

Effects of COVID-19 on Telemedicine Practice Patterns in Outpatient Otolaryngology

Jennifer Shehan¹, Pratima Agarwal¹, David Danis², Melissa Ghulam-Smith², Jacob Bloom¹, Jacquelyn Piraquive¹, Lauren Tracy¹, and Jessica Levi¹

¹Boston Medical Center

²Boston University School of Medicine

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Abstract

Objective: Otolaryngology is considered high risk for Coronavirus Disease 2019 (COVID-19) exposure and spread. This has led to a transition to telemedicine and directly impacts patient volume, evaluation and management practices. The objective of this study is to determine the impact of COVID-19 on patient characteristics in relation to outpatient attendance, ancillary testing, medical therapy, and surgical decision making. Methods: A retrospective case series at an academic medical center was performed. Outpatient appointments from October 2019 (pre-COVID) and March 16-April 10, 2020 (COVID) were analyzed. Prevalence rates and odds ratios were used to compare demographics, visit characteristics, ancillary tests, medication prescribing, and surgical decisions between telemedicine and in-person visits, before and during COVID. Results: There was a decrease in scheduled visits during the COVID timeframe, for both in-person and telemedicine visits, with a comparable proportion of no-shows. There was a higher overall percentage of Hispanic/Latino patients who received care during the COVID timeframe (OR = 1.43; 95% CI = 1.07-1.90) in both groups, although primary language was not significantly associated with attendance. There were fewer ancillary tests ordered (OR = 0.54) and more medications prescribed (OR = 1.59) during COVID telemedicine visits compared with pre-COVID in-person visits. Conclusion: COVID-19 has rapidly changed the use of telemedicine. Telemedicine can be used as a tool to reach patients with severe disease burden. Continued healthcare reform, expanded access to affordable care, and efficient use of resources is essential both during the current COVID-19 pandemic and beyond. Keywords: COVID-19, Coronavirus, Telemedicine, Otolaryngology, Quality-improvement, Healthcare access

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