

Telemedicine RTI visits shorter when antibiotic prescribed

October 2 2018



(HealthDay)—In a direct-to-consumer (DTC) telemedicine setting,

respiratory tract infection (RTI) encounters in which antibiotics are prescribed are shorter than other encounters, according to a research letter published online Oct. 2 in the *Annals of Internal Medicine*.

Kathryn A. Martinez, Ph.D., M.P.H., from the Cleveland Clinic, and colleagues examined the correlation between prescription outcome and length of encounters for RTIs in a DTC telemedicine platform. For each encounter, the prescription outcome was categorized as none, antibiotic, or non-antibiotic. Data were included for 13,438 encounters; 49, 14, 12, and 25 percent of the encounters were for sinusitis, pharyngitis, bronchitis, and other RTIs, respectively.

The researchers found that physicians prescribed [antibiotics](#), non-antibiotics, and nothing in 67, 13, and 20 percent of encounters, respectively. There was variation in the rates for prescribing antibiotics, from 15 percent for other RTIs to 91 percent for sinusitis. The mean unadjusted encounter length was 6.6, 8, and 7.5 minutes when antibiotics, non-antibiotics, and nothing were prescribed, respectively. In adjusted analyses, encounters that resulted in nothing being prescribed were 0.33 minutes longer than those resulting in antibiotic [prescriptions](#), while those resulting in a prescription of non-antibiotics were 1.12 minutes longer.

"Because telemedicine encounters are short and physicians are often reimbursed by [encounter](#) volume, antibiotic stewardship efforts that lengthen visits even slightly may be challenging to implement," the authors write.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

Copyright © 2018 [HealthDay](#). All rights reserved.

Citation: Telemedicine RTI visits shorter when antibiotic prescribed (2018, October 2) retrieved 9 April 2024 from <https://medicalxpress.com/news/2018-10-telemedicine-rti-shorter-antibiotic.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.