

Identified Problem

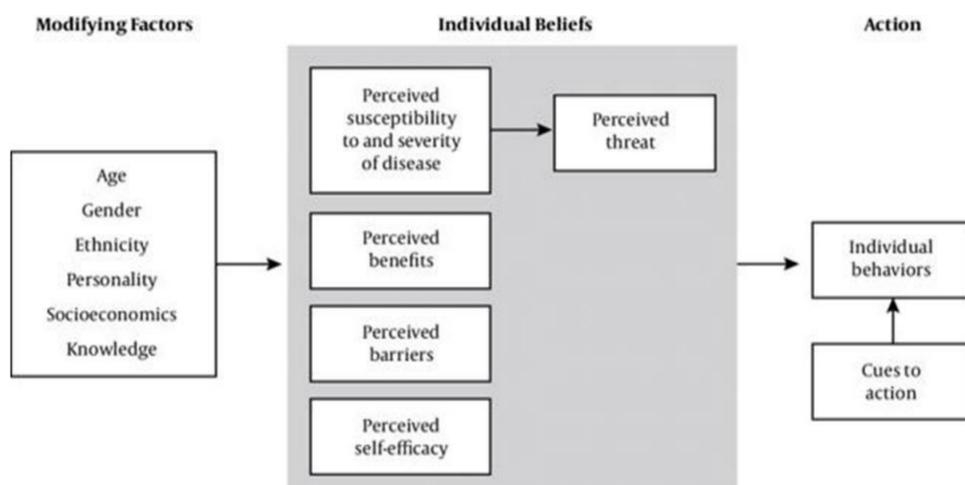
- Only one-half of patients diagnosed with type 2 diabetes ever reach a target hemoglobin A1C level less than 7.0 (Nyenwe et al., 2011).
- Insufficient patient-provider communication identified as a cause of decreased compliance in type 2 diabetes management (Brewster et al., 2020)

Proposed Solution

- The three-step telemedicine approach is aimed at increasing provider-patient communication in order to increase adaptation and effective management of type 2 diabetes without negatively impacting the stewardship of practice resources

Theoretical Framework

The Health Belief Model



Methodology

A Three-Step Telemedicine Approach

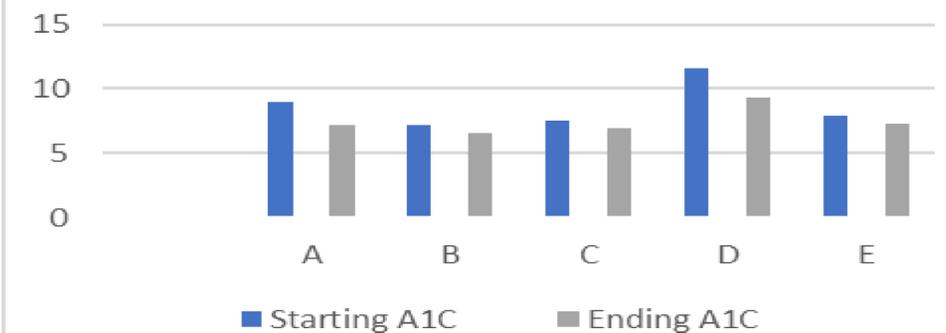
- **Step One:** Identification of patients with A1C greater than 7.0% through chart review and or initial visit. Questionnaire regarding social history, nutrition, and barriers will be administered in order to identify potential barriers. A paper folder called a “Toolbox” will be given that contains necessary patient education and information, along with a schedule of weekly telemedicine calls and corresponding questions/topics to be discussed.
- **Step Two:** Weekly check-in telemedicine calls starting one week after diagnosis to help foster and encourage assimilation of healthy lifestyle changes. Specific pre-determined questions will be asked in order to make efficient use of time.
- **Step Three:** An 8-week follow up in-clinic appointment will be scheduled in order to measure post-telemedicine hemoglobin A1C levels and compare with pre-telemedicine levels. This visit will also serve as an opportunity to celebrate achievement, offer encouragement, and set new goals for patient to achieve

Subject Focus of Telemedicine

- Week 1- Focus on the basics of DM 2
- Week 2- Focus on lifestyle and integration
- Week 3- Focus on psychological well-being
- Week 4- Focus on long-term goals and planning
- Week 5- Focus on basics Q & A

Results

Hgb A1c (Pre and Post Telemedicine)



5 Patients over 8 Weeks
12.8% Average Drop in Hgb A1C

Implication for Practice

- Increased patient provider communication
- Intervention opportunity for providers to explore and encourage *Individual Beliefs* regarding risks/benefits of proper diabetes management in order to foster healthy *Individual Behaviors*.
- Increased patient compliance as evidenced by decreased Hgb A1c levels, improved vital signs at post-telemedicine follow up visit.
- Positive patient feedback at post-telemedicine follow up visit. 5/5 favored telemedicine support
- Practice management impact – minimal time investment with added revenue (CPT Codes 99421, 99242, and 99243) Average \$31 - \$50

Acknowledgements

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