing adequate healthcare support.
4. Telemedicine proves to be a feasible model for delivering comprehensive, compassionate, and professional healthcare to the community.
5. Telemedicine can be incorporated across all specialties and super-specialty consultations without any limitations.
6. Web and mobile phone-based platforms can be utilized to disseminate proper information about telemedicine.
7. Telemedicine services should offer a comprehensive mix of options to provide the best outcomes for the community.
8. Patient consent must be obtained before consultations, as it is a standard legal procedure.
9. Patient privacy must be safeguarded while availing telemedicine services through different platforms.
10. The treatment history of every patient should be recorded prior to treatment and medication, as it is a mandatory step in both physical and virtual consultations.
11. Technical glitches should be taken into consideration, and platforms should be designed to ensure smooth interactions.
12. Proper information about the importance and benefits of telemedicine services should be communicated to the community to change their preference for physical consultations and encourage the adoption of telemedicine.
13. Telemedicine has played a role in reducing healthcare inequalities by improving accessibility and availability of services remotely. While some individuals may still be unaware of telemedicine services, the community overall is willing to utilize them if provided.
14. The fear instigated by the pandemic has led people to stay at home and opt for telemedicine services. However, the acceptance of these services indicates a significant potential for growth and increased benefits to the people.

RECOMMENDATIONS

Some recommendations for strengthening the growth of telemedicine services are as follows:

1. Addressing the drawbacks and implementing necessary changes to ensure proper treatment delivery is crucial at present.
2. Educating the community and healthcare workers about the importance of telemedicine is essential.
3. The government can introduce more advanced services, such as e-Sanjeevini OPD services, to reduce healthcare costs and out-of-pocket expenses for the general public in private healthcare facilities.
4. Consultants should strictly adhere to obtaining consent and treatment history from patients.
5. Promoting follow-up consultations through telemedicine services can eliminate the need for unnecessary patient travel.
6. Telemedicine services should be made accessible, available, and affordable to everyone in the country.
7. Patient consent is mandatory and can be obtained through email, text, or audio/video messages. Additionally, it is important to collect the patient's medical history and relevant information.

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Annexure

Survey Questionnaire

PART-1

Sociodemographic data

1.Name of the Patient ?

2.What is your age (years) ?

3. What is your Gender?

- Male
- Female

4. Please enter the name of your location ?

5. What is your level of education?

- Illiterate
- Up to Primary
- Up to Middle School
- High School
- Higher Secondary Graduation
- Post-Graduation

6.What is your occupation?

- Farmer
- Shop owner
- Private Job
- Govt Job
- Business with employees
- Unemployed
- Student
- Others (Specify)

7. Do you have an account on these social media platforms (multiple options possible)

- WhatsApp
- Facebook
- Twitter
- LinkedIn
- Instagram
- Pinterest
- YouTube
- Others (Specify)

8. Do you use any of these online transaction platforms Wallets (multiple options possible)

- Google pay
- Paytm
- Phone Pay
- Mobikwik
- Crade pay
- Others (Specify).

3. Do you have an active WhatsApp account?

- Yes
- No

PART-II

1. Are you aware about Telemedicine Services?

- Yes
- No

2. Have you availed any type of telemedicine services within the last 1 year?

- Yes
- No

If No, please fill question 3 and 4. If yes, go to the question no 5

3. What was the main reason for not being availed any type of telemedicine services?

- Lack of Knowledge regarding telemedicine services
- Lack of knowledge to access services online
- Doctor prefers Physical Consultation
- I prefer physical consultation
- No accessibility
- Reluctance
- Privacy Issues
- Others (Specify)

4. Are you interested to avail telemedicine services?

- Yes
- No

5. Was the scheduling of appointment appropriate?

- Yes
- No

6. Which medical specialist did you consulted through telemedicine?

7. How many times you availed the services?

- Single
- Multiple

8. What was the main reason for Experienced a Telemedicine services?

- Not having any healthcare facility near by the area
- Wants to explore Telemedicine Platform
- Due to Financial issues
- Time saving
- Other reasons (specify)

9. Are you going to integrate telemedicine with your regular practice ?

- Yes
- No

10. What is the benefit of using Telemedicine for you?

- Specialist Consultation
- Counselling
- Obtaining second opinion
- No travel required
- Others (Specify)

11. Did the consultant ask your medical history?

- Yes
- No

12. Which platform was used for the telemedicine services?

- WhatsApp
- E-sanjeevni clinics
- Jitsi app
- Medysevak App
- Others

13. What were the limitations experienced by you during the telemedicine consultation? (Multiple options possible)

- Technical Glitches (Video/ Audio/ Net connectivity)
- Lack of Information Incomplete discussion
- Treatment not satisfactory
- Others:

14. On scale of 1-5, (1 being the least and 5 being the maximum) how will you rate your satisfaction after using telemedicine services?

- 1-Highly Unsatisfactory
- 2-Unsatisfactory
- 3-Satisfactory
- 4-Somewhat Satisfactory
- 5-Highly Satisfactory

Annexure 2

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