



Completion rate and satisfaction with telephone versus videoconference consults for pre-treatment medication history taking by cancer pharmacists.

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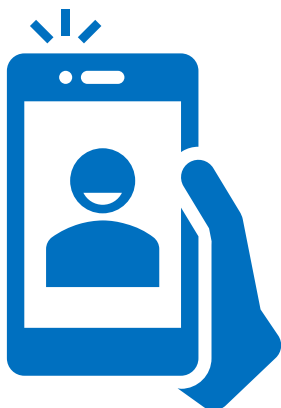
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Background:

- Primary aim: to compare the successful completion rates of pre-treatment medication history consults conducted by pharmacists with patients either via the current model of care of an unscheduled telephone consult (TC), or a scheduled videoconference consult (VC) model.
- Secondary aims: to examine pharmacist perceptions of the TCs and VCs and explore patient (+/- support person) perceptions of VCs.

Method:

- Completion data were collected and compared for the 2 modalities.
- In addition, pharmacists commented on any positive/negative factors impacting all consults.
- For the final 35 participants completing a VC, patients, support people, and pharmacists involved completed a survey.



Results:

- Significantly higher completion rate ($p < 0.0001$) for the VC model, with 94% (76 of 81) completed successfully compared to 72% (76 of 105) of the unscheduled TC.
- Pharmacists reported multiple factors impacting the success of the TCs including scheduling issues and patient factors.
- Survey responses revealed that 100% of patients/support people and 82% of pharmacists reported satisfaction with VCs.
- Surveyed participants noted some technical issues, however, the 'ability to show/view medication containers and/or labels' and 'convenience of scheduled time' were benefits of the VC model.



Conclusion:

- Pre-treatment medication history consults should be offered via videoconferencing to maximise success.