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Outcomes Reporting in Regional Anesthesia Patients: A Comparison of Manual Phone Calls Versus Automated Phone App Messaging

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Outcomes Reporting in Regional Anesthesia Patients: A Comparison of Manual Phone Calls Versus Automated Phone App Messaging

Abstract

Automation of patient follow-up via mobile phone apps have the potential to save time for physicians, standardize responses from patients, and increase the patient response rate. Studies that assess the effectiveness of mobile phone-based surveys have been favorable, with completion rates of about 60% in the surgical population¹². The impact of mobile phone-based patient management in anesthesia deserves further study. This study examines the follow-up success rates of (1) manual phone calls (the current standard of care) vs. (2) automated patient outreach (APO) in patients who receive a regional anesthesia block procedure.

As part of normal follow up, anesthesia team members contact surgical patients who have received a regional nerve block to assess for potential side effects or complications. This study is comparing two different modes patient outreach. Patients will be randomized to receive either a manual phone call from a member of the anesthesia care team or the APO treatment. Of patients randomized to the APO treatment, automated messages will request the patient to download the "JeffAnesthesia" app and answer post-care surveys. Both treatment arms will contain the same survey questions. The primary endpoint, the follow-up success rate defined by a patient completing a set of survey questions, will be compared. Secondary endpoints, such as patient satisfaction, will also be recorded from the survey responses. Patient enrollment is ongoing, and data to formulate

¹ Semple, J.L., et al. (2015) Using a mobile app for monitoring post-operative quality of recovery of patients at home: a feasibility study. JMIR Mhealth Uhealth, 12(3). doi: 10.2196/mhealth.3929

² Gurland, B., et al. (2010) Using technology to improve data capture and integration of patient-reported outcomes into clinical care: pilot results in a busy colorectal unit. Dis Colon Rectum, 53(8), 1168-75. doi: 10.1007/DCR.0b013e3181d87468.

preliminary results is forthcoming to understand the impact of outreach modalities on patient outcomes reporting and satisfaction.