

Abstract

Evaluation of Patient-Initiated Direct Care Mobile Phone–Based Teledermatology During The COVID-19 Pandemic

Jasleen Kaur, MBBS, MD; Priyanka Sharma, MBBS, MD; G P Thami, MBBS, MD; Maninder Sethi, MBBS; Shruti Kakar, MBBS, MD

Government Medical College and Hospital, Chandigarh, India

Corresponding Author:

Jasleen Kaur, MBBS, MD

Government Medical College and Hospital

Sector 32

Chandigarh, 160031

India

Phone: 91 172 260 1023

Email: jasleenksandhu21@gmail.com

Abstract

Background: With advances in telecommunication, especially smartphones, teledermatology services offered by specialists are now being directly requested by the patients themselves. This model is known as patient-initiated, direct care teledermatology. It has been pushed to the forefront due to the COVID-19 pandemic.

Objective: The objectives of this study were to determine patients' satisfaction and dermatologists' confidence when a diagnosis was made via direct care mobile phone–based teledermatology.

Methods: Patients availing direct care teledermatology services during the COVID-19 pandemic at a tertiary care center were subjected to a questionnaire within 5 days of the teleconsultation to assess patient satisfaction and opinions regarding using this model during and beyond the current COVID-19 pandemic. The dermatologists rated their confidence in making the clinical diagnosis on a scale from 1-10 for every case.

Results: Of 437 participants, 419 (95.9%) were satisfied with this mode of teledermatology. An overwhelming majority (n=428, 97.9%) felt safe consulting the dermatologist via teleconsultation and not having to visit the hospital during the COVID-19 pandemic. In addition, 269 (61.6%) patients agreed that they would be happy to use a teledermatology service beyond the COVID-19 pandemic. The dermatologists' confidence score in making an accurate diagnosis ranged from 3 to 10, with a mean of 9.20 (SD 1.12).

Conclusions: The high levels of patient satisfaction and dermatologists' confidence scores indicate that direct care mobile phone–based teledermatology may be a useful tool in providing dermatological services in appropriate settings and its use should continue to be explored beyond the COVID-19 pandemic.

Conflicts of Interest: None declared.

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KEYWORDS

direct care teledermatology; teledermatology; hybrid teledermatology; patient satisfaction; physician confidence; COVID-19

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