

**A QUANTITATIVE STUDY ON THE APPLICATION OF
TELEMEDICINE PLATFORM (MEDANTA E CLINIC)
IN INTERNAL MEDICINE OPD DURING COVID-19 IN
MEDANTA ,THE MEDICITY- GURUGRAM**

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SUBMITTED BY DR SANKALP CHAUDHARY
ROLL NO 1186

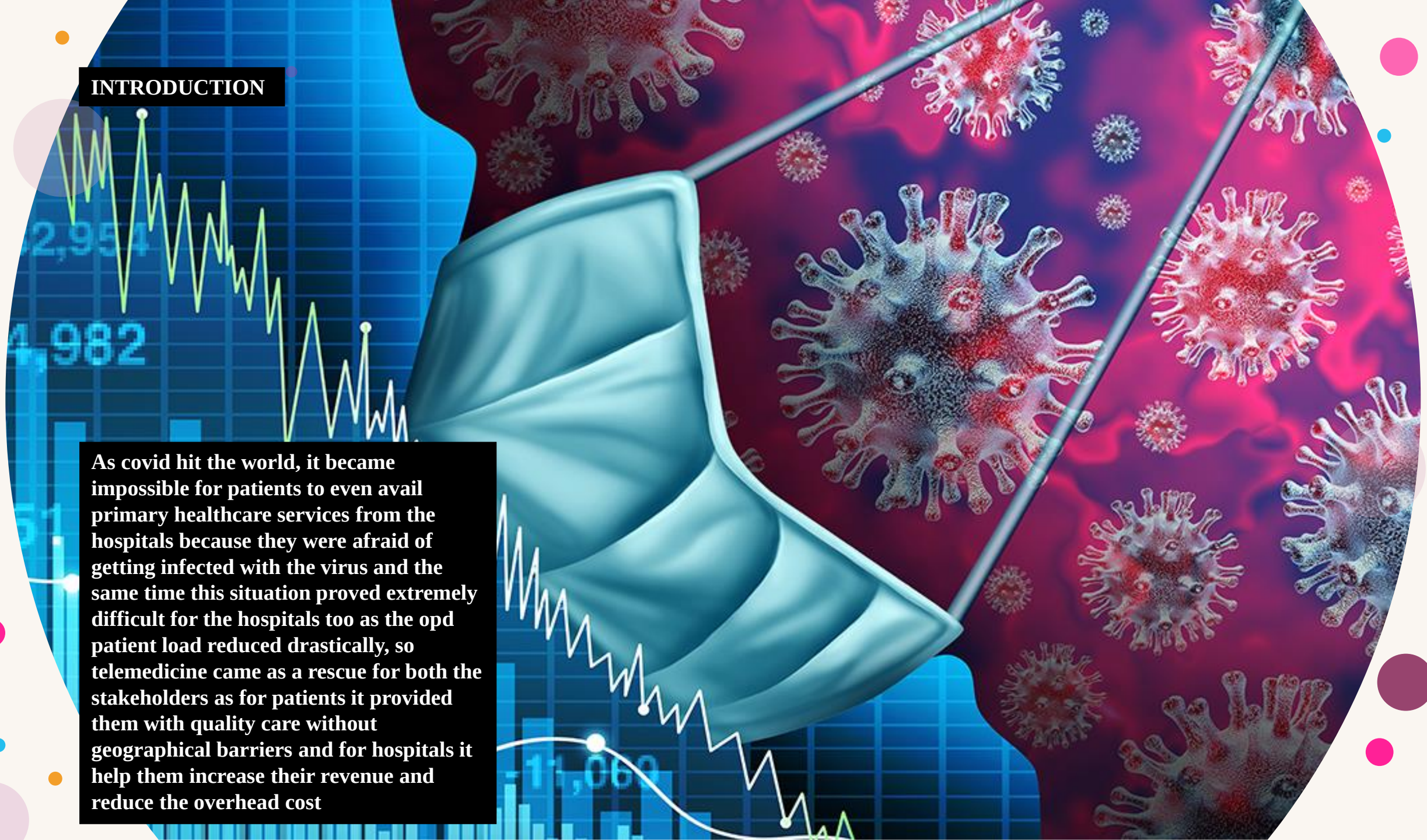
OBJECTIVES

- 1 TO UNDERSTAND THE TELECONSULTATION PATIENT PROFILE
- 2 TO IDENTIFY POSSIBLE REASONS FOR THE PROBLEMS FACED BY DOCTORS, PATIENTS AND CO-ORDINATOR DURING THE TELECONSULTATION PROCESS
- 3 TO SUGGEST MEASURES TO IMPROVE THE TELECONSULT PROCESS
- 4 TO IDENTIFY THE ROLE OF AN MBBS DOCTOR IN ASSISTING SPECIALIST DOCTOR DURING THE TELECONSULT PROCESS

BULLS EYE.

INTRODUCTION

As covid hit the world, it became impossible for patients to even avail primary healthcare services from the hospitals because they were afraid of getting infected with the virus and the same time this situation proved extremely difficult for the hospitals too as the opd patient load reduced drastically, so telemedicine came as a rescue for both the stakeholders as for patients it provided them with quality care without geographical barriers and for hospitals it help them increase their revenue and reduce the overhead cost



Teleconsultation proved to be a boon but had its own disadvantages for all the stakeholders involved in the process. Whether it is for the doctors who found it difficult to have a meaningful methodological conversation with patient in the short span of time allotted or it is for patients who found it difficult to adapt to new technology



This presentation explores all those advantages and disadvantages in the form of a quantitative research done by me in medanta.

METHODOLOGY

1) STUDY TYPE -
QUANTITATIVE, CROSS
SECTIONAL STUDY

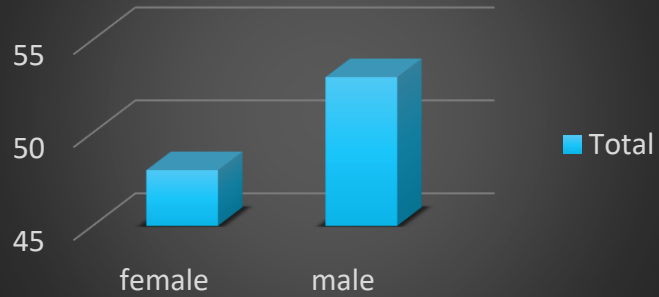
2) STUDY PERIOD -
17TH MAY TO 10TH
JUNE 2021

3) SAMPLE SIZE -101
(DATA
CONFIDENTIALITY)

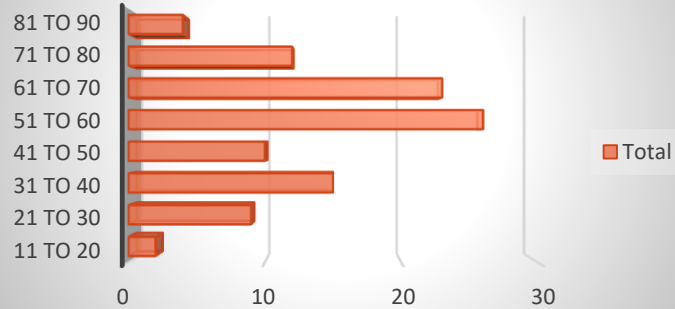
4) SAMPLING METHOD -
TELEPHONIC CONVERSATION

5) DATA TYPE -
QUALITATIVE, PRIMARY AND
SECONDARY DATA

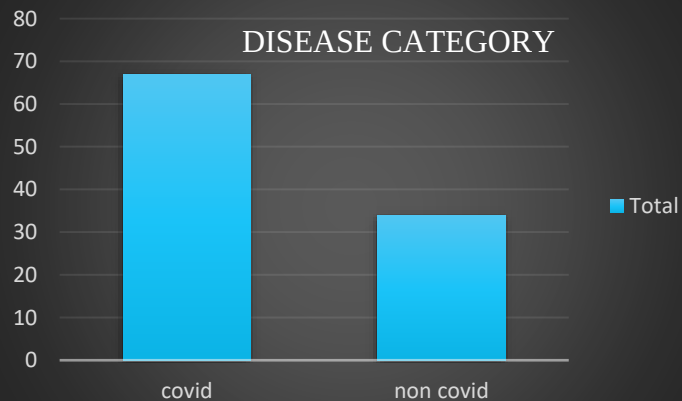
GENDER



AGE



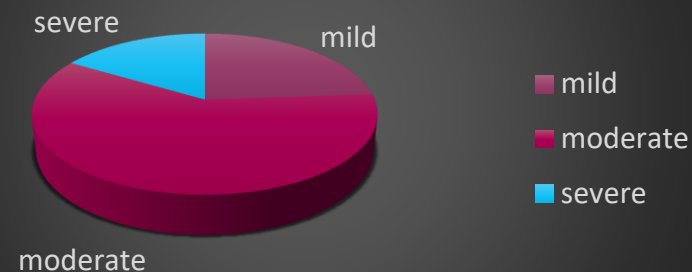
DISEASE CATEGORY



Findings

- 1) 52% patients were male and 48% were female
- 2) 66.3% patient (67) were covid patient and 33.7% (34) were non covid patient
- 3) Insights that can be drawn from this are that during the teleconsultation process men of the age group 51 to 70 who were having covid were more interested in availing teleconsultation services.

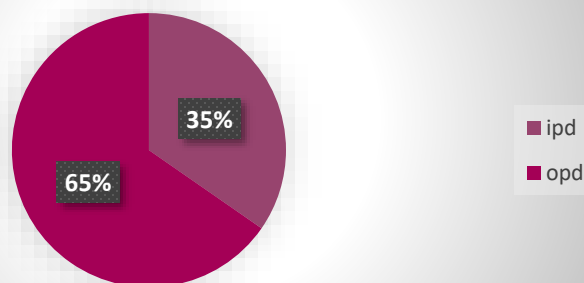
Covid Disease Type



Reason for Consult



IPD VS OPD

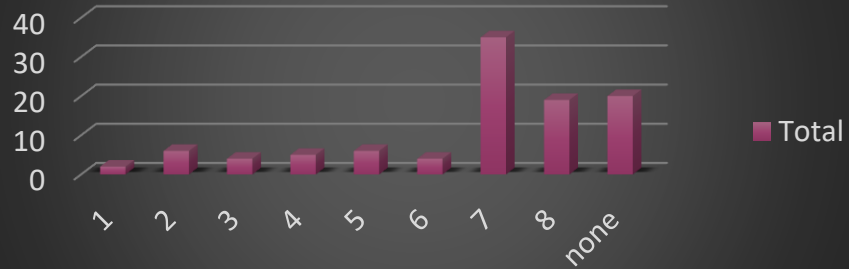


FINDINGS

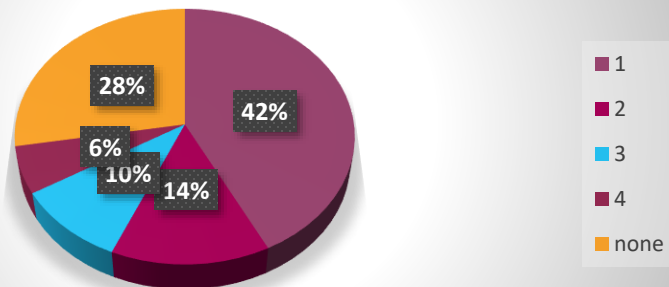
- 1) 24% had mild disease, 60% had moderate disease and 16% had severe disease
- 2) 65% patient (66) were opd and 35% patient (35) were ipd
- 3) 52.47% needed post covid follow up, 9.9% needed advice for Hypertension medication, 3.96% needed consult for thyroid medication, 5.94% needed consult for vaccination, 24.75% needed consult for others category which included back ache, stomach ache, breathing issues, skin rash etc.
- 4) It is quite clear that opd patients having covid with moderate disease were opting for teleconsultation in much higher proportion

Data Analysis of Challenges

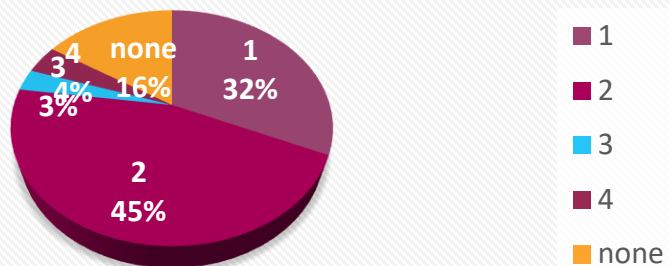
PROBLEM FACED BY CO ORDINATOR



PROBLEM FACED BY PATIENT



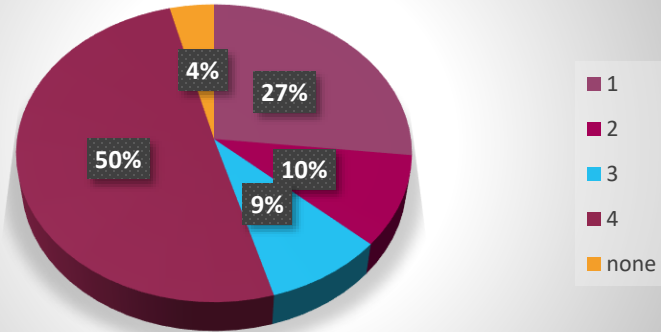
Problem faced by Doctor



Findings

- 1) Repeated calls of patients asking for follow up appointments (34.65%) is the MC challenge faced by co Ordinator
- 2) Not getting the follow up consult with the doctor within the stipulated time due to heavy pre booking (42%) is the MC challenge for patients
- 3) Patient taking too much time in explaining irrelevant points in his history taking process . (32%) and patient do not upload the reports on medanta e clinic app making it difficult for doctors to see the reports on the spot (45%) are the MC challenges faced by doctor

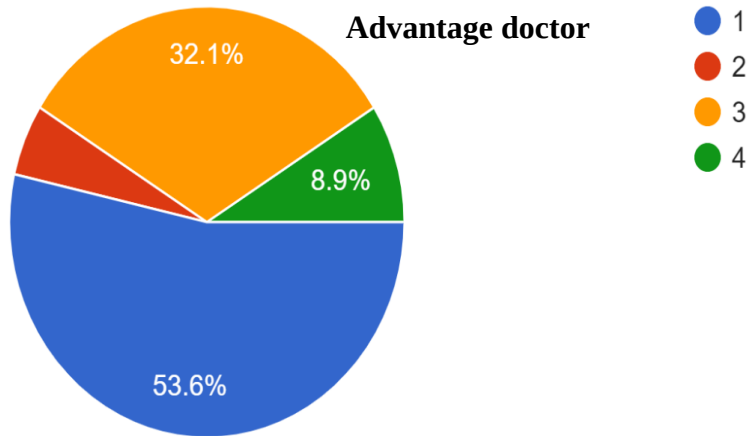
Advantage Patient



Data analysis Advantages



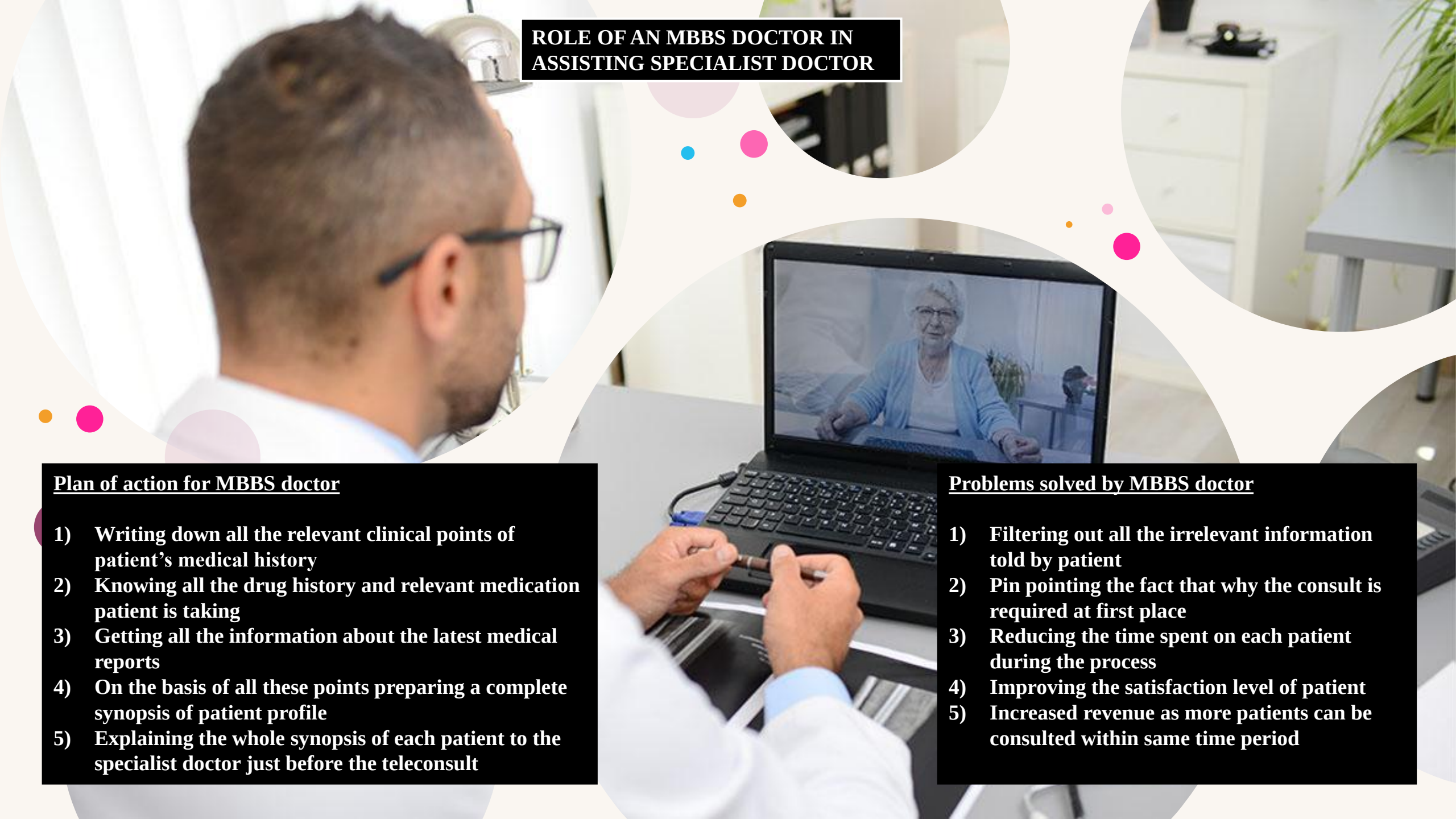
Advantage doctor



Findings

As it is quite obvious from the data that both patient and doctor felt that they were benefitted by the teleconsultation process due to

- 1) reduced risk of transmission of corona virus
- 2) reduced distance barrier and also lockdown barriers



ROLE OF AN MBBS DOCTOR IN ASSISTING SPECIALIST DOCTOR

Plan of action for MBBS doctor

- 1) Writing down all the relevant clinical points of patient's medical history**
- 2) Knowing all the drug history and relevant medication patient is taking**
- 3) Getting all the information about the latest medical reports**
- 4) On the basis of all these points preparing a complete synopsis of patient profile**
- 5) Explaining the whole synopsis of each patient to the specialist doctor just before the teleconsult**

Problems solved by MBBS doctor

- 1) Filtering out all the irrelevant information told by patient**
- 2) Pin pointing the fact that why the consult is required at first place**
- 3) Reducing the time spent on each patient during the process**
- 4) Improving the satisfaction level of patient**
- 5) Increased revenue as more patients can be consulted within same time period**

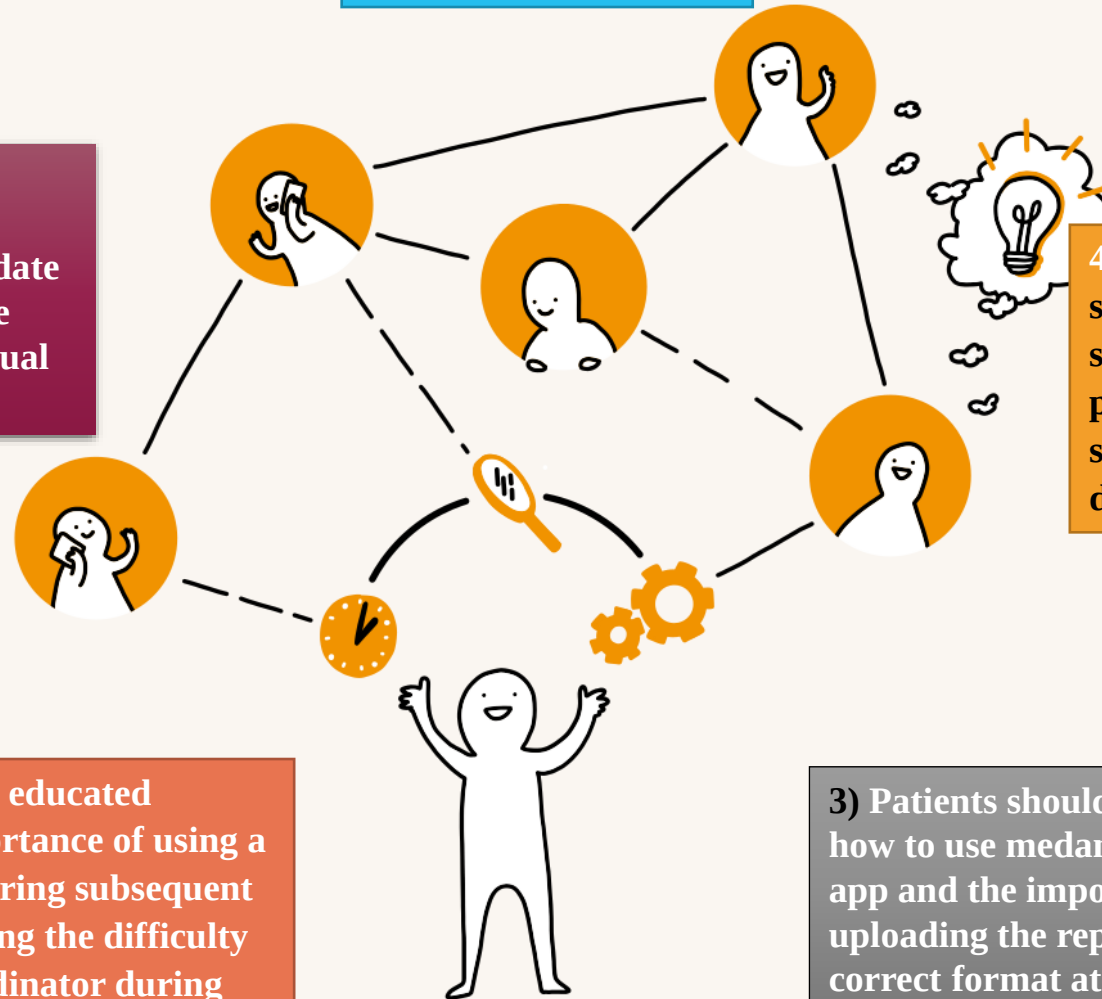
Recommendations

1) A proper time scheduling and patient tracking mechanism to be built to allow patients who are close to their follow up date should get their appointment booked on e clinic app directly by automation or manual process

2) Patients must be educated regarding the importance of using a single patient id during subsequent visits thus preventing the difficulty faced by the co Ordinator during the data extraction from the system

3) Patients should be educated how to use medanta e clinic app and the importance of uploading the report in the correct format at the right time

4) A new position of medical officer specially for the teleconsultation process should be started in hospital so that the process becomes smooth and the patient should not waste the time of specialist doctor doing irrelevant talks



CONCLUSION

1) In this new era of digitalisation where everything which can go digital is going digital. So Indian healthcare industry can't be left behind in this process. One of the most crucial barrier for the implementation of this new technology is that hospital owners and corporates want to see the financial return on investment of this technology in the bottom line of their balance sheet.

2) Now we need to understand the most important fact that when we are focusing on data and its application it takes a minimum time period of at least a decade to show its final result. As data needs to be cleaned and analysed and that takes time. All the corporate owners need to have a long term vision to see the far reaching implications of this technology



3) Also the fact that any new innovation and its application has some inherent challenges within it. Same is true for telemedicine also. But with continuous improvement and innovation all these challenges can be overcome

4) This Covid 19 pandemic has shown us the importance of digitalisation and has fasten up the process of innovation and during these uncertain it becomes crucial that technology like telemedicine should be given focus by keeping in mind the health and safety of humanity