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## Comparison of Patient Satisfaction with Telehealth and In-Clinic Post-Operative Visits

Lillian Matthews

*Thomas Jefferson University, [lillian.matthews@jefferson.edu](mailto:lillian.matthews@jefferson.edu)*

Bryan Renslo

*Thomas Jefferson University, [bryan.renslo@jefferson.edu](mailto:bryan.renslo@jefferson.edu)*

Deborah T. Glassman, MD

*Thomas Jefferson University, [deborah.glassman@jefferson.edu](mailto:deborah.glassman@jefferson.edu)*

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## **SKMC Class of 2022: SI/DH Abstract**

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### **Comparison of Patient Satisfaction with Telehealth and In-Clinic Post-Operative Visits**

**Lillian Matthews, Bryan Renslo\*\*, Deborah Glassman, M.D.\***

(\*) indicates primary project advisor

(\*\*) indicates another student who is declaring the same project as primary for SI

**Introduction:** Telehealth has grown rapidly in the healthcare industry as a time efficient, affordable, and accessible means to provide care. Jefferson's Department of Urology currently employs telehealth for post-operative visits but its efficacy in post-nephrectomy patients has not been well studied. We aim to demonstrate that patient satisfaction is the same for telehealth versus in-clinic post-operative visits in nephrectomy patients. Secondarily we will examine distance saved for telehealth patients.

**Methods:** We will administer an IRB approved questionnaire to all nephrectomy patients via the EPIC® EMR platform after their post-operative visit. Each questionnaire will be specific to telehealth or in-clinic and asks the patients to rate their experiences on a 5-point Likert scale. The study time frame is from May 2019-November 2022. Time and distance data for secondary outcomes was extrapolated from the EPIC® EMR.

**Results:** Thus far there have been 35 in-clinic and 9 telehealth post-operative appointments. Patient satisfaction data will be collected in the future. Each telehealth patient saved a mean of 19 miles (6.9-32.5 miles) while each in-clinic patient traveled a mean of 30 miles (0.8-60.9 miles).

**Discussion:** Delays of the project have left us unable to determine patient satisfaction at present. Future establishment of equal satisfaction may lead to increased provider utilization of telehealth. Our secondary outcomes are positive, reporting that telehealth patients saved both time and travel distance on their appointments. If the questionnaire ultimately reveals satisfaction with telehealth, the combination with travel distance saved leads telehealth in a forward-looking direction.